



Office of the Drainage Authority

**Application Form for Reassessment of Chemical Oxygen Demand (COD)
under the Trade Effluent Surcharge Scheme**

To: Drainage Services Department (DSD)

Account No.# : 12345678901, 55556555566

We, the undersigned, have appointed DEF Laboratory (HOKLAS laboratory) to apply for revision of Trade Effluent Surcharge for the premises. We understand that the revised COD values are not transferable if there is a change in the registered consumer, and that any change in the appointed laboratory should be approved by DSD before sampling starts.

Registered Consumer (R.C.) : ABC Co., Ltd.Signature of R.C.
representative@: Wong KFDate : 29/10/2008Name of R.C. representative@ : WONG KA FATPost : Director

Name of establishment*

: ABC Restaurant

Address

: 2/F, Sha Tin Centre, Sha Tin,
N.T.

or Water account number(s) if there is no TES account number

@ if registered in the name of a company

* name of business/premises, e.g. name of restaurant



Office of the Drainage Authority

Letter of Undertaking

To: Drainage Services Department (DSD)

For revision of Trade Effluent Surcharge rate of

Name of registered consumer : ABC Co., Ltd.

Name of establishment : ABC Restaurant (if different from above)

we, DEF Laboratory (HOKLAS laboratory), agree to undertake full responsibility for sampling and testing of the application. We confirm that the information provided in this COD reassessment proposal is correct and up-to-date.

Sampling personnel are staff of our laboratory. They have been trained by approved trainer of our laboratory for trade effluent sample collection and meet the criteria as listed in Appendix V of "Guidelines on Application for Reassessment of COD".

List of sampling personnel for this application: (in alphabetic order by lastname)

Please refer to the latest competent sampler list submitted to DSD by our laboratory on 20-9-2008. (reference no. 345678).

Declaration:

1. We understand that unacceptable performance of sampling or testing in the course of the application may cause deletion of our laboratory from the list of approved laboratories for revision of Trade Effluent Surcharge rate and/or complaint be filed to Hong Kong Accreditation Service.
2. We understand that DSD will delete from the competent samplers list any sampler who commits an act that casts doubt on the integrity of representative sampling or repeatedly commits acts of incompetence during sampling in connection with COD reassessment application.
3. We declare that the sampler(s) in the competent samplers list is (are)/is not (are not)* engaged in other work or employment with the applicant or any wastewater treatment contractors which could create or potentially give rise to a conflict or potential conflict between their personal/financial interests and their duties in connection with this application.



Signature : Tony

Date : 29/10/2008

Name : TONY CHAN

Post : Laboratory Manager

* Delete if inappropriate

表格 2
FORM 2
(商業登記條例) (第 310 章)
BUSINESS REGISTRATION ORDINANCE (Chapter 310)
(商業登記規例)
BUSINESS REGISTRATION REGULATIONS
總行 / 分行登記證
(Mains / Branch Registration Certificate)

正本
ORIGINAL

業務/法團所用名稱
Name of Business/
Corporation **黃家發公司**
ABC Co., Ltd.

業務/分行名稱
Business/
Branch Name **黃家發酒家**
ABC Restaurant

地址
Address **2/F, Sha Tin Centre,**
Sha Tin, N.T.

業務性質
Nature of Business **RESTAURANT**

法律地位
Status **BODY CORPORATE**

生效日期 **屆滿日期** **登記證號碼** **登記費及徵費**
Date of Commencement Date of Expiry Certificate No. Fee and Levy

04/04/2009 **03/04/2009** **[REDACTED]** **\$450**
(登記費 FEE = \$ 0)
(徵費 LEVY = \$450)

請注意下列《商業登記條例》的規定 (SEE OVERLEAF FOR ENGLISH VERSION)

第 6(8) 條 規定就任何業務發出兩項登記證或分行登記證，不得當作包含以下意思：(有關業務經營該業務的人)並非根據該業務的配員的任何法律規定已獲授權。

第 7(2) 條 規定任何經營業務人士，倘在現有兩項登記證屆滿後未付收到繳款通知內，於 1 個月內以書面通知稅務局局長，規定凡申領該通知內所列業務詳情有任何變更時須填妥各項業務登記表，且向經營有關業務的人或任何在結束前經營該項業務的人須於繳費更發生時或該項業務結束時起計 1 個月內，以書面通知局長。

第 12 條 規定各業務須將其有效的兩項登記證或有效的分行登記證於每一營業地點展示。

第 15(1) 條 規定對觸犯本條例者可施行的罰則，包括罰款 \$5,000 及監禁 1 年。

第 21 條 規定須將繳取徵費所得的全部款項撥付儲蓄欠薪保障基金。

繳款時倘將此兩項登記證及徵款通知單交還，在付款後，本徵款通知書方成為有效的商業登記證。
PLEASE PRODUCE THIS CERTIFICATE AND DEMAND NOTE INTACT AT TIME OF PAYMENT. THIS DEMAND NOTE WILL ONLY BECOME A VALID BUSINESS REGISTRATION CERTIFICATE UPON PAYMENT.

請印所示登記費及徵費收訖。(請參閱背頁繳款辦法所載內容)
RECEIVED FEE AND LEVY HERE STATED IN PRINTED FIGURES. (Please see payment instructions overleaf.)

2009 27/03/08 26WDC002 000022 CDD \$450.00 M

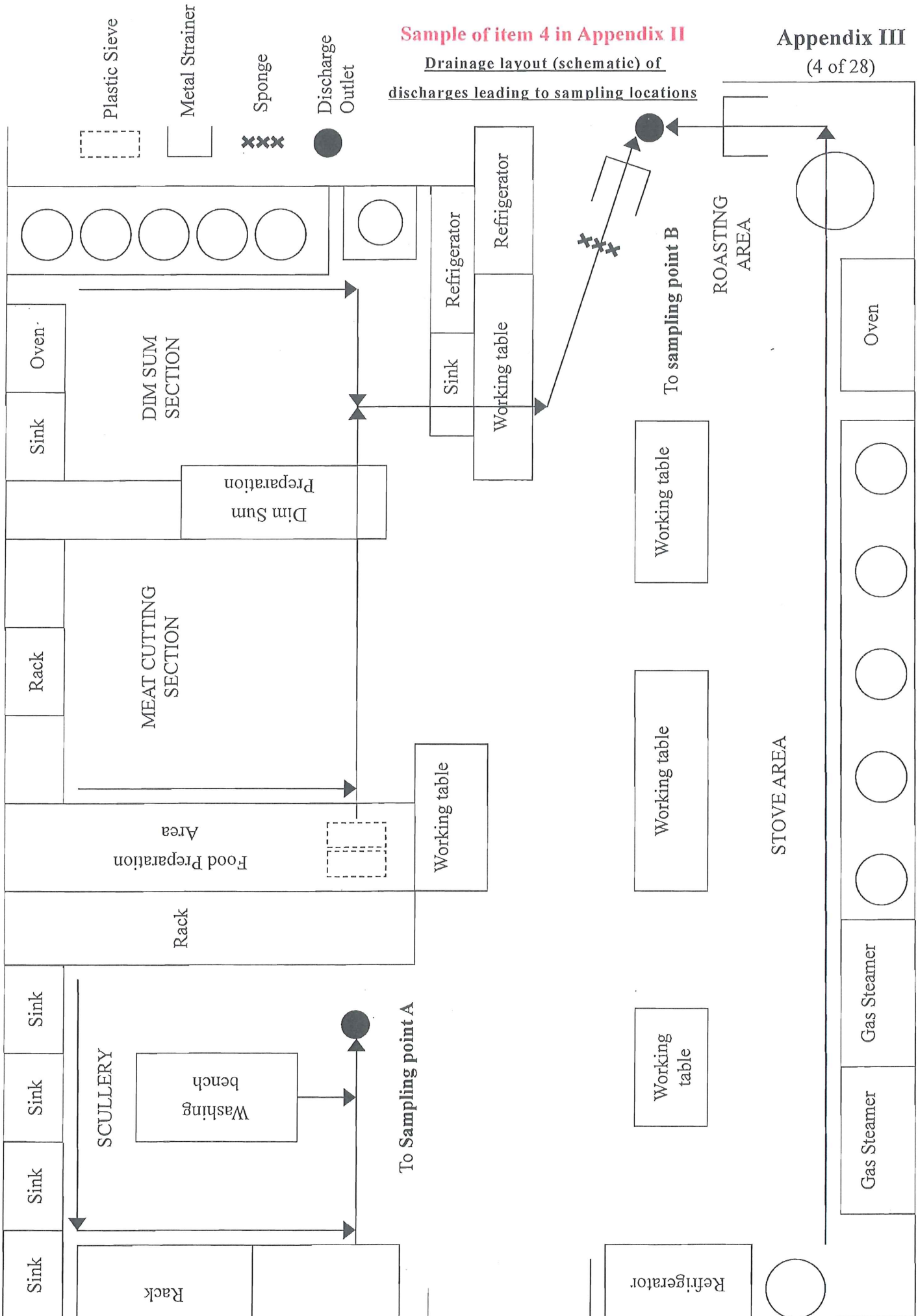
I.R.D.B. 註冊日期 (02/007)
I.R.D.B. 101 18/2007

Sample of item 4 in Appendix II

Drainage layout (schematic) of discharges leading to sampling locations

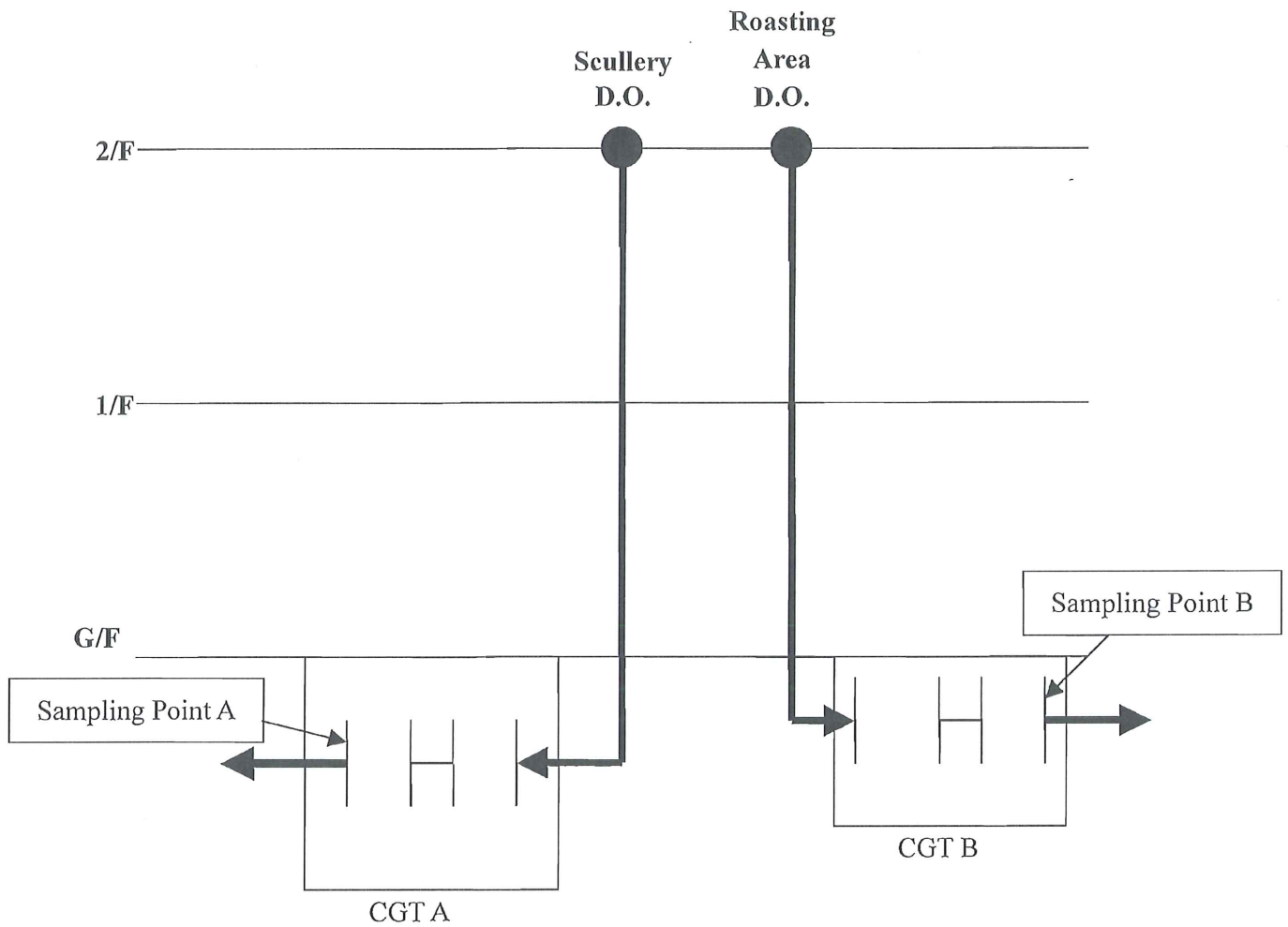
Appendix III

(4 of 28)



Sample of item 5 in Appendix II

Cross-section layout (schematic) of discharges from
multi-storey building leading to sampling locations



ABC Restaurant

A/C No. 12345678901 (Main)

A/C No. 55556555566 (Hydro-vent)

Sample of item 6 in Appendix II

Sampling plan

Name of the Establishment : ABC Restaurant

1. Sampling time from 04:00 to 01:30, with sampling time interval of 15min.
2. Sampling location G/F
3. Sampling point :
 - Total No. of discharged point : 2
 - Location of discharged point : Scullery, and roasting area
 - Total No. of Sampling Point : 2 (sampling points A and B)
 - Location of Sampling Point : Samples collected at the outlets of central grease traps
4. Sampling proposal :
 - Sampling Date : To be confirmed
 - No. of Sampling Days : Minimum 4
 - Sampling Period : 04:00-01:30
 - Sampling Frequency : Every 15 minutes
 - Sampling method and tools : Using wide mouth glass sampling bottles (see note)
 - Sampling Volume : 500 ml
 - Sample container : Glass bottle
5. Water meter(s) location G/F (2 meters, Main meter no. M-12121212
Hydro-vent meter no. M-34343434
6. Procedure :
 - 6.1 Record water meter reading from 04:00 to the time of last sample, with a time interval of one hour. Water meter reading for last sample should also be recorded.
 - 6.2 Sampling staff should arrive at the sampling location 15 to 30min. before the sampling time.
 - 6.3 All necessary items and equipment should be ready including wide mouth sampling bottles (which should have been thoroughly cleaned prior to use), sample log sheet, sample storage box with sufficient ice, pump, bucket, tape etc.
 - 6.4 Individual samples should be collected at a time interval of 15min. and the sampling should be punctual.
 - 6.5 Individual samples should be collected at specified location using specified sampling method.
 - 6.6 All sampling staff should fully understand the sampling arrangement before the commencement of sampling.
 - 6.7 Sampling equipment should be cleaned to avoid contamination. The sampling bottles should be rinsed two to three times in the discharge stream, prior to collection of the sample except where high concentrations of grease and solids are present.
 - 6.8 Exercise care during sampling to avoid incorporation of solids that may be attached to the effluent channel or pipe.

Sample of item 6 in Appendix II

- 6.9 Deliver sample into sample bottle up to bottle neck, cover it and seal properly with tape and sign at the junction.
- 6.10 Attach sample label(s) to the sample bottle.
- 6.11 Place the sample bottle into sample storage box with sufficient ice inside to keep samples at 0 – 4°C to minimize change in sample quality.
- 6.12 Sign on the sample log sheet to confirm the collection of the sample.

Note :

Sampling method :

- I Using wide mouth glass sampling bottles : All samples should be well mixed and transferred into sample bottles provided by DEF Laboratory. Sampling staff may use the sample bottles as provided by DEF Laboratory directly to collect sample at sampling location and the sampling point should be at middle level of water depth in the Central Grease Trap (CGT).
- II Siphon / Open tap / Electric pump method : Effluent flow should be allowed for at least one minute before sample is collected. The discharge volume should be large enough to displace effluent remaining in the sampling line during the last sampling. The intake of the sampling line should be placed at middle level of water depth in the CGT. The linear velocity of the sample in the pipe should not be less than 0.5m/s (based on maximum internal diameter of the sampling hose / tap).

Sample of item 6 in Appendix II

ABC Restaurant

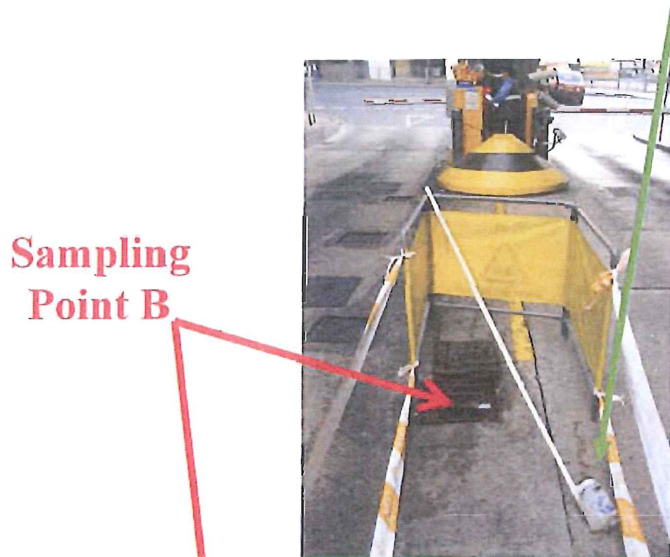


Central Grease Trap A (CGT-A) was located at the G/F car park (near the passenger lift). “Bio-substance” was placed inside the 1st chamber of the CGT. Sampling point A was at the outlet of the CGT. Water Meter Room was located at the G/F car park. The entrance of the room was beside the management office.

Sample of item 6 in Appendix II

ABC Restaurant

Sampling Tool : Wide mouth glass sampling bottle



Central Grease Trap B (CGT-B) was located at the entrance of the G/F car park. “Bio-substance” was placed inside the 1st chamber of the CGT. Sampling point B was at the outlet of the CGT.

Water Consumption Record

of
ABC Restaurant

Account No. (Main) : 12345678901
 Account No. (Hydro-Vent) : 55556555566
 Meter No. (Main) : MKP-12121212
 Meter No. (Hydro-Vent) : MNDL-34343434

Sample of item 7 in Appendix II
Proposed number of sampling days

Appendix III
(10 of 28)

Previous Date	Present Date	Previous Meter Reading (Cubic meter)	Present Meter Reading (Cubic meter)	Monthly Consumption (Cubic meter)	No. of days	Daily Consumption (Cubic meter)
<u>Meter no.</u> 24-01-08	MNDL-34343434 15-05-08	376	961	585	112	5.22
15-05-08	05-09-08	961	1,583	622	113	5.50
<u>Meter no.</u> 02-04-08	MKP-12121212 03-05-08	29,999	34,201	1,207	225	5.36
03-05-08	03-06-08	34,201	38,386	4,202	31	135.55
03-06-08	07-07-08	38,386	42,677	4,185	31	135.00
07-07-08	31-07-08	42,677	45,855	4,291	34	126.21
31-07-08	01-09-08	45,855	49,822	3,178	24	132.42
01-09-08	29-09-08	49,822	52,740	3,967	32	123.97
				2,918	28	104.21
				22,741	180	126.34
						131.70

Daily
Average

REMARKS:

According to the water consumption record and preliminary testing, we estimate the COD total and COD settle values of the trade effluent discharged from ABC Restaurant are: COD total = 1200 mg/L and COD settle = 1100 mg/L. Therefore we propose that the no. of sampling days is 4. (1100 mg/L x 131.70 m³ x 0.8 = 115.90 Kg/Day)

Sample of item 8 in Appendix II
Declaration of Trade Effluent flow ratio

Name of the Establishment : ABC Restaurant Nature of the business : Restaurant - Chinese
Address : 2/F, Sha Tin Centre, Sha Tin, N.T.

(A) Trade Effluent flow status

Central Grease Trap(CGT)	Location	Area of kitchen	Time of water consumption	Practice / nature	Equipment and quantity (Qty.)
A	G/F Car Park (near the passenger lift)	about 400m ²	04:00 to 01:30	<input type="checkbox"/> Kitchen _____ <input type="checkbox"/> Tea _____ <input checked="" type="checkbox"/> Dish washing _____ <input type="checkbox"/> Thawing _____ <input type="checkbox"/> Vegetables washing _____ <input type="checkbox"/> Dim Sum _____ <input type="checkbox"/> Fish cutting _____ <input type="checkbox"/> Sales of Siu Mei _____ <input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Sink Qty <u>4</u> <input checked="" type="checkbox"/> Tap Qty <u>16</u> <input checked="" type="checkbox"/> Washing bench Qty <u>1</u> <input checked="" type="checkbox"/> Hydro-vent Qty <u>6</u> <input type="checkbox"/> Roaster Qty _____ <input type="checkbox"/> Cooking stove Qty _____ <input type="checkbox"/> Steam stove Qty _____ <input checked="" type="checkbox"/> Grease trap Qty <u>3</u> <input checked="" type="checkbox"/> Other <u>Dish Washing machine</u> Qty <u>1</u>
B	Entrance of the G/F Car Park	about 200m ²	04:00 to 01:30	<input checked="" type="checkbox"/> Kitchen _____ <input checked="" type="checkbox"/> Tea _____ <input type="checkbox"/> Dish washing _____ <input checked="" type="checkbox"/> Thawing _____ <input checked="" type="checkbox"/> Vegetables washing _____ <input checked="" type="checkbox"/> Dim Sum _____ <input checked="" type="checkbox"/> Fish cutting _____ <input checked="" type="checkbox"/> Sales of Siu Mei _____ <input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Sink Qty <u>2</u> <input checked="" type="checkbox"/> Tap Qty <u>8</u> <input type="checkbox"/> Washing bench Qty _____ <input checked="" type="checkbox"/> Hydro-vent Qty <u>3</u> <input checked="" type="checkbox"/> Roaster Qty <u>1</u> <input checked="" type="checkbox"/> Cooking stove Qty <u>5</u> <input checked="" type="checkbox"/> Steam stove Qty <u>6</u> <input checked="" type="checkbox"/> Grease trap Qty <u>1</u> <input checked="" type="checkbox"/> Other <u>oven</u> Qty <u>2</u>
				<input type="checkbox"/> Kitchen _____ <input type="checkbox"/> Tea _____ <input type="checkbox"/> Dish washing _____ <input type="checkbox"/> Thawing _____ <input type="checkbox"/> Vegetables washing _____ <input type="checkbox"/> Dim Sum _____ <input type="checkbox"/> Fish cutting _____ <input type="checkbox"/> Sales of Siu Mei _____ <input type="checkbox"/> Other _____	<input type="checkbox"/> Sink Qty _____ <input type="checkbox"/> Tap Qty _____ <input type="checkbox"/> Washing bench Qty _____ <input type="checkbox"/> Hydro-vent Qty _____ <input type="checkbox"/> Roaster Qty _____ <input type="checkbox"/> Cooking stove Qty _____ <input type="checkbox"/> Steam stove Qty _____ <input type="checkbox"/> Grease trap Qty _____ <input type="checkbox"/> Other Qty _____

(B) Estimation of trade effluent flow ratio (calculation for whole day)

According to the above data, I estimate that the trade effluent flow ratio is : A : B = 2 : 1

(C) Declaration

I declare for the company that the above data is true.

Name of Authorized Person of Establishment : CHAN TAI MAN

Signature of Authorized Person : Chan TM

Position : Restaurant Manager

Date : 29/10/2008



Sample of item 9 in Appendix II

Procedures for sample storage, delivery, and preservation

1. Sample storage : After the completion of sampling, all samples should be kept at 0 – 4°C in sample storage box(es) under custody with locks provided by laboratory.
2. Sample delivery : All collected samples to be transported to the laboratory by sampling/laboratory staff (note1) as soon as possible, and not later than the end of each sampling day the latest (note 1)

	Person-in-charge /company (at sampling location)	Place of departure & departure time	Person-in-charge /company (at place of destination)	Place of destination & arrival time	Means of transport/ Transport company
Immediate delivery	Staff of DEF Laboratory (Mr LEE Ming-fai)	ABC Restaurant B2/F 01:45	Staff of DEF Laboratory (Mr LEE Ming-fai)	DEF Laboratory 03:00	DEF Laboratory vehicle

3. Sample preservation and mixing :

According to the requirements stipulated in the “Technical Memorandum on procedures and methods for sampling and analysis of trade effluents”

Note 1: Sample delivery

1.1 Immediate delivery -

After completion of sampling, the sampler(s) should securely and properly store the samples in sample storage container(s) with sufficient ice provided by the laboratory to maintain a temperature of 0 – 4 °C and deliver them under custody with all sampling record from sampling location to the laboratory immediately. On leaving the sampling location, the sampler(s) should record in sample log sheet the time and location of leaving, as well as the name(s) and signature(s) of staff responsible for sample delivery. On arrival at the destination, an approved laboratory staff should unlock the sample storage container(s), put the samples into laboratory refrigerator, record the time of arrival and the name of the laboratory staff with signature.

Sample of item 9 in Appendix II

1.2 Delayed delivery -

If samples cannot be delivered immediately after completion of sampling, the sampler(s) should keep the samples under custody, securely and properly store them in sample storage container(s) with sufficient ice provided by the laboratory to maintain a temperature of 0 – 4 °C and transport them to the laboratory as soon as possible. On leaving the sampling location, the sampler(s) should record in sample log sheet the time and location of leaving, as well as the name(s) and signature(s) of staff responsible for sample delivery. On arrival at the destination, an approved laboratory staff should unlock the sample storage container(s), put the samples into laboratory refrigerator, record the time of arrival and the name of the laboratory staff with signature.

1.3 Split delivery -

If there are too many samples, and it is anticipated that they cannot be delivered to the laboratory in one batch, the sampler(s) should arrange to deliver part of the samples collected earlier to the laboratory and deliver the rest immediately after the completion of all sampling work. At all time, samples should be kept under custody, securely and properly stored in sample storage container(s) with sufficient ice provided by the laboratory to maintain a temperature of 0 – 4 °C and transported to the laboratory as soon as possible. On leaving the sampling location, the sampler(s) should record in sample log sheet the time and location of leaving, as well as the name(s) and signature(s) of staff responsible for sample delivery. On arrival at the destination, an approved laboratory staff should unlock the sample storage container(s), put the samples into laboratory refrigerator, record the time of arrival and the name of the laboratory staff with signature.

Sample of item 9 in Appendix II

Sample Storage Containers with Lock





Declaration of kitchen practice for restaurant and food factory

Name of the Establishment : ABC Restaurant
 Address : 2/F, Shatin Centre, Shatin, N.T.
 Nature of the business : Restaurant - Chinese

A. Kitchen Practice

1. Which preliminary procedure is used for cleaning the tableware and food utensils ?
 - The food waste is scraped into waste bins
 - The food waste is cleared by flushing with water
 - Other, please specify Dish-washing machine
2. Are *stainless steel strainers / plastic strainers used in the sinks to remove food dregs from the cleaning process ?

Yes No
3. Are there any grease boxes under sink installed ?

Yes No

 Cleaning frequency is one times per *day / week.
4. Which device is used at washing bench, if present, to remove *food dregs / food waste during cleaning ?
 - *Bamboo strainer / Stainless steel strainer / Plastic strainer
 - Other, please specify _____
5. Other than fixed bar screens, what other devices are used to retain food dregs in the drainage of kitchen ?
 - *Stainless steel strainer / plastic strainer
 - Other filtering materials. If so, please complete section A.6
6. In surface channel(s), other filtering materials in use are *sponge/ _____
 Near the drainage outlet(s), other filtering materials in use are *sponge/ _____
 Their use in the drainage system will / will NOT cause any overflow of wastewater ? will will not
- 6.1 Is the same material used in other operations of the kitchen or scullery ?

Yes No

 If yes, please specify _____
- 6.2 What is the average consumption of the material ? 4 pieces / month
 (supported with copies of invoices for the previous four months)
7. How is frozen food thawed in the food preparation ?
 - In *buckets / sinks with water
 - In *buckets / sinks with running water
 - Thaw slowly at room temperature
8. Which kind of ventilation device is installed in the kitchen ?
 *Hydro-vent system / Air-filter system / Other, please specify Oil-Digester for Hydrovent system
9. How are the *fried / roaster oil and other oily matter gathered from the kitchen and scullery being disposed of ?
 - Disposed of directly into *waste bins / garbage bags by restaurant staff
 - Stored in buckets and collected by ABC Oil Company (contractor) for *disposal/other recycling purposes
 - Disposed of into the central grease traps
10. How many drainage outlets in kitchen and scullery ?
 Note: An uninterrupted flow should be maintained.

	No.(s) at <u>Roasting Area</u>
	No.(s) at <u>Scullery</u>
	No.(s) at _____

B. Central Grease Traps

Are central grease traps provided for the Establishment ? Yes No
 If yes, please complete sections B1-B6:

* Delete if inappropriate

1. Information of the grease traps : Number of the grease traps in operation. 2 No.(s)

Overall dimensions (L×W×H)	No. of chambers	Effective depth	Effective volume	No. of such grease trap in operation	Total effective volume in operation
<u>2.4 m × 1.2 m × 1.2 m</u>	<u>2</u>	<u>0.8 m</u>	<u>2.3 m³</u>	<u>1</u>	<u>4.2 m³</u>
<u>2.6 m × 1.2 m × 0.8 m</u>	<u>2</u>	<u>0.6 m</u>	<u>1.9 m³</u>	<u>1</u>	

2. Is wastewater generated from ALL operations of the kitchen and scullery discharged to the public drain via those grease traps ? Yes No

3. Is wastewater from other establishments discharged to the above-mentioned grease traps? Yes No

4. What is the minimum pump-out frequency ? 1 time(s) per ~~week~~ month and carried out by XYZ Environmental Treatment Co. (contractor).

(please provide copies of relevant disposal records of grease trap waste (e.g. Form A) and invoices of central grease trap cleaning for the previous four months)

5. If the Establishment maintains the grease traps by its own staff, please state the normal procedure, time & frequency taken to remove and dispose of the scum and settled solids below.

(please provide copies of relevant disposal records of grease trap waste (e.g. Form A) and invoices of central grease trap cleaning for the previous four months)

6. Are there any treatment materials added directly or indirectly to the grease traps for improving the quality of effluent ? Yes No

If yes, please give the names of the products and responsible local Agent/Contractor in the following table.

(supported with an effective Contract OR with invoices and a dosing logbook verified by authorized person with signature for the previous four months)

Product [#]	Supplier / Contractor
<u>Bio-substance</u>	<u>DEF Treatment Co.</u>

Remark[#] Please submit technical information of the product(s) in detail

State the procedure of application of the product(s), including dosage and dosing point below:

5 kg "bio-substance" (totally 10 kg) was separately hung at 1st chambers of

C. **Other methods of treatment** CAT A+B. Replacement would be performed every month.
(supported with verified records of regular maintenance for the previous four months)

Other physical / chemical / biological procedures in wastewater treatment _____

Note: Unless explicitly approved by the Office of the Drainage Authority, any other enhancement or treatment, e.g. filter, net, sponge, or biological products not declared in this form should NOT be temporarily implemented or augmented during the sampling period.


Other Remarks

Fishpool was connected to CRT. The restaurant manager promised to avoid discharging or replacing water of fishpool during sampling date. Otherwise, sampling arrangement would be cancelled for that
Declaration

I declare on behalf of the Establishment that the information given in the above Sections A to C is correct. day.
The business operation practices as reported in these Sections are strictly adhered to at all times.

Authorized Person of the Establishment : CHAN TAI MAN (block letters please)

Position : Restaurant Manager Signature & Date : Chan TM 29/10/2008

Company Chop : 

THE GOVERNMENT OF THE HKSAR
WEST KOWLOON TRANSFER STATION
TRANSACTION RECORD
香港特別行政區政府
西九龍廢物轉運站交收紀錄

Date: 4/7/2008 Ref. No.: 12/361650
日期 參考號碼

Veh. Reg. Mark: ZZ1234 VRM A/O No.: 1234567
車輛登記號碼 帳戶編號

Time In: 10:08 Time out: 10:29
進入時間 離開時間

Weight In: 23.34 (tonne) Weight out: 12.66 (tonne)
入載重量 (公噸) 出載重量 (公噸)

Net weight: 10.68 (tonne) Load charged: 10.68 (tonne)
淨物淨重量 (公噸) 收費重量 (公噸)

Incident Form: 事故紀錄 Complimentary ticket: N XYZ
免費券

Environmental Treatment Co.

Telephone enquiry (專線查詢) 12371 0876

THE GOVERNMENT OF THE HKSAR
WEST KOWLOON TRANSFER STATION
TRANSACTION RECORD
香港特別行政區政府
西九龍廢物轉運站交收紀錄

Date: 3/8/2008 Ref. No.: 42/364710
日期 參考號碼

Veh. Reg. Mark: ZZ1234 VRM A/O No.: 1234567
車輛登記號碼 帳戶編號

Time In: 11:12 Time out: 11:42
進入時間 離開時間

Weight In: 23.34 (tonne) Weight out: 12.66 (tonne)
入載重量 (公噸) 出載重量 (公噸)

Net weight: 10.68 (tonne) Load charged: 10.68 (tonne)
淨物淨重量 (公噸) 收費重量 (公噸)

Incident Form: 事故紀錄 Complimentary ticket: N XYZ
免費券

Environmental Treatment Co.

Telephone enquiry (專線查詢) 12371 0876

THE GOVERNMENT OF THE HKSAR
WEST KOWLOON TRANSFER STATION
TRANSACTION RECORD
香港特別行政區政府
西九龍廢物轉運站交收紀錄

Date: 6/9/2008 Ref. No.: 19/234980
日期 參考號碼

Veh. Reg. Mark: ZZ1234 VRM A/O No.: 1234567
車輛登記號碼 帳戶編號

Time In: 15:32 Time out: 16:01
進入時間 離開時間

Weight In: 23.34 (tonne) Weight out: 12.66 (tonne)
入載重量 (公噸) 出載重量 (公噸)

Net weight: 10.68 (tonne) Load charged: 10.68 (tonne)
淨物淨重量 (公噸) 收費重量 (公噸)

Incident Form: 事故紀錄 Complimentary ticket: N XYZ
免費券

Environmental Treatment Co.

Telephone enquiry (專線查詢) 12371 0876

THE GOVERNMENT OF THE HKSAR
WEST KOWLOON TRANSFER STATION
TRANSACTION RECORD
香港特別行政區政府
西九龍廢物轉運站交收紀錄

Date: 5/10/2008 Ref. No.: 14/316792
日期 參考號碼

Veh. Reg. Mark: ZZ1234 VRM A/O No.: 1234567
車輛登記號碼 帳戶編號

Time In: 12:01 Time out: 12:30
進入時間 離開時間

Weight In: 23.34 (tonne) Weight out: 12.66 (tonne)
入載重量 (公噸) 出載重量 (公噸)

Net weight: 10.68 (tonne) Load charged: 10.68 (tonne)
淨物淨重量 (公噸) 收費重量 (公噸)

Incident Form: 事故紀錄 Complimentary ticket: N XYZ
免費券

Environmental Treatment Co.

Telephone enquiry (專線查詢) 12371 0876

OFFICIAL USE ONLY

此欄不用填寫

Application No: _____

Uploaded on: _____

『隔油池廢物收集商名單』回條

注意事項

(一)『隔油池廢物收集商名單』是為方便飲食業界及隔油池廢物收集商而編纂。本名單內的機構並不代表環境保護署所認可或推介。貴公司所提供的資料除作本署的內部用途外，並不會作其他用途。

(二)簽回本回條給本署，表示 貴公司同意將公司資料(包括公司名稱、地址、電話及聯絡人)，上載到環境保護署網站 (www.epd.gov.hk)或環保署的食肆環保網 (www.epd.gov.hk/epd/tc_chi/greenrestaurant/)的『隔油池廢物收集商名單』內，供飲食業界及有興趣人士參考。

(三)收到 貴公司回條後，本署會聯絡申請人核對資料，並審閱其申請，將合符資格的收集商資料上載到環境保護署網站或環保署的食肆環保網。

(四)本署會定期更新『隔油池廢物收集商名單』，並保留權利刪除名單上任何公司，而不作出任何通知。

公司資料 (為方便處理，請以正楷中英文填寫)

公司名稱： (中文) XYZ 環保工程公司

(英文) XYZ Environmental Treatment Co.

營業地址： (中文) 香港九龍中心1樓

(英文) 1/F, Kowloon Centre, Kowloon, HK

聯絡人姓名： 先生/小姐/女士 (請圈出合適者) 職位： (中文) 經理

(中文) 陳大文 (英文) Manager

(英文) CAHN TAIMAN

聯絡電話： 12345678 傳真號碼： 23456789

電郵地址： _____ 網站： _____

隔油池廢物傾倒地點： (請在下列適當空格內加上「✓」號)【可選擇多於一項】

西九龍廢物轉運站內的隔油池廢物處理設施

其他 (請註明： _____)

【為方便核實資料，本署可能要求參觀貴公司提供的傾倒地點，希望貴公司配合。】

XYZ
Environmental
Treatment Co.

日期 12/12/2012

姓名及簽名 / 公司蓋印

請將填妥的回條傳真至環保署營商環保支援辦事處(傳真號碼 2402 8272)或電郵至 carman@epd.gov.hk

如閣下對本回條有任何問題，歡迎聯絡本署鍾嘉敏小姐(電話：2150 8068)或朱裕承先生(電話：2150 8053)

Grease Trap Waste Disposal Service at West Kowloon Transfer station
西九龍廢物轉運站隔油池廢物處理服務
Application for GTW Vehicle Registration Account
申請「油隔車輛登記帳戶」

OFFICIAL USE ONLY (只供本署填寫)

File Processing Officer's Signature: [Signature]
 File No.: [File No.]

Please read all the notes and complete all items in BLOCK LETTERS. 請細閱所有注意事項，並用大寫英文填寫。

I. Particulars of Applicant (申請人資料)

Name: XYZ Environmental Treatment Co.
 In English - 用英文填寫，其他名稱請用中文填寫。
 M. 先生 M. 女士 Ltd. Co. 有限公司
 Casteel Chamber: XYZ 環保工程公司

H.K.I.D. Card No. 123456789012345
 香港身分證號碼
 Passport No. ()
 Limited Company Certificate of Incorporation No. ()
 有限公司之註冊編號或執照號

Residential / Company Address: Kowloon Centre
 住宅 / 公司地址
 Flat/Room: 1/F Block: () Floor: ()
 Name of Building: ()
 Number and Name of Street / Estate: ()
 Kowloon: () District: () R.K. 區 N.T. 區

Telephone No. 12345678
 Residential: () Office: ()
 Correspondence Address (if different from above): ()
 通訊地址 (如與上述不同): ()
 Flat/Room: () Block: () Floor: ()
 Name of Building: ()
 Number and Name of Street / Estate: ()
 District: () R.K. 區 N.T. 區

II. Particulars of Vehicles (車輛登記細節)

Vehicle Registration Mark 車輛登記號碼	Permitted Gross Vehicle Weight 許可總重量	Body Type 車身類型	Category 車輛類別
1 ZZ1234	12.36	Truck	
2			
3			
4			
5			
6			
7			
8			
9			
10			

Estimated quantity of grease trap waste to be delivered to RJS per month: 120 tonnes
 估計每月送往油隔池的廢油泥量: 120 公噸
 Existing 現有 New 新 New Transit 新到 North Island 北區

III. Declaration (聲明書)

(To be completed by vehicle registered owner or his representative authorized by him in writing in the case of a limited company, this should be signed by the Director, Manager, authorized and authorized by the Company. It should also put down his name and capacity in full under his signature.)
 當你提交這項申請書時，請填妥下列各項資料，並與申請書一併提交。如申請人為有限公司，則應由董事、經理、經理或獲該公司書面授權之代表簽署。簽署人應填明其姓名及職銜。
 Photocopy of your H.K. Identity Card or passport or Certificate of Incorporation (if the registered owner is a limited company).
 Photocopy of valid vehicle registration document (both sides) of each of the vehicles listed in Section II.
 Photocopy of recent address proof (e.g. identity card, water bill).
 Photograph of each vehicle.

Signature of Vehicle Registered Owner: ()
 車輛註冊車主簽署
 Full Name: 經理 / 李 X

H.K.I.D. Card No. 1212/2007
 香港身分證號碼
 Company Stamp (Vehicle Registration Authority)
 公司註冊處印章 (車輛登記處)
 Date: ()
 日期

Grease Trap Waste Disposal Record

Part A – To be completed by grease trap waste producer

I certify that at the following date and time, personnel or grease trap waste collector in Part B was appointed to collect the mentioned quantity of grease trap waste from the declared waste producing location.

Name of Personnel in Charge (in block letters): WONG KA TAK

Signature: WONG KA TAK Position: Manager

Waste Production Location: ABC RESTAURANT

Address: 2/F, Sha Tin Centre, Sha Tin, NT

Grease Trap Cleaning Invoice Ref. No. (if applicable): 1115

Time: 23:00

Company Chop: ABC Restaurant Date: 3/2/2008

Part B – To be completed by grease trap waste collector

I certify that I collected 5 (m³) of grease trap waste as per the time, date and location listed in Part A in vehicle (Registration No)(if applicable) ZZ1234 and delivered it to the mentioned waste disposal location on the declared date below.

Name of Personnel in Charge (in block letters): CHAN CHAIN KIT

Signature: CHAN CHAIN KIT Position: Driver

Company: XYZ Environmental Treatment Co.

Waste Disposal Location: West Kowloon Transfer Station

Transaction Record Ref. No. (if applicable): 12961650

Company Chop: XYZ Environmental Treatment Co. Date: 4/2/2008

Note: The record should be completed properly for every collection of grease trap waste, and submit together with the transaction record issued by grease trap waste handling facility whenever it is requested by Drainage Authority.

Remarks: For the grease trap waste producer who appoints her own staff to collect grease trap waste, please fill in the relevant information of producer.

Form DSD/TES 9(e) March 2014

Grease Trap Waste Disposal Record

Part A – To be completed by grease trap waste producer

I certify that at the following date and time, personnel or grease trap waste collector in Part B was appointed to collect the mentioned quantity of grease trap waste from the declared waste producing location.

Name of Personnel in Charge (in block letters): WONG KA TAK

Signature: WONG KA TAK Position: Manager

Waste Production Location: ABC RESTAURANT

Address: 2/F, Sha Tin Centre, Sha Tin, NT

Grease Trap Cleaning Invoice Ref. No. (if applicable): 1119

Time: 22:00

Company Chop: ABC Restaurant Date: 28/2/2008

Part B – To be completed by grease trap waste collector

I certify that I collected 5 (m³) of grease trap waste as per the time, date and location listed in Part A in vehicle (Registration No)(if applicable) ZZ1234 and delivered it to the mentioned waste disposal location on the declared date below.

Name of Personnel in Charge (in block letters): CHAN CHAIN KIT

Signature: CHAN CHAIN KIT Position: Driver

Company: XYZ Environmental Treatment Co.

Waste Disposal Location: West Kowloon Transfer Station

Transaction Record Ref. No. (if applicable): 42964710

Company Chop: XYZ Environmental Treatment Co. Date: 28/2/2008

Note: The record should be completed properly for every collection of grease trap waste, and submit together with the transaction record issued by grease trap waste handling facility whenever it is requested by Drainage Authority.

Remarks: For the grease trap waste producer who appoints her own staff to collect grease trap waste, please fill in the relevant information of producer.

Form DSD/TES 9(e) March 2014

Grease Trap Waste Disposal Record

Part A – To be completed by grease trap waste producer

I certify that at the following date and time, personnel or grease trap waste collector in Part B was appointed to collect the mentioned quantity of grease trap waste from the declared waste producing location.

Name of Personnel in Charge (in block letters): WONG KA TAK

Signature: WONG KA TAK Position: Manager

Waste Production Location: ABC RESTAURANT

Address: 2/F, Sha Tin Centre, Sha Tin, NT

Grease Trap Cleaning Invoice Ref. No. (if applicable): 1123

Time: 22:00

Company Chop: ABC Restaurant Date: 5/9/2008

Part B – To be completed by grease trap waste collector

I certify that I collected 5 (m³) of grease trap waste as per the time, date and location listed in Part A in vehicle (Registration No)(if applicable) ZZ1234 and delivered it to the mentioned waste disposal location on the declared date below.

Name of Personnel in Charge (in block letters): CHAN CHAIN KIT

Signature: CHAN CHAIN KIT Position: Driver

Company: XYZ Environmental Treatment Co.

Waste Disposal Location: West Kowloon Transfer Station

Transaction Record Ref. No. (if applicable): 19/234880

Company Chop: XYZ Environmental Treatment Co. Date: 5/9/2008

Note: The record should be completed properly for every collection of grease trap waste, and submit together with the transaction record issued by grease trap waste handling facility whenever it is requested by Drainage Authority.

Remarks: For the grease trap waste producer who appoints her own staff to collect grease trap waste, please fill in the relevant information of producer.

Form DSD/TES 9(e) March 2014

Grease Trap Waste Disposal Record

Part A – To be completed by grease trap waste producer

I certify that at the following date and time, personnel or grease trap waste collector in Part B was appointed to collect the mentioned quantity of grease trap waste from the declared waste producing location.

Name of Personnel in Charge (in block letters): WONG KA TAK

Signature: WONG KA TAK Position: Manager

Waste Production Location: ABC RESTAURANT

Address: 2/F, Sha Tin Centre, Sha Tin, NT

Grease Trap Cleaning Invoice Ref. No. (if applicable): 1130

Time: 22:00

Company Chop: ABC Restaurant Date: 4/10/2008

Part B – To be completed by grease trap waste collector

I certify that I collected 5 (m³) of grease trap waste as per the time, date and location listed in Part A in vehicle (Registration No)(if applicable) ZZ1234 and delivered it to the mentioned waste disposal location on the declared date below.

Name of Personnel in Charge (in block letters): CHAN CHAIN KIT

Signature: CHAN CHAIN KIT Position: Driver

Company: XYZ Environmental Treatment Co.

Waste Disposal Location: West Kowloon Transfer Station

Transaction Record Ref. No. (if applicable): 14916792

Company Chop: XYZ Environmental Treatment Co. Date: 4/10/2008

Note: The record should be completed properly for every collection of grease trap waste, and submit together with the transaction record issued by grease trap waste handling facility whenever it is requested by Drainage Authority.

Remarks: For the grease trap waste producer who appoints her own staff to collect grease trap waste, please fill in the relevant information of producer.

Form DSD/TES 9(e) March 2014

Sample of item 11 in Appendix II

XYZ Environmental Treatment Company,
1/F., Kowloon Centre, Kowloon, Hong Kong.

Tel: 12345678
Fax: 23456789

INVOICE 發票

Client 客戶名稱	No. 貨單編號	1115
ABC Restaurant	Issue Date 發出日期	July 25 2008
	Customer No. 客戶編號	12345
Site Address 工作地點	Your Ref. 客戶訂單編號	CGT0708
Sha Tin Centre, Sha Tin, N.T (G/F car park, CGT)	Salesman 營業員	Kay
	Payment Terms 付款方式	NET 30

產品編號 ITEM CODE	產品說明 PRODUCT DESCRIPTION	數量 QTY	單價 UNIT PRICE	金額 AMOUNT
CGT0708	Central Grease Trap Cleaning (July 2008)	1	1000.00	1000.00

Certified true copy

Jack

(Jack CHAN)
Director

XYZ
Environmental
Treatment Co.

Sample of item 11 in Appendix II

XYZ Environmental Treatment Company,
1/F., Kowloon Centre, Kowloon, Hong Kong.

Tel: 12345678
Fax: 23456789

INVOICE 發票

Client 客戶名稱	No. 貨單編號	1119
ABC Restaurant	Issue Date 發出日期	Aug 25 2008
	Customer No. 客戶編號	12345
Site Address 工作地點	Your Ref. 客戶訂單編號	CGT0808
Sha Tin Centre, Sha Tin, N.T (G/F car park, CGT)	Salesman 營業員	Kay
	Payment Terms 付款方式	NET 30

產品編號 ITEM CODE	產品說明 PRODUCT DESCRIPTION	數量 QTY	單價 UNIT PRICE	金額 AMOUNT
CGT0808	Central Grease Trap Cleaning (August 2008)	1	1000.00	1000.00

XYZ
Environmental
Treatment Co.

Certified true copy

Jack

(Jack CHAN)
Director

Sample of item 11 in Appendix II

XYZ Environmental Treatment Company,
1/F., Kowloon Centre, Kowloon, Hong Kong.

Tel: 12345678
Fax: 23456789

INVOICE 發票

Client 客戶名稱	No. 貨單編號	1123
ABC Restaurant	Issue Date 發出日期	Sept 25 2008
	Customer No. 客戶編號	12345
Site Address 工作地點	Your Ref. 客戶訂單編號	CGT0908
Sha Tin Centre, Sha Tin, N.T (G/F car park, CGT)	Salesman 營業員	Kay
	Payment Terms 付款方式	NET 30

產品編號 ITEM CODE	產品說明 PRODUCT DESCRIPTION	數量 QTY	單價 UNIT PRICE	金額 AMOUNT
CGT0908	Central Grease Trap Cleaning (September 2008)	1	1000.00	1000.00

Certified true copy

Jack

(Jack CHAN)
Director



Sample of item 11 in Appendix II

XYZ Environmental Treatment Company,
1/F., Kowloon Centre, Kowloon, Hong Kong.

Tel: 12345678
Fax: 23456789

INVOICE 發票

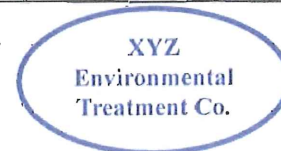
Client 客戶名稱	No. 貨單編號	1130
ABC Restaurant	Issue Date 發出日期	Oct 25 2008
	Customer No. 客戶編號	12345
Site Address 工作地點	Your Ref. 客戶訂單編號	CGT1008
Sha Tin Centre, Sha Tin, N.T (G/F car park, CGT)	Salesman 營業員	Kay
	Payment Terms 付款方式	NET 30

產品編號 ITEM CODE	產品說明 PRODUCT DESCRIPTION	數量 QTY	單價 UNIT PRICE	金額 AMOUNT
CGT1008	Central Grease Trap Cleaning (Oct 2008)	1	1000.00	1000.00

Certified true copy

Jack

(Jack CHAN)
Director



DEF Treatment Company,
11/F., Kowloon Building, Kowloon, Hong Kong.
Tel. (852)-2345-6780 Fax (852)-2345-6788

INVOICE NO #123456
DATE : 25/10/2008

ABC Restaurant
Sha Tin Centre,
Sha Tin, N.T
(G/F car park, CGT, 1st chamber)

INVOICE

Product Description	Qty / Unit Price
Bio-substance (生化處理劑)	
July 2008	5 kg / 200
August 2008	5 kg / 200
September 2008	5 kg / 200
October 2008	5 kg / 200
Spongy filter cost	
July 2008	4 pcs / 10
August 2008	4 pcs / 10
September 2008	4 pcs / 10
October 2008	4 pcs / 10
TOTAL	DEF Treatment Co. 840.00

Certified true copy

Mary

(Mary LAU)
Technical Officer

Payment by ABC Restaurant
Payment period 30 days •
For any enquires please contact Kay Chan, (852)-2345-6780

Thank You !

**Declaration of proposed cleaning frequency and date(s) for Central Grease Trap(s) (CGT)**Account No : 12345678901, 55556555566.

In connection with the application for COD reassessment for the above account(s) submitted by the customer, Drainage Services Department (DSD) will decide the sampling dates in between the cleaning dates of the CGT(s) with a view to obtaining representative samples which can truly reflect the actual pollution strength. Such arrangement of sampling dates is therefore based on the cleaning dates and frequency as declared by the customer or the treatment company authorized by the customer ("treatment company") or the HOKLAS laboratory authorized by the customer ("HOKLAS laboratory") to handle this application.

Therefore, the customer and the treatment company / grease trap waste collector / HOKLAS laboratory have to explicitly declare and duly sign to confirm all necessary information below and submit the completed form to DSD as soon as possible.

Frequency of CGT cleaning (from <u>10 / 2008</u> month/year to <u>9 / 2011</u> month/year)	The CGT(s) is/are cleaned <u>1</u> time(s) for every : <u>---</u> year / <u>1</u> month / <u>---</u> week / <u>---</u> day*
Dates of CGT cleaning (from <u>10 / 2008</u> month/year to <u>3 / 2009</u> month/year)	<u>5/10, 5/11, 7/12/2008, 6/1, 3/2, 3/3/2009</u>

(* Please delete if inappropriate)

After completion of sampling, the customer or treatment company / HOKLAS laboratory should submit record of CGT cleaning for the period covering at least 30 days before the first sampling date and 15 days after the last sampling date (including copies of relevant disposal records of grease trap waste (e.g. Form A) and invoices of central grease trap cleaning, wherever applicable).

If no written notification is received, DSD shall assume that the customer and treatment company / grease trap waste collector will carry out cleaning of the CGT according to the above frequency and dates. Otherwise, all previous samples collected and COD result would be void.

Name of customer: <u>ABC Restaurant</u>	Name of treatment Company: <u>DEF Treatment Co.</u>	Name of grease trap waste collector: <u>XYZ Environmental Treatment Co.</u>
Name of Representative: <u>CHAN TAI MAN</u>	Name of Representative: <u>Mary LAU</u>	Name of Representative: <u>Jack CHAN</u>
I.D. No. : <u>X123456(7)</u>	I.D. No. : <u>Y123456(7)</u>	I.D. No. : <u>Z123456(7)</u>
Position : <u>Restaurant Manager</u>	Position : <u>Technical Officer</u>	Position : <u>Director</u>
Signature of Representative : <u>Chan TM</u>	Signature of Representative : <u>Mary</u>	Signature of Representative : <u>Jack</u>
Date : <u>29/10/2008</u>	Date : <u>29/10/2008</u>	Date : <u>29/10/2008</u>

Notes about Personal Data

The personal data provided by means of this form will be used in the application for COD reassessment. The personal data may be disclosed to other government departments, bureaus and relevant organizations, as well as other persons as permitted by the relevant legislation. You have a right of access and correction with respect to personal data as provided in the Personal Data (Privacy) Ordinance. Such request can be made by writing to DSD.

(Remark: The applicant or the authorized representative should submit the original copy of this form in person for proper registration.)



Declaration of use of sieves in drainage outlet(s) / surface channel(s)

To: Drainage Services Department (DSD)

Account No. : 12345678901, 5555655566

I/We declare that the number of sieves used as pollution control measure and their location at drainage outlet(s)/surface channel(s) are as below:

Item	Location	No. of drainage outlets with sieve(s)	No. of sieves (pcs)	Remark	Item	Location	No. of drainage outlets/surface channels with sieve(s)*	No. of sieves (pcs)	Remark
1	Washing section		metal/ plastic*		11	(Other) meat cutting section	1	metal/ 2 plastic	
2	Washing section		metal/ plastic*		12	(Other)		metal/ plastic*	
3	Kitchen / Stove		metal/ plastic*		13	(Other)		metal/ plastic*	
4	Kitchen / Stove		metal/ plastic*		14	(Other)		metal/ plastic*	
5	Thawing area		metal/ plastic*		15	(Other)		metal/ plastic*	
6	Thawing area		metal/ plastic*		16	(Other)		metal/ plastic*	
7	Dim Sum section		metal/ plastic*		17	(Other)		metal/ plastic*	
8	Roasting area	1	2 metal/ plastic*		18	(Other)		metal/ plastic*	
9	(Other)		metal/ plastic*		19	(Other)		metal/ plastic*	
10	(Other)		metal/ plastic*		20	(Other)		metal/ plastic*	

* Delete if not applicable

Declaration:

I/We understand that the above-mentioned use of sieve as pollution control measure is not long-lasting in view of their temporary effect and difficulty in maintaining consistent and efficient operation. DSD does not encourage their use during sampling. If the applicant insists upon their use, any revision of TES rate approved by DSD is based on the provision that such use of sieve (including number and location) must be at all times the same as the status quo during the course of sampling. I clearly understand that if there is any change in such use of sieves (including their number and location), all previous collected samples and COD results, as well as the application, would be void.

Remark:

The location(s) of sieves declared above should be consistent with those as shown in the diagram(s) and photograph(s) submitted by applicant.

Establishment

Name of Establishment : ABC Restaurant
 Signature of Authorized
 Person of Establishment : Chan TM
 Authorized Person of
 Establishment : CHAN TAI MAN
 Position : Restaurant Manager
 Date : 29/10/2008

HOKLAS Laboratory

Name of Laboratory : DEF Laboratory
 Signature of Laboratory
 Representative : Tony
 Name of Laboratory
 Representative : TONY CHAN
 Position : Laboratory Manager
 Date : 29/10/2008



**Declaration of use of sponge filters in drainage outlet(s) / surface channel(s)**

To: Drainage Services Department (DSD)

Account No. : 12345678901, 1111611166

I/We declare that the number of sponge used as pollution control measure and their location at drainage outlet(s) and surface channel(s) are as below:

Item	Area	Total no.	Sponge location(s) (no.)	Total no. of sponge (pcs)	Remark
1	Drainage outlet	1	1	1	near roasting area
2	Surface channel	Not applicable			
3	Washing bench				
4	Scullery				
5	Sink	Not applicable			
6	Stove	Not applicable			
7	Floor sieve		Not applicable		
8	(Other location)				
9	(Other location)				
10	(Other location)				

Declaration:

I/We understand that the above-mentioned use of sponge as pollution control measure is not long-lasting in view of their temporary effect and difficulty in maintaining consistent and efficient operation. DSD does not encourage their use during sampling. If the applicant insists upon their use, any revision of TES rate approved by DSD is based on the provision that such use of sponge (including number and location) must be at all times be the same as the status quo during the course of sampling. I clearly understand that if there is any change in such use of sponge (including number and location), all previous samples collected and COD results, as well as the application, would be void.

Remark:

The location(s) of sponge declared above should be consistent with those as shown in the diagram(s) and photograph(s) submitted by applicant.

EstablishmentName of Establishment : ABC Restaurant

Signature of Authorized

Person of Establishment : Chan TM

Authorized Person of Establishment

: CHAN TAI MANPosition : Restaurant ManagerDate : 29/10/2008**HOKLAS Laboratory**Name of Laboratory : DEF Laboratory

Signature of Laboratory

Representative : Tony

Name of Laboratory

Representative : TONY CHANPosition : Laboratory ManagerDate : 29/10/2008