**Purpose of this form**

All businesses that discharge trade waste into the sewerage system are required o have a Trade Waste Agreement with East Gippsland Water.

You should complete all sections of this form for East Gippsland Water to fully consider this application.

Following a successful application, you will be required to sign an East Gippsland Water Trade Waste Agreement which will include more detailed information.

**Privacy notice**

We manage your personal information in accordance with the Information Privacy Principles that are set out in the Privacy and Data Protection Act 2014 (VIC).

If you choose not to provide us with the requested information, we may not be able to process your application.

We may share your information with a third party, however the information will always be used in accordance with our policies as stated. We may disclose your information to other parties as required by law, or to contractors, who are required to comply with our privacy obligations.

You can get more information about the way in which the organisation will manage your personal information, including our privacy policy and the Information Privacy Act 2000 at <https://www.egwater.vic.gov.au/privacy>

**Filling in this form**

* Please use black or blue pen
* Print in BLOCK LETTERS
* Mark boxes like this 🞎 with a ✓ or 🗶

**Returning your form**

Check that all required questions are answered and that the form is signed and dated.

You can return this form via:

* Post – East Gippsland Water

PO Box 52

Bairnsdale VIC 3875

* E-mail - [egw@egwater.vic.gov.au](mailto:egw@egwater.vic.gov.au)
* In Person - 133 MacLeod St,

Bairnsdale VIC 3875

**For more information**

Please visit our website at [www.egwater.vic.gov.au](http://www.egwater.vic.gov.au) or call us on 1300 720 700 Monday to Friday, between 8:30am and 5:00pm, excluding public holidays.

**Property details**

1. Property Address

(where the trade waste will be discharged)

|  |  |
| --- | --- |
| Click | |
| Click | Postcode: Click |

2. Postal Address

(if different from property address)

|  |  |
| --- | --- |
| Click | |
| Click | Postcode: Click |

4. Business Name

|  |
| --- |
| Click |

5. Contact Number

|  |
| --- |
| Click |

6. ABN Number

|  |
| --- |
| Click |

**Contact person**

7. Contact Person (full name)

|  |
| --- |
| Click |

8. Contact Email Address

|  |
| --- |
| Click |

**Application**

9. Type of Business

|  |  |
| --- | --- |
| Abattoir | Bakery |
| Cafe | Car Wash |
| Clinic/Dental | Food Manufacturers |
| Swimming Pool | Industrial Laundry |
| Hospital/Medical | Mechanical Workshop |
| Industrial Processing | Pizza Shop |
| Motel/Hotel Kitchen | Fast Food/Take Out |
| Restaurant | Retirement/Nursing Home |
| Fuel/Service Station | Truck/Large Wash |

Other:

|  |
| --- |
| Click |

10. Please specify the substances/chemicals/contaminants that may be present in the Trade Water

|  |  |
| --- | --- |
| Acids/Alkalis | Animal Waste |
| Salt/Brine | Vegetable Processing Waste |
| Detergents | Dirt/Sand/Gravel |
| Disinfectants | Fat/Cooking Oil |
| Food Particles | Herbicides/Pesticides |
| Laundry Waste | Meat Processing Waste |
| Motor Oil/Petroleum | Plaster Cast (Medical) |
| Chemicals:  Pharmaceutical | Chemicals:  Agricultural |

Other:

|  |
| --- |
| Click |

11. The reason for making this application

|  |
| --- |
| I am establishing a new business which will produce trade waste. |
| I am taking over an existing business which produces trade waste. |
| I have an existing business producing trade waste and do not currently have a Trade Waste Agreement with East Gippsland Water. |

12. Business trading days

|  |  |  |  |
| --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday |
| Friday | Saturday | Sunday | 7-Days |

13. What is the maximum seat capacity of the business approved by council? (if applicable)

|  |
| --- |
| Click |

14. Estimated discharge volume each year.

|  |
| --- |
| Click |

15. Trade Waste Apparatus

Grease Trap

Triple Interceptor

Other:

|  |
| --- |
| Click. |

16. Apparatus Size:

|  |  |  |  |
| --- | --- | --- | --- |
| Length | Width | Depth | Volume |
| Click | Click | Click | Click |

17. Are there any areas which collect rain water connected to the sewer?

|  |  |
| --- | --- |
| Yes | No |

18. List the number of kitchen fixtures at your business property that are connected to the sewer.

|  |  |
| --- | --- |
| **Fixtures in food preparation kitchen**  **areas:** | **Number of**  **fixtures:** |
| *Single Sink* | Click |
| Double Sink | Click |
| Hand basin | Click |
| Floor basin / drain (food preparation) | Click |
| Wok table (waterless) without water flow | Click |
| Wok table with continuous water connection | Click |
| Garbage/bin wash (max. 20m2 unroofed) | Click |
| Domestic dishwasher | Click |
| Commercial dishwasher | Click |
| Tunnel dishwasher | Click |
| Stream ‘combi’ oven | Click |
| Cleaners sink | Click |
| Glass washers | Click |
| Other: Click | Click |

19.1 If EGW need to schedule an inspection of your apparatus please advise of your proffered day:

|  |  |  |
| --- | --- | --- |
| Monday | Tuesday | Wednesday |
| Thursday | Friday |  |

19.2 Ideal time; (between the hours below)

|  |  |
| --- | --- |
| Click | AM / PM |
| Click | AM / PM |

**Waste removal contactor**

Please specify the EPA Registered Waste Removal Contractor that is/will be used and the frequency that the trade waste apparatus is/will be cleaned out:

Contractor (full name/business name)

|  |
| --- |
| Click |

Current or planned clean out frequency (in months)

|  |
| --- |
| Click |

**Confirmation**

I declare that:

* The information I have provided in this form is complete and correct.
* I understand giving false or misleading information is a serious offence.

Applicants Name

|  |
| --- |
| Click |

Signature

|  |
| --- |
| Click |

Date Submitted

|  |
| --- |
| Click here to enter date. |