NSW CONTAINER DEPOSIT SCHEME
INTER-MRF TRANSFER FORM – SENDING MRF

PURPOSE OF THIS FORM

This form must be submitted to the Scheme Coordinator by the Sending MRF wanting to undertake an inter-MRF transfer. The MRF operator transferring the materials (the sending MRF operator) must complete this form. Appropriate scenarios for transferring materials are outlined in section 6.1 of the MRF Protocol.

The form must be submitted at least **10 business days** before the proposed transfer. If a more immediate transfer is requested, please provide an explanation of why notice cannot be provided in the reason for transfer.

MATERIAL RECOVERY FACILITY DETAILS

Please provide information about the facility transferring the materials.

Facility name	
MRF operator name	
MRF operator ABN	
MRF operator contact name	
MRF operator contact no.	
MRF operator contact email	
Facility street address	
Contact name	
Contact number	
Contact email	
Nominated claim method	☐ Weighing ☐ Direct counting ☐ Both
Reason for transfer	MRF does not have the ability to process material to required standard
If "other", please provide details	
By ticking this box, you are declaring that the transferred materials have not been processed to any degree	☐ Yes

Please provide information about the facility to which the materials will be transferred.

Facility name	
MRF operator name	
MRF operator ABN	
MRF operator contact name	
MRF operator contact no.	
MRF operator contact email	
Facility street address	
Contact name	
Is this facility an eligible MRF currently participating in the Scheme?	☐ Yes ☐ No

TRANSFERRED MATERIALS

Please enter details about materials to be transferred. Please record all weights in tonnes.

Duration of the transfer From: To:

	Per week	Total
Estimated total weight of all material transferred		
Which councils did you receive this material from (list all councils)?		
Which commercial sources did you receive this material from (list all commercial contractors or suppliers)?		
List all other sources that you received this material from		
Percentage % (by weight) received from councils		
Percentage % (by weight) received from commercial sources		
Percentage % (by weight) received from other sources		
Unique transaction identifier has been prepared for dispatch and receipt		

Please confirm:

☐ Unique transaction identifier has been prepared for weighbridge recording system
☐ Material will not be unloaded prior to transfer
☐ Receiver MRFO has agreed to expected tonnages

DATA CONSENT AND CERTIFICATION

I consent to the EPA and its contractors using the data provided in this form, the data required to be provided under the Container Deposit Scheme Material Recovery Facility Processing Refund Protocol (the Protocol), and the data submitted to the EPA's Waste and Resource Reporting Portal (WARRP) for the purposes of the administration of the Container Deposit Scheme.

I certify that all information provided in this form is true and correct and has been completed by a person who has authority to act on behalf of the MRF operator.

By submitting this form, I consent that all information that I have provided is true and accurate.

It is an offence to provide false or misleading information

NAME SIGNATURE DATE

Submit to EfC

NSW Environment Protection Authority
Email: info@epa.nsw.gov.au
Website: www.epa.nsw.gov.au

To be filled by Scheme coordinator only:

Reviewed:

Clause 8.3 validation:

Approved:

Date of Approval: