Application Form

APPLICANT'S DETAILS:

Name of the establishment:

Address :	
Code :	**Region:**
Phone :	**Fax:**
E-mail:	**URL:**

Year of Build :
Number of m² :
Number of employees:

Fees Scale (to be paid with the application)

100€	200€	300€
Establishments with up to 9 staff *and* up to 349 m2	**Establishments with 10 to 49 staff *or* 350 to 899 m2**	**Establishments with 50 or more staff *or* more than 900 m2**

This form has been filled by:…….
(Environmental Officer)

Signature _____ ***Date*** **:** _____

Please return to CYMEPA **(the National Operator) with the appropriate fees.**
Tel: 25343311 Fax: 25356066 Email: cymepa@cytanet.com.cy