

**Construction and Demolition Material  
Disposal Delivery Form**

Contract No. : \_\_\_\_\_

Contractor : \_\_\_\_\_

Contract Title : \_\_\_\_\_

Location of Site : \_\_\_\_\_

Location of Public Filling Facility/Landfill \* : \_\_\_\_\_

\_\_\_\_\_

Vehicle Registration No.: \_\_\_\_\_ Date: \_\_\_\_\_

Approximate Load : Full / three quarter / half / one quarter \*

Remark : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Time of Departure: \_\_\_\_\_

\_\_\_\_\_  
Authorised Chop of  
Engineer's Representative/  
Architect's representative \*

*\* Delete whichever inappropriate*