

Trade Waste Application Form



Business Information	
Applicants Name:	
Business Name:	Trading Name:
ABN/ACN:	
Street Address of Business:	
Postal Address: <i>(If different from above)</i>	
Contact Number/s:	
Email Address:	
Waste Disposal Information	
I/we.....(applicants name) of (Business name) apply for a permit to discharge, to the sewer of the City of Kalgoorlie-Boulder, liquid waste from the processes listed in the Waste Classification below:	

Applicants Signature:

Date:

Waste Classification
Type of Business (Eg: Food Premises, Mechanical workshop, Laboratory)
Detail each process that will generate a discharge:
1
2
3
4
List ALL pre-treatment devices on site and provide details of how they are maintained and/or serviced:
1
2
3
4
Note: The City's Trade Waste Officer will contact you or your representative within 7 days of receipt of this application to schedule an appointment to undertake a full Trade Waste assessment.
Office Use Only
Assessment Number:
Date of inspection:
Class:
Officer: