**Wheelabrator Contractor EH&S Orientation and RCRA Awareness**

**Certificate of Completion**

The inclusion of my name on this certificate recognizes that I have watched the Wheelabrator Contractor EH&S Orientation and RCRA Awareness training video and understand the procedures described.

**Contractor Company Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Contractor Employee Names** | **Date of Completion** |
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