To: WA Return Recycle Renew, as appointed Coordinator for the WA Container Deposit Scheme (**Coordinator**)

From: (Transferer)

Scheme ID: (Transferer Scheme ID)

To: (Transferee)

Scheme ID: (Transferee Scheme ID)

The Transferee requests a transfer of the nominated approved containers in the attached completed form into the Transferee’s name.

The Transferee understands that this transfer application will be reviewed by the CEO of the Department of Water and Environmental Regulation and if approved, that the containers approved for transfer will become visible in the Transferee’s individual online portal. The Transferee will therefore become responsible for keeping the information relating to these approved containers up to date.

Signed: (Signature of Authorised Representative)

Date: (dd/mm/yyyy)