



IWM PLAN FOR BUILDING WASTE GENERATORS: APPLICATION PROCESS REVIEW SURVEY

The City of Cape Town Solid Waste Management department is reviewing the submission application process for the Integrated Waste Management Plan for Building Waste Generators. The purpose of the survey is to assess the application form and how to improve on it. Your inputs are valued and your information will be of paramount importance in our endeavour to improve processes.

SECTION 1: CONTACT INFORMATION

Trading name of business / organisation	<input type="text"/>		
Contact person	<input type="text"/>	Position	<input type="text"/>
Business address	<input type="text"/>		
Contact number (landline)	<input type="text"/>	Cell number	<input type="text"/>
E-mail address	<input type="text"/>		
Alternative contact person	<input type="text"/>	Contact number	<input type="text"/>

SECTION 2: APPLICATION FORM INFORMATION

Please select your area of expertise.

<input type="checkbox"/> Architect	<input type="checkbox"/> Waste management contractor
<input type="checkbox"/> Building contractor	<input type="checkbox"/> Other, please specify <input type="text"/>

Have you consulted the Integrated Waste Management By-law before? ☐ Yes ☐ No

Which section on the application form was most applicable to you? Select the most appropriate one(s).

<input type="checkbox"/> 5(a) Assessment of the type of waste that will be generated
<input type="checkbox"/> 5(b) Description of the methodology to store, collect, transport and dispose of waste
<input type="checkbox"/> 5(c) and (d) Details of the intended separation of waste material and your waste minimisation plans
<input type="checkbox"/> 5(e) Pollution prevention plans, the impact or potential impact on the environment of the waste created and mitigation measures to deal with these potential impacts (i.e. Pollution prevention plan)
<input type="checkbox"/> 5(f) The type or characteristics of waste produced of an environmentally sensitive nature (hazardous waste generated only)
<input type="checkbox"/> 5 (g) Targets for waste minimisation and disposal

Were the sections clear and understandable to you? ☐ Yes ☐ No

List the section number(s) that you feel need(s) improvement?

Please provide a reason

Were you given enough support and guidance when completing the form? ☐ Yes ☐ No, please state why

What form of assistance or communication would you need to complete the form?

<input type="checkbox"/> Telephone	<input type="checkbox"/> Skype	<input type="checkbox"/> Meeting
<input type="checkbox"/> E-mail response or support	<input type="checkbox"/> Written guidelines	<input type="checkbox"/> Other, please specify <input type="text"/>

SECTION 3: WASTE MINIMISATION

Do you support the re-use of demolition waste? ☐ Yes ☐ No, please state why

In future, what kind of support would you need from the City?

THANK YOU FOR PARTICIPATING IN THE SURVEY