

TRIM Reference: _____



WASTE DISPOSAL APPLICATION

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| MERU WASTE DISPOSAL FACILITY Licence: L9127-2018-1 | Reference Number: _____ |
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DETAILS OF WASTE ORIGIN

Origin of Waste (Location): _____

Original Company disposing of Waste: _____

Contact Name at Original Company: _____

Contact Number of Original Company: _____

APPLICANT DETAILS

Applicant: _____

Who is carrying the Waste? (Waste Carrier) _____

Contact Person: _____ Contact Number: _____
For Waste Carrier

Client: _____ Multiple Loads
Meru Account Holder Yes No

Contact Person: _____ Contact Number: _____
Responsible for Waste

WASTE DESCRIPTION

Estimated Date of Delivery to Meru: _____

Expected Total Tonnages: _____

Laboratory Report Provided: Yes No

How many samples taken: _____

What type of waste is it? Liquid Solid Sludge

How is the waste contaminated? _____

Where is the product currently stored? _____

How is the product currently stored? _____

How long have you had the product in storage? _____

Was the contaminated product remediated? Yes No

If yes, with what product: _____

Additional Comments: _____

PLEASE NOTE

Once the City have reviewed this information (3-4 business days), we will determine what levels of contamination exist – various different classifications attract different disposal fees.

To conform to our own internal auditing procedures, we may take samples of your product at Meru Landfill after disposal to verify the authenticity of any laboratory reports provided. Should higher levels of contamination exist, we may reject future waste disposal applications/levy an additional charge for rehandling the product.

The undersigned declares the information on this application form to be correct and true.

Signature: _____

Date: _____