☑ PVT ENERGY GROUP
☐ PVT TRANSPORT GROUP

☑ Grande Prairie 780-830-0045
☐ Cliffdale 780-618-6184

#93-721071 RR#53
Grande Prairie, AB
T8X 0N4

W.C.B. #AB-5368265
GST# 85337 4361
Hazardous Waste Carrier ID #: ABC 10649

W.C.B. #AB-5969115 | #BC-819754
GST# 85337 4361
Hazardous Waste Carrier ID #: ABC 10149
LT Hazardous Waste #: LT1608

OFFICE USE ONLY
BOOKING #:
NOTES:

TICKET
547257

☑ VAC ☑ CONSTRUCTION
☐ TANK ☐ COMPLETIONS
☐ PRODUCTION

☐ 003-9

24 - HOUR NUMBER

(CONSIGNOR) FROM: pvt Energy group
LSD: ☑ AB ☐ BC
(CONSIGNEE) TO: pvt Energy group
LSD: ☑ AB ☐ BC
CHARGED TO (COMPANY): pvt Energy group
CONSIGNOR ADDRESS:

TANK GAUGE BEFORE: DATE: Nov 12/26
TANK GAUGE AFTER: ☐ SWEET ☐ SOUR
ARRIVE LOAD: DEPART LOAD:
ARRIVE UNLOAD: DEPART UNLOAD:
CHARGED TO LSD:
DISPATCH NAME: Adam Doucette

DANGEROUS GOODS INFORMATION

RESIDUE LAST CONTAINED	DG CHECK ONE	UN #	SHIPPING NAME	PRIMARY CLASS	SUBSIDIARY CLASS	PACKING GROUP	APPROX. CU. METERS	TOXIC BY INHALATION	QUANTITY LOADED	QUANTITY UNLOADED	BALANCE ON TRUCK
		UN 1267	PETROLEUM CRUDE OIL	3		☐ I ☐ II ☐ III					
		UN 2924	FLAMMABLE LIQUID, CORROSIVE, N.O.S (Mixed Oilfield Production Fluids May Release Hazardous Vapour) Equivalency Certificate SH 13413	3	8	☐ I ☐ II ☐ III					
		UN 1230	METHANOL	3	6.1	☐ I ☐ II ☐ III					
		UN 1268	PETROLEUM DISTILLATES, N.O.S	3		☐ I ☐ II ☐ III					
		UN 3494	PETROLEUM SOUR CRUDE OIL, FLAMMABLE, TOXIC	3	6.1	☐ I ☐ II ☐ III					
			SHIPPING NAME	NON REGULATED PRODUCT							

ERAP Ref. #: ERAP Ref. #:

ACTUAL :	OIL :	SOLID :	WATER :

I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, are properly classified and packaged, have dangerous goods safety marks properly affixed or displayed on them, and are in all respects in proper condition for transport according to the Transportation of Dangerous Goods Regulations.

DESCRIPTION OF WORK/TYPE OF EQUIPMENT USED

Tank # 902-2 - 6m³ Hot water for gamma Jetting, 1m³ for flushing

	PRODUCT SOLD	QTY./HRS	RATE	TOTAL
TRUCK #: **Trailer #:** **Unit Type:**				
DRIVER 1: **SIGNATURE:**				
START TIME: **END TIME:** **TOTAL HRS:**				
DRIVER 2 / SWAMPER: **SIGNATURE:**				
START TIME: **END TIME:** **TOTAL HRS:**				
BONUSES: ☐ VAC ☐ CHEMICAL ☐ PUP ☐ INVERT ☐ ACID HOURS: APPROVAL:	**WATER:**			

C.o P.O. AFE:

☐ MENTEE TIME SHEET

FUEL CHARGE ____ %

PRE TAX SUBTOTAL:

THANK YOU FOR YOUR BUSINESS

CUSTOMER NAME: Jeff Hedlund
CUSTOMER PHONE: 587-343-1510
CUSTOMER FAX OR EMAIL:
AUTHORIZED SIGNATURE:

WHITE - OFFICE WHITE - RESIDUE GREEN - CUSTOMER PINK - DISPOSAL

547257