



APPLICATION TO REGISTER AS A **WASTE GENERATOR** IN TERMS OF THE CITY OF CAPE TOWN INTEGRATED WASTE MANAGEMENT BY-LAW (PG 6756)

WHERE APPLICABLE, PROVISION OF THE FOLLOWING INFORMATION IS COMPULSORY:

1. Business details
2. Contact details of Authorised Company Representative
3. Waste Management Plan
4. Confirmation by Company Representative
5. Copy of SLA with COCT or Accredited Service Provider

For Office Purposes:

Reference Number

Type of Registration:

New		Renewal		Update of Information		De-Registration	
Y	N	Y	N	Y	N	Y	N

1. BUSINESS INFORMATION

Municipal Account No:..... **OR** Business Partner No:

Name of Company:

Company Registration No:

Company Physical Address: (**within the COCT**)

.....
.....

Latitude: Longitude:

Company Postal Address:

.....
.....

Business Tel No: Business Fax No:

Nature of business: (*manufacturing, industrial, retail, etc.*):

Tick preferred means of communication:

E-mail

Post

Fax

2. CONTACT DETAILS OF AUTHORISED COMPANY REPRESENTATIVE

Full name of person signing this form and mandated to represent the company:

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Designation:

Identity No:

Contact Tel No: Cell No:

Contact E-mail:

3. INTEGRATED WASTE MANAGEMENT PLAN

Attach company's Waste Management Plan.

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4. CONFIRMATION BY COMPANY REPRESENTATIVE

I,, authorised company representative for

....., hereby declare that all the information provided in this application

is valid and correct.

.....

.....

Signature

Date

SUBMISSION OF APPLICATIONS

Post: Director: Solid Waste Department, PO Box 298, Cape Town 8000

Hand delivered: Solid Waste Registry, 19th Floor, Cape Town Civic Centre, and Hertzog Boulevard

Telephone: 0860 103 089

Fax: 021 400 4302

E-mail: wastewise.user@capetown.gov.za

CERTIFIED COPIES OF ALL SUPPORTING DOCUMENTS TO BE PROVIDED WITH THIS APPLICATION