

HOME COMPOSTING PROJECT

APPLICATION FORM FOR DATABASE

Please indicate with an "X" where applicable			
Name and Surname:			
Contact Number:			
Physical Address:			
Email Address:			
Does your property include a garden or yard area?		YES	NO
Do you generate raw fruit and vegetable waste on a regular basis?		YES	NO
Do you permanently reside in the George Municipal Area?		YES	NO
I hereby confirm that the information provided is true and correct		YES	NO
Signature:			

This completed form must be please sent to gnotshokovu@george.gov.za / kvstoffels@george.gov.za or dropped off at 82 Meade Street, Environmental Services, with a **copy of your George Municipal Account.**

For any further enquiries please contact Grace Notshokovu / Karin Stoffels (044 802 2900).

Thank you