

Government of Western Australia Department of Water and Environmental Regulation

Ref No.

Date stamp

Application for a Consignment Authorisation to Transport Controlled Waste into WA

Environmental Protection (Controlled Waste) Regulations 2004

FORM CW17

The Department of Water and Environmental Regulation (the Department) regulates the transportation of controlled wastes.

The <u>Environmental Protection (Controlled Waste) Regulations 2004</u> (the Regulations) provide for the licensing of carriers, drivers, and vehicles involved in the transportation of controlled waste on roads in Western Australia (WA).

Retain a copy of this form for your records.

Before completing this application form please ensure you have contacted the Department on +61 8 6364 7000.

It is an offence under s 112 of the *Environmental Protection Act 1986* to provide false or misleading information in connection with an application for a consignment authorisation.

Allow five working days for the Department to process complete application forms for consignment authorisation.

If there is insufficient room on any part of this application form, continue on a separate sheet of paper and attach to this application form, numbering ALL pages.

Incomplete or illegible applications will not be processed. If you are unsure about completing any part of this application, please contact Controlled Waste on +61 8 6364 6946.

Part 1 Waste Holder Details			
Waste holder means a person who is in possession or control of a controlled waste on premises or whose apparatus or activities produce controlled waste.			
Waste holder name			
Australian Business Number (ABN)		Australian Company Number (ACN)	
Physical address			
Suburb		State	
Postcode			
Postal address	Same as physical addres	S	
Suburb		State	
Postcode			

Part 1 Waste Holder Details (Continued)					
Primary Contact Infor	mation				
Given/first names					
Surname/family name					
Salutation	Mr Other (plea	Ms ase specify)	Miss	Mrs	
Position					
Telephone			Mobile		
Email					

Part 2 Waste Generation Details		
Was the waste generated by the waste holder?	Yes (go to Part 3) No (complete details below) Waste generator name: Physical address:	

Part 3 Physical Location of Wast	Part 3 Physical Location of Waste			
Is the waste located at the waste holder's physical address listed in Part 1?	Yes (go to Part 4)			
Is the waste located at the waste generator's physical address listed in Part 2?	Yes (go to Part 4) No (complete physical location details below) Physical location of waste:			

Part 4 Waste Description

In order to determine if the waste is suitable to enter WA, and to prevent delays when assessing your application, please ensure your waste description is detailed and complete.

A chemical analysis of waste is required unless the waste is from a well-established or documented industrial process.

Waste type				
Waste source				
Other waste description details				
Is a chemical analy attached?	rsis of the waste	Yes	No	
Waste form		Liquid	Sludge	Solid
		Soil and liq	uid	Soil
NEPM waste code			ANZSIC code	
Dangerous Goods class			UN number	
		Drum	Tank	IBC
Current containmer	nt type	Pallet	Other (please	specify below)
How many loads will be transported?			Total volume of waste (kg, L, t)	
When will the waste be transported?		to		

Part 5 Transporter Details

To comply with the *Environmental Protection (Controlled Waste) Regulations 2004*, the transporter must use a Controlled Waste Tracking Form for any transportation of a controlled waste on a road in WA.

Transporter name			
Is the transporter a licensed carrier in WA?	Yes (please supply carrier licence number and go to part 7.) T		
	No (please complete rem	aining Part 5 details.)	
Australian Business Number (ABN)		Australian Company Number (ACN)	

Part 5 Transporter	Details (Contil	nueu)		
Physical address				
Suburb			State	
Postcode				
Postal address	Same as	s physical addres	SS .	
Suburb			State	
Postcode				
Primary Contact Info	rmation			
Given/first names				
Surname/family name				
Salutation	Mr	Ms	Miss	Mrs
Caldiation	Other (pl	ease specify)		
Position			Email	
Telephone			Mobile	
Part 6 Jurisdiction	Approval/Licer	nce Details		
Does the transporter relevant approvals/lic		Yes (pleas	e attach a copy and	complete Part 6.)
transport controlled v		No (contact the Department.)		
Approval/licence number			State of issue	
Copy of approvals/licattached?	ence	Yes	No	
Part 7 Vehicle Details				
Method of transport (you may mark more than one box)		Road	Rail	Ship
Type of vehicle to tra	nsport waste			

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Part 7 Vehicle Details	
Are the vehicles licensed or approved to transport controlled waste?	Yes (please supply Approval/licence number and State of issue.) Approval/licence number: State of issue:
Is a licence required for vehicle type?	Yes No (please provide further details below)

Part 8 Waste Facility Details					
Name of waste facility					
Waste facility licence number issued under Part V of the <i>Environmental Protection Act 1986</i>					
Location/address of facility					
Suburb			State		
Postcode					
Primary Contact Infor	mation				
Given/first names					
Surname/family name					
	Mr	Ms	Miss	Mrs	
Salutation	Other (plea	ase specify)			
Telephone			Mobile		

Part 8 Waste Facility Details (Continued)			
Do you have confirmation from the waste facility that they are able and willing to accept the listed waste?	Yes No (please provide fur	ther details below)	
Method of disposal or treatment	Recycling Energy Thermal desorption Other (provide details b	Immobilisation Incineration Storage pelow)	Landfill Chemical treatment Physical treatment
Is the waste to undergo further treatment/ disposal at another facility?	Yes (please provide further details below.) Name of waste facility: Waste facility licence number issued under Part V of the Environmental Protection Act 1986: No		
Part 9 Declaration and Signature For your application form to be accepted, it must be signed by the most relevant person.			

By signing this application form you are declaring that the statements on this application form are true and correct. Providing false or misleading information is grounds for revocation of Interstate **Waste Transport Certificate.**

I have read and understood the Environmental Protection (Controlled Waste) Regulations 2004.

I declare that the statements made in this application are true and correct.

To be Signed	To be Signed by the Waste Holder		
Printed name in full			
Position			
Signature of individual		Date of signing	

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Part '	Part 10 Required Supporting Documentation/Information		
Pleas	Please include the following as part of your application package.		
	Copy of the chemical analysis of the waste.		
	Copy of the carrier licence or approval to transport controlled waste.		
	Confirmation letter from proposed waste facility that they are capable of accepting the controlled waste category that you intend to transport.		

Part 11 Lodgement		
By post to:	By email to:	In person or by courier to:
Department of Water and Environmental Regulation Controlled Waste Locked Bag 10 JOONDALUP DC WA 6919	controlled.waste@dwer.wa.gov.au By fax to: +61 8 6467 5520	Reception Department of Water and Environmental Regulation Prime House 8 Davidson Terrace JOONDALUP WA 6027

Enquiries:

For general enquiries regarding controlled waste, telephone Controlled Waste on +61 6364 6946.

For regional enquiries regarding premises or issues in your local area, please contact the <u>department's regional office</u>.