

Form: EMA/WDR 4 WASTE DISPOSAL RETURN (Reg. 55)



[Note: A facility that holds a waste disposal permit must send returns to the Department of Environment of all disposals, discharges or emissions to which the permit relates. Returns must be in writing and sent every 12 months from the issue of the permit, except that in the case of a significant disposer or discharger the return must be sent every 6 months from the issue of the permit.

Waste disposal returns must relate to each site or premises occupied by the facility. Failure to send a return by the due date is an offence under section 44 of the Act and can lead to suspension of the permit.]

Permit Number:

Period covered by return

6 months/12 months commencing [date of issue of the permit, or date of last return]

Particulars of the facility Name		
Address		
Tel no:		
Location of premises covered by the p	permit	
Nature of premises		
Nature of commercial or industrial act	tivity	
Particulars of authorized person Name		
Position (if firm or body corporate)		
Address		
Telephone:	– Facsimile:	
Mobile:	_E-mail:	

Type of permit (may be more than one)

- □ Solid waste
- □ Liquid waste
- □ Livestock
- □ Air pollution

Category (Solid or liquid waste only)

□ Construction □ Operational Nature of the construction/operation

Date of commencement of construction/operation

Type of disposal (Solid or liquid waste only)□Standard□Significant

Kind of disposal/discharge/emission permitted

Amount of disposal/discharge/emission permitted

Particulars of disposal of solid waste/discharge of liquid waste/emissions of waste and pollutant

(Solid and liquid waste)	
Method of removal of waste	
Waste operator	
Amounts removed	

Final disposal of waste Landfill and/or recycling facility used

Amounts deposited

(Air pollution)

Fuel consumption – name of fuel, quantity per day

Stack emission monitoring results in relation to ambient air quality standards

Recycling of disposals/discharges/emissions

Recycling equipment or facility used

Amounts recycled

Treatment of hazardous wastes (if any)

Pollution incidents at the premises (if any)

Complaints made to the facility about disposals, discharges or emissions from the facility (if any)

Declaration

As owner/authorised person of the facility described above I certify that the particulars set out above are true to the best of my knowledge and belief.

Signature of owner/authorized person

Date

Send this return in triplicate to: Waste & Pollution Control Administrator c/- Department of Environment, P.O. Box 2109, Government Buildings, Suva