

FIRST SCHEDULE

PRESCRIBED FORMS

(Regulations 4,5 and 6)

REPUBLIC OF ZAMBIA

Environmental Council of Zambia

Form WM2

**The Waste Management (Licensing of Transporters of Wastes and
Waste Disposal Sites) Regulations, 1993**

APPLICATION TO OWN/OPERATE WASTE DISPOSAL FACILITY

(Regulation 4)

(To be completed in Triplicate)

To: The Chief Inspector (Pollution Control)
Environmental Council
P O Box 35131
LUSAKA

Name and address of applicant.....
.....
.....

Location of Site/Plant.....
.....
.....

Type of waste to be disposed.....
.....
.....

Quantity being disposed per annum/tonne/kg.....
.....
.....

Type of facilities/treatment to be carried on at site/plant
.....

- (a) Landfill.....
- (b) Compost.....
- (c) Incinerator.....
- (d) Other Specify.....

Estimated life span of plant/site
.....
.....

Proposed hectarage/area of site/plant (include site plant and design.....
.....
.....

Summary of environmental impact statement
.....
.....

Any other information
.....
.....

.....
Date Signature

Designation/title.....

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Application received..... Fee paid
.....

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Chief Inspector (Pollution Control)
Environmental Council
Inspectorate