

## Yarri Road Refuse Facility – Contaminated Solid Waste Declaration Form

- Please complete and submit this form at least one (1) business day prior to disposal of contaminated solid waste at the Yarri Road Refuse Facility (Facility). Forms must be submitted to [mailbag@ckb.wa.gov.au](mailto:mailbag@ckb.wa.gov.au).
- After receipt of approval, submit the approved copy to the weighbridge operator at the Facility when disposing contaminated solid waste between 7:30 am and 4:30 pm Monday - Sunday excluding Christmas and Good Friday.
- Submission of this form does not automatically grant approval to dispose contaminated solid waste. You must receive written approval from the City prior to disposing contaminated solid waste.

### WASTE CARRIER DETAILS

NAME OF COMPANY / PERSON	
ADDRESS	
TELEPHONE	
EMAIL	

### WASTE OWNER DETAILS

NAME OF COMPANY / PERSON				
ADDRESS				
TELEPHONE				
EMAIL				
ORIGIN OF WASTE (Site name or address)				
DESCRIPTION OF WASTE (E.g. contaminated soil / sample waste)				
LABORATORY TEST RESULTS ATTACHED	<input type="checkbox"/>	RESULTS PREVIOUSLY PROVIDED	<input type="checkbox"/>	ESTIMATED VOLUME (m <sup>3</sup> )

### DECLARATION

- By signing and submitting this form you are declaring to the City of Kalgoorlie-Boulder that the information supplied to the City is accurate and the laboratory results submitted represent the waste being disposed;
- By signing and submitting this form you accept that the City of Kalgoorlie-Boulder has the right to undertake any further investigations to verify the levels of contaminants present in the waste; and
- By signing and submitting this form you agree to reimburse the City for any costs incurred by rectifying non-compliance issues if the disposed waste fails to meet the acceptance criteria for a Class II landfill facility.

PRINT NAME			
SIGNED		DATE	

<b>CKB WASTE SERVICES OFFICER TO COMPLETE</b>			
ACCEPTED	<input type="checkbox"/>	DECLINED	<input type="checkbox"/>
<b>IF DECLINED, PLEASE STATE REASON</b>			
SIGNED		DATE	

<b>REFUSE SITE OPERATOR TO COMPLETE</b>			
ACCEPTED	<input type="checkbox"/>	DECLINED	<input type="checkbox"/>
<b>IF DECLINED, PLEASE STATE REASON</b>	No City Approval		
	Expired (more than 30 days from date of approval)		
	Other		
ACTUAL TONNAGE			
SIGNED		DATE	