

FOR CUSTOMER TO COMPLETE:

Name of Customer:

UTILITIES SOLID WASTE HAZARDOUS WASTE DECLARATION FORM

Small quantities (less than 30kg or litres) of identifiable approved household hazardous waste will be accepted at the Te Puke, Athenree and Katikati Recycling Centres by prior arrangement. Please call 07 571 8008 for enquiries. Contact: Ilze Kruis

The waste will be accepted or declined by the trained Site Operator **whose decision is final**. The waste will be placed in a hazardous waste shed for storage until safe disposal.

	Address:						
	Phone	Number:					
	Materi	al Description:					
em uml	oer	Chemical Unknown chemicals will NOT be acce	No epted co	o. of	Container Description If not in original packagin		
I certify that the containers are accurately labelled as to contents.							
	Signed:						
	Date:						
	Take completed form to the recycle site of your choice during its opening hours						
	FOR SITE OPERATOR TO COMPLETE						
	Recycle Site (circle one):		Athenree	Katiko	nti Te Puke		
	Accepted / Declined						
If declined, please state reason:							
	Signature:				Date:		