

Application for trade waste discharge – Food Premises

1. Contact Information

Trading Name	
Street Address	
Postal Address	
Phone	
Email	
Rates Assessment Number	
Contact Name	
Position	
Mobile	

2. This Application relates to: *(Please tick those that apply)*

A proposed new discharge	<input type="checkbox"/>	An existing discharge for which no consent exists	<input type="checkbox"/>
Renewal of a consent	<input type="checkbox"/>		<input type="checkbox"/>

Bakery	<input type="checkbox"/>	Meat (Butchery or Fish)	<input type="checkbox"/>
Restaurant	<input type="checkbox"/>	Other, please specify	<input type="checkbox"/>
Staff Cafe	<input type="checkbox"/>		<input type="checkbox"/>

Takeaway	<input type="checkbox"/>	Eating House 26-50 seats	<input type="checkbox"/>
Caterer	<input type="checkbox"/>	Other, Please Specify	<input type="checkbox"/>
Eating House <25 seats	<input type="checkbox"/>		<input type="checkbox"/>

3. Site Information

Pre-Treatment System

Do you have a Grease Trap or an alternative system?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have any Screen/filter system fitted to your sinks	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Grease Trap/Converter

Type of Trap/Converter	
Location of Grease Trap/Converter	
Dimensions of Trap (W x H x D)	
Capacity of Grease Trap/Converter (Litres)	
Method of Cleaning	
Frequency of Cleaning	
Current Cleaning Contractor	

Is there a column/pipe attached to your trap for cleaning?	Yes	No
Do you have a waste master(s) connected to the grease trap?	Yes	No
Do you have a dishwasher(s) connected to the grease trap?	Yes	No

4. Hazardous Waste (including waste oil)

Are other hazardous waste collected on site? If so, what type of waste is collected	
Name and address of current contractors used to collect hazardous waste	
Frequency of collection	
Has an independent waste audit been carried out on your premise? If yes, which company did you use?	

5. Site Plans

Site plans of the premises are attached which clearly show the location of the following as appropriate

Process areas	Storm water drains	
Pre-treatment devices	Grease Trap/Converter	
Hazardous goods storage	Emergency spill containment device	
Trade Waste drains	Domestic waste water drains	

6. Health and Safety

The Health and Safety Requirements and security arrangements for Wastewater Authority entering the premises are as follows:

DECLARATION

PLEASE NOTE: Local Government Act 2002 allows the following

All Authorised Officers or Authorised Agents of the Council, or any analysts, may enter any premise believed to be discharging trade waste at any time in order to determine any characteristics of any actual or potential discharge by:

- a. Taking readings or measurements
- b. Carrying out site inspections audits; and/or
- c. Taking samples for testing, of any solids, liquid or gaseous material or any combination or mixture of such materials

PRIVACY

The information supplied in this application form will be held and used by Manawatu District Council (MDC). The information will not be disclosed by MDC unless legally required under the Local Government Official Information and Meetings Act 1987 or for one of the purposes in connection with its collection. The information supplied will be used for: assessing and processing this application, for administration purposes and updating our records to ensure all records are accurate. You have the right to request access and correction of information collected.

I, _____

Confirm that:

1. I believe all the information contained in this application is true and correct.
2. I am duly authorised by the above named trade premise to make this application.

Signed: _____

Date: _____

FOR OFFICE USE ONLY

DATE RECEIVED:

APPLICABLE FEES:

NOTES:

Application Approved By:

Date:

LETTER SENT: