

ACCREDITED GSAS SERVICE PROVIDER

Waste Management

(Application Form)



SECTION 1 (To be filled by GORD)

Reference Number	Date
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Type of Registration							
New		Renewal		Update of information		De-registration	
YES	NO	YES	NO	YES	NO	YES	NO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GORD Decision		Signature
Approved	Denied	
<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 2 (To be filled by applicant)

1. Service Provider Information			
Commercial Register No			
Company Name			
Country of Operating			
Address		PO Box	
Telephone		Fax	
E-mail		Website	
2. Authorized Company Representative			
Name			
Designation		Identity No.	
Telephone		Mobile	
E-mail			

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3. Company Profile

- Provide an overview for the company's relevant business plan and product and service offering capabilities, with market expertise and number of years the team has been involved with waste management activities.
- Attach company profile including, but not limited to; list of clients, previous contracts, values of contracts, duration of contracts, statement of satisfactory performance from top clients in terms of contract value, quality certificates (e.g., ISO, etc.) and/or other similar certificates, accreditations, awards and citations received.... etc.

4. Waste Management Plan

- Attach company's Waste Management Plan, including but not limited to details for:
 - ✓ List of all services/activities to be considered for accreditation.
 - ✓ Defined workflows in operating procedures.
 - ✓ Waste management process for various type of waste, including but not limited to: domestic waste, medical waste, chemical waste and industrial waste.
 - ✓ Organic waste management.
 - ✓ Transportation fleet.
 - ✓ Disposal sites, landfills and treatment facilities.
 - ✓ Waste tracking system.
 - ✓ A list and sample of waste management Records.
 - ✓ Quantity flow documentation in the operations manual
 - ✓ Safety plan including emergency response procedures.
 - ✓ Past records of Service Provider activities.
 - ✓ Industrial cleaning.
 - ✓ Hygiene & Sanitation.

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5. Scope of Business

- Populate the following table indicating the scope of activities and types of waste:

Type of Waste	Subtype of Waste	Storage	Collection	Recycling	Processing	Disposal	Others (specify)	No. of Vehicles Transporting Waste	No. of Employees Transporting Waste
Hazardous	Oil								
	Paint								
	Tires								
	Fluorescent Tubes								
	Hazardous Liquids								
	Batteries								
	Ozone Depleting Waste (e.g. CFC)								
	Asbestos								
	Electronic Waste								
	Others (specify)								
Hazardous-Medical	Medical								
	Others (specify)								
Non-Hazardous	General								
	Metal								
	Plastic								
	Paper								
	Plants/trees								
	Cardboard								
	Food								
	Construction and Demolition								
	Others (specify)								

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6. Licenses for Waste Treatment Activities/Facilities

- Attach certified copies of all permits or licenses issued in terms of legislation by the Local Authorities to operate waste management activities of facilities.

7. Licenses for Waste Transport Activities

- Attach certified copies of all transport permits or licenses issued in terms of legislation by the Local Authorities.

8. Certificate of Registration for Scrap Metal Dealer

- Attach certified copy of a valid certificate of registration as issued by the relevant authority.

9. Confirmation by Authorized Company Representative

- Fill in the following, sign and stamp:

I,, Authorized Company Representative for, hereby declare that all the information provided in this application is valid and correct.

Signature

Date

Note: SIGNED AND CERTIFIED COPIES OF ALL SUPPORTING DOCUMENTS MUST BE PROVIDED WITH THIS APPLICATION