



Garden Route District Municipality Home Composting Pilot Project Application Form

Please indicate with an 'X' where applicable

Name and Surname:		
Home telephone number:		
Cell phone number:		
Physical Address:		
E-mail 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
Are you willing to weigh and report (monthly) on the organic waste generated?	Yes	No
Would you like to be provided with a composting bin?	Yes	No
Would you like to be provided with a worm farm (vermicomposting)?	Yes	No
Do you permanently reside in Zoar?	Yes	No
I hereby confirm that the information provided is true and correct?	Yes	No
Signature:		

Please note that provision was made to accommodate only thirty (30) households in the pilot project. The first thirty applications received will be selected to participate in the pilot project. All selected households will be contacted to attend an information session.

This completed form must please be sent to wayne@gardenroute.gov.za.

For any further enquiries please contact Wayne Odendaal on 044 693 0006.