



a world class African city



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INFORMATION SHEET/QUESTIONNAIRE

House no: Street Name: Township:

Depot: Midrand Round: Day of the Week:

Type of Property (Select from below)

Single Stand: Flat: Townhouse: Cluster: Business: Mixed Use:

Other (Specify):

Type of Bin (Select from below)

85L: 120L: 240L: Other (Specify):

Type of Service (Select from below)

Domestic: Business: Dailies:

Other (Specify):

Frequency of Collection per Week

x1: x2: x3: x4: x5: x6: x7:

Other (Specify):

Details of Owner / Tenant

COJ Rates Acc. Number: Surname:

Full Names:

Cell: Tel (H): Tel (W):

E-mail:

Owner: Tenant: Other (Specify):

Signature: Bin Verification Official:

Date Visited: Effective Date:

Notes / Comments