Infinite Textiles™ Audit Application





1. Your Company's Details				
Company name:				
Head Office Address: (including Postcode)				
Company Reg. Nº:		Is your company a member of the Y Textile Services Association?	es	No
2. Contact Details	Please provide details of	he person who will be your main contact for your Infi	nite Textiles audit	:
Contact name:		Job Position:		
Email:		Telephone:		
Work Address: (including Postcode)				
3. Laundry Site De	tails Please provide deta	ails each laundry site that will be covered by your Infir	nite Textiles audit	
Site Name	Address		Postcode	Estimated tonnes of condemned textiles
Total annual tonnage of condemned textiles:				
Current methods of dispos condemned textiles:	sing of			
Please give details of the type of textiles with estimated volumes condemned of each (i.e. Not white polycotton, etc)				
4. Infinite Textiles Audit Details				
Audit Level:	Standard	Plus		
Do you have preferred dates for your Audit to take place?				

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