

Once completed this document should be faxed to: 086 532 7702 or e-mailed to rietfontein1@gmail.com, 24 hours prior to intended disposal and not later than 15H30 Monday to Friday



EKURHULENI METROPOLITAN MUNICIPALITY

CONTROL AUTHORISATION SHEET (CAS)

RIETFONTEIN LANDFILL SITE

DATE ON WHICH THE FOLLOWING WASTE STREAMS WILL BE DELIVERED TO THE RIETFONTEIN LANDFILL SITE FOR DISPOSAL: _____

GENERATOR (AS PER QUESTIONNAIRE SUBMITTED)	TRANSPORTER (INDICATE IF TRANSPORT IS TO BE SUBCONTRACTED)	WASTE DESCRIPTION (AS PER QUESTIONNAIRE SUBMITTED)	VOLUME (INDICATE EXACT BIN, DRUM OR VEHICLE SIZE AND HOW MANY)	COMMENTS (E.G. VEHICLE REGISTRATION, WMD NUMBER, SPECIAL INSTRUCTIONS ETC.)	FOR LAB USE ONLY

SIGNED BY:

PRINT NAME: _____

DATE CAS SENT: _____