

APPENDIX B

Applicant Response Form

Instructions to Respondents for completing this EOI:

- 1. All responses must be provided within the specified fields.
- 2. Respondents must respond to all sections of this template and include their trading name, the EOI Title and Reference Number in the footer of the template.
- 3. Respondents may provide supplementary material to support their Response. All supplementary material must be cross referenced to the relevant section of this EOI.

Invitation Title: Request for Expression of Interest for Processing or using Lime residues from drinking water treatment plant

Reference 2021-2022-0512

| RESPONDENT INFORMATION | | |
|---------------------------------|--|--|
| Name/Trading Name | | |
| Registered Name | | |
| ABN | | |
| Address of Registered Office | | |
| Name of Contact person | | |
| Position /Title | | |
| Address | | |
| Email | | |
| Telephone No | | |



| PROPOSED ACTIVITY | | | |
|--|-------------------------------|-------------------------------|--|
| Activity | Responsibility | Financial Implication | |
| Stock piling of lime sludge (waste) within the site | Muswellbrook Shire Council | Cost to Council and completed | |
| Load and transport away from site | Processor/User | Processor/User | |
| Compliance with producers' EPA requirements | Muswellbrook Shire Council | Cost to Council and completed | |
| Compliance with Appliers/ Processors EPA requirements | Processor/User | Processor/User | |
| Other Comments: | | | |
| | | | |
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CAPABILITY STATEMENT

1. Knowledge and experience relevant to the Application /Processing of lime waste.



2. Resources and capabilities to meet the objectives of the beneficial use of lime waste

3. Any value adding factors (e.g. innovations, environmental or social benefits) that makes engaging with you more favourable than others.

4. Any other alternatives recommended towards delivering the requirements of beneficial use of lime waste

5. Work health and Safety Concerns and capability to ensure requirements of WHS Regulations



FINANCIAL CAPABILITY

Respondents are required to demonstrate that they have the financial capacity to meet the requirements of the EOI. They are also requested to disclose any significant event or circumstance that has occurred in the past three years which may affect the operations of the Respondent.

CONDITIONS OF OFFER

Please provide details if your Expression of Interest is conditional or subject to further requirements from Council.

SIGNED FOR AND ON BEHALF OF THE RESPONDENT

I warrant that in submitting this response, I have read and accept the conditions of the EOI.

| Authorised Person Name | |
|---------------------------------------|--|
| Position | |
| Address | |
| Email | |
| Telephone No | |
| Signature of the Authorised Person | |