

Applicant Contact Details

Name of Applicant (Company)	ACN
Address	
Suburb	Postcode

Nominated Representative Contact Details

Name of Nominated Representative	
Email	Phone
Work Address of Nominated Representative	
Suburb	Postcode

Applicant Operation Details

Other States Where Applicant Operates	Number of Employees and/or Contractors in WA
Description of Waste & Recycling Industry Activities in WA	
Other Comments in Support of Application	

Signature of Authorised Person	Signature of Nominated Representative (If Different to Authorised Person)
Date	Date