



Questionnaire for Disposal Transport Packaging

This questionnaire gives us some basic information which we need to make an offer. We will contact you additionally by phone for further information if required.

Company name /
customer no.: _____

Industrial branch: _____

Contact person: _____

Phone / fax: _____

E-mail: _____

Date: _____

- **Which material fractions do you circulate? What is the quantity per year? Which containers are used for collection? (Please attach waste accounts if available.)**

Material	Quantity in t / a	Container
Paper / carton / cardboard		
Foil		
Wood		
Buckets, canister, barrels, tins		
EPS		
Plastic strap		
Steel strap		
Mixed waste		
Mineralic waste		
Organic waste		
Production-specific residue		
Other		

- **At which locations? Please state the accrual points as precisely as possible, giving at least zip code and place:**

Zip code	Place



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- **Who is your current disposal partner and how is the disposal organized?
How long is the residual term of your current contract(s)?
When will the next call for tenders be?**

- **Who is the correct contact person for clarification of further questions and details,
and maybe for making appointments for visitation?**

Name / capacity:

Phone / fax:

E-mail:

- **Did any problems occur in the past? Are there any special services that are
important to you?**

- **Further remarks**

Thank you for your information!

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