

## CHARITY DETAILS FORM

Issue No: 1

Charity Name:
Registered Address:
Shop/Facility Address (if different from above)
Name of Contact:
Charity Registration Number:
Email Address:
Telephone Number:

**Disposal Details**

Type of Waste:
Vehicle Registration:
Preferred Transfer Station for Disposal:

**The tonnages will be monitored and should they become excessive the approval will be reviewed.**

On arrival at the site for the first time any new drivers will be required to undergo a site rules induction (approx. 20 mins). The waste transfer stations site rules stipulate that PPE must be worn at all times. The requirements are hard hat, Hi-Viz, safety boots and gloves. Please can you ensure that PPE is provided to all your drivers and passengers when coming to the transfer stations. The sites can be very busy with large plant and vehicles and so your drivers must comply with any Health & Safety instructions given whilst on site.

If any of your vehicle details change please let us know in advance to avoid delays on site, by contacting Amanda Bryden 03000 268088 or John Smart 03000 267958.

I declare the above details are correct and the waste is **household waste only** from your charity shop as defined by The Environmental Act 1990. (I.e. excludes fixtures and fittings and any other waste from the fabric of the building, or construction waste).

Completed by: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_