

Visit Application Form

Type of Organization	Public	School
	Professional	Government Agency
Name of Organization		
Contact Person:		
Tel:		
Fax:		
Address:		
Location of Visit	U Wujih EfW Plant	Miaoli EfW Plant
Date of Visit	// (MM/DD/YY)	
Time of Visit	: ~: (an hour only)	
Total No. of Visitors	pax (minimum: 10 pax, maximum: 40 pax)	
Other Requests		
Remarks	 Available for group visit only. Please apply two weeks before the visit. Available from Mon to Fri – Morning: 9 am ~ 12 pm; Afternoon: 1 pm ~ 4 pm (exclude national / public holidays) Fill in each field clearly. Fax this application form to the respective unit. (Wujih EfW Plant: +886-4-2335-9495, Miaoli EfW Plant: +886-3-747-4105) 	

Applicant's Signature

Date: ___/ ___/ ____