

Product Approval Application Form

Trade Waste Basic Pre-treatment Products

Applicant (*Customer Name / Company*): _____

Postal Address: _____

Postcode: _____

Contact Person: _____

Phone: _____ Mob: _____

Fax: _____

Email: _____

Product

(*Product type, trade name or brand name*)

Installation Requirements /Product Application

(*Please attach relevant information*)

Product Certification / Approvals

(Please list, if applicable, all current approvals and attach all supporting documentation and data relevant to these accreditations)

Billing - An invoice for the services provided by SA Water staff, including sample analysis, will be issued at the end of the approval process. (If applicable)

Name: _____

Date: _____

Signature: _____

