

NEW COLLECTION, GLASS PACKAGING

Size of waste container:

- ☐ 140 l
☐ 240 l
☐ 360 l
☐ 660 l
☐ Other _____ litres

Emptying interval:

- ☐ Every week
☐ Every 2 weeks
☐ Every 4 weeks
☐ Every 8 weeks
☐ Every 12 weeks

First collection week suggestion: _____

Name: _____

Personal identification
number/ business ID: _____

Collection address: _____

Billing address: _____

E-mail: _____

Shared container:

- ☐ Yes
☐ No

The responsible person of a shared
container and address: _____

Properties sharing
the container: _____

Signature of the
responsible person: _____

Date and signature: _____