

SBWWTP Access Application Form

Access Times:	As per CKB website	
Company/Business N	lame:	
Controlled Waste Lice	ence Number:	
SBWWTP New Debtor recorded before Acce	rs Details form to be completed ess issue.	and payment receipt number
Documentation sighte	ed: 🗌 Copy attached: 🔲 CKB	Invoice No:
Phone No:	No: Mobile Phone:	
Email address:		
Address:		
City:	Sta	te: Post Code:
Mail Address:		
City:	Sta	te: Post Code:
It is a condition of appli	ication for access that the party a	pplying;
 Holds a current Controlled Waste Carrier Licence Ensure all deliveries of Controlled Waste meets the South Boulder Waste Water Treatment Plant criteria as stated on the CKB Website. Will pay all disposal charges as per schedule of fees and charges. Disposal of material not meeting these criteria may result in the City of Kalgoorlie- Boulder taking legal action to recovery costs incurred and/or lost income. 		
Controlled Waste Tru	ck License:	
Truck Registration: _		
Controlled Waste Driv 1 2 3 Signature:		
Date Issued:/		te Returned://
Issuing Officer:	Returnir	ng Officer:

NEW DEBTOR'S DETAILS

SOUTH BOULDER WASTE WATER TREATMENT PLANT		
BUSINESS NAME:		
ABN:		
	F	
CONTROLLED WASTE LICENSE NUMBER:		
CONTACT PERSON:		
BUSINESS ADDRESS:		
BILLING ADDRESS:		
BUSINESS PHONE:		
MOBILE:		
FAX:		
NAME		
POSITION		
SIGNATURE		