

WASTE CENTRALISED COLLECTION POINT

RECORD NO :
FILE NO : 5.64.3

RURAL OCCUPIED RESIDENTAL PROPERTY

APPLICATION FORM

Please complete this form in BLOCK LETTERS and return to Council at least 21 days before commencing.

APPLICANT			
NAME		OCCUPANT	☐ OWNER ☐ TENNANT
POSTAL ADDRESS			
MOBILE PHONE		ALTERNATE NUMBER	
EMAIL			

PROPERTY DETAILS			
ADDRESS	The applicant must notify Council in writing if he/she move premises and the collection is to continue at a different address.		
OWNER (If different from Applicant)		ASSESSMENT NUMBER	

DECLARATION Please tick.			
☐ I hereby request approval to receive a rural waste collection and understand that my bin will be collected from one of the Centralised Collection Points which may change following reviews and as demand requires.			
☐ I have read and agree to comply with the letter attached.			
NAME			
SIGNATURE		DATE	

OFFICE USE ONLY			
AUTHORISED OFFICER		SIGNATURE	
APPROVAL NUMBER		DATE APPLICANT NOTIFIED	