

Supplement 5 – Veterinary Services



This is an attachment to the Trade Waste Application. Please provide the following information about your business operations (or intended operations). This will help us verify appropriate waste treatment and charging.

Business trading name _____

| Process Details | |
|---|---|
| 1. Will you be using wet (non-digital) X-ray processes? | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please also complete Supplement 6 |
| 2. Will you be using a sterilising unit? | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please describe _____ _____ |
| 3. Will plaster be used? (i.e. for setting limbs) | Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, show location of Plaster Trap or Settling Trap on your plans attached to this application |
| 4. Do you intend to carry out: 4.1 animal grooming? 4.2 animal washing? | Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, show location of sink strainers or bucket trap on your plans attached to this application |
| 5. Do you intend to keep animals on the premises overnight? | Yes <input type="checkbox"/> No <input type="checkbox"/> |