



Ref No.
Date stamp

**Controlled Waste Spill/Discharge Notification**  
*Environmental Protection (Controlled Waste) Regulations 2004*

**FORM CW22**

The Department of Water and Environmental Regulation (the Department) regulates the transportation of controlled wastes.

The *Environmental Protection (Controlled Waste) Regulations 2004* (the Regulations) provide for the licensing of carriers, drivers, and vehicles involved in the transportation of controlled waste on roads in Western Australia (WA).

**Retain a copy of this form for your records.**

The following notification and information is provided in accordance with condition SM2 of the bulk and packaged controlled waste carrier licence as issued by the Department under the Regulations.

If there is insufficient room on any part of this form, continue on a separate sheet of paper and attach to this application form, numbering ALL pages.

**Incomplete or illegible applications will not be processed. If you are unsure about completing any part of this application, please contact Controlled Waste on +61 8 6364 6946.**

**Part 1 Spill/Discharge Location Details**

Date of spill	Time of spill
Spill or discharge of controlled waste at/ from: (Mark relevant box indicating the nature of employment to which this notification refers.)	<input type="checkbox"/> Waste holder premises <input type="checkbox"/> On public road during transport
Location of spill/discharge (Provide the address/location where the spill occurred. NOTE: A map of the premises or location showing the point of discharge and the impacted area must be attached.)	
Suburb	State
Postcode	

### Part 2 Controlled Waste Details

Brief Description of the Controlled Waste Spilled/Discharged Including the Waste Code(s)

Controlled waste tracking form (CWTF) number

Composition of waste

Amount spilt/discharged

Mark relevant box

Kilograms

Litres

Tonnes

#### Waste Holder Details

Provide the details of the waste holder from where the controlled waste was collected.

Waste holder's business/entity name

Address

Suburb

State

Postcode

### Part 3 Incident Details

Description of operation or equipment

Brief description of the operation occurring at the time of spill and/or the equipment that malfunctioned.

Description of incident

Describe the cause of the controlled waste spill/discharge.

Environmental impact

Did the spill cause pollution? If so, describe the nature and extent of the pollution or environmental impact.

Remedial action

To minimise the effect on the environment, what action was taken and who coordinated this action?

**Part 3 Incident Details (Continued)**

Controlled waste clean-up and removal	How and by whom was the controlled waste removed, dispersed, destroyed, disposed or otherwise dealt with?		
Address of premises where spilt controlled waste was transported to			
Suburb		State	
Postcode			

**Part 4 Carrier Details**

Carrier licence number	T
Carrier name	

**Part 5 Driver Details**

Provide details as they appear on the driver's controlled waste driver's licence.	
Driver's licence number	
Expiry date	
Given/first names	
Surname/family name	

**Part 6 Vehicle or Tank Details**

Vehicle registration or tank ID number		Carrying capacity (litres)	
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**Part 7 Details of Person Reporting the Spill/Discharge**

Given/first names			
Surname/family name			
Position			
Email			
Telephone		Mobile	

**Part 8 Spill Management Plan and Equipment Details**

<p>Was the spill management plan in vehicle and accessible by driver at time of spill?</p>	<p>Yes</p> <p>No, please provide details below:</p>
<p>Were the procedures in the spill management plan implemented during the incident?</p>	<p>Yes</p> <p>No, please provide details below:</p>
<p>Was the spill management plan suitable to minimise the effect on the environment?</p>	<p>Yes</p> <p>No, please provide details below:</p>
<p>Was the spill management equipment available in/on the vehicle or tank?</p>	<p>Yes</p> <p>No, please provide details below, then go to section 8</p>

**Part 8 Spill Management Plan and Equipment Details (Continued)**

Was the spill management equipment suitable to minimise the effect on the environment?

Yes

No, please provide details below:

**Part 9 Preventive Measures**

What measures have been implemented to ensure this situation does not recur?

**Part 10 Declaration and Signature of Carrier**

For this notification to be accepted, it must be signed by a person duly authorised to sign for and on behalf of the carrier.

**By signing this form you are declaring that the statements on this form are true and correct.  
Providing false or misleading information is grounds for revocation or suspension of a licence.**

Name of person duly authorised to sign for and on behalf of company named at Part 4 above; or duly authorised representative of the carrier named at Part 4 above.

Position

Signature of driver (on behalf of carrier)

Date of signing

**Part 11 Declaration and Signature of Driver**

**By signing this form you are declaring that the statements on this form are true and correct.  
 Providing false or misleading information is grounds for revocation or suspension of a licence.**

I declare that the statements made in this notification are true and correct.

Driver

Signature of individual

Printed name in full

Date of signing

**Part 11 Required Supporting Documentation/Information**

Please include the following as part of the notification.

A map of the premises or location showing the point of discharge and the impacted area.

A copy of the spill management plan used by the driver.

**Part 12 Lodgement**

By post to:

Department of Water and Environmental Regulation  
 Controlled Waste  
 Locked Bag 10  
 JOONDALUP DC WA 6919

By email to:

[controlled.waste@dwer.wa.gov.au](mailto:controlled.waste@dwer.wa.gov.au)

By fax to:

+61 8 6467 5520

In person or by courier to:

Reception  
 Department of Water and Environmental Regulation  
 Prime House  
 8 Davidson Terrace  
 JOONDALUP WA 6027

Enquiries:

For general enquiries regarding controlled waste, telephone Controlled Waste on +61 8 6364 6946.

For regional enquiries regarding premises or issues in your local area, please contact the [regional DWER office](#).

**Office Use Only**