Request for a Replacement Wheelie Bin(s)



ADDRESS	S OF PROPERTY				
Street No.		Street			
Town				PID:	
APPLICA	NT DETAILS				
Name:				Phone No:	
Postal Address				Mobile No.	
		Email address:			
Please	indicate the bin typ	pe(s) this request re	ates to:		
	Waste bin 140L				
	Waste bin 240L				
	Recycling bin 240L				
Please ind	licate the reason fo	r your request:	Damaged B	Bin(s)	Lost or stolen Bin(s)
DECLARATION: I/WeReque					
replaceme	ent WASTE / RECYC	CLING wheelie bin o	collection service(s) as	per the above inform	mation. I/we understand
there may			accept these charges.		
Signature: Date: _				//	
Signatu	ure:		Date:	//	
REPLACE	MENT FEE WAIV	ER REQUEST:			
I/we acknowledge that I/we have done everything in our power to locate the missing bins and request a waiver of the wheelie bin replacement fee.					
	JSE ONLY:	Not appro	ved Authorised	d By:	
	Vill collect from the	depot OR	\$30.00 delivery	fee paid Receipt	no.

PRIVACY STATEMENT

Personal information is managed in accordance with the Personal Information Protection Act 2004 and may be accessed by the individual to whom it relates, on request to Break O'Day Council. Information can be used for other purposes permitted by the Local Government Act 1993 and regulations made by or under that Act, and, if necessary, may be disclosed to other public sector bodies, agents or contractors of Break O'Day Council, in accordance with Council's Privacy Policy. Failure to provide this information may result in your application not being able to be accepted or processed.