

Application for Replacement / Repair of Damaged Mobile Garbage Bin / Recycling Bin

I, being the owner/occupier (*please circle*) of the property described below, hereby make application for replacement/repair of a Mobile Garbage Bin / Recycling Bin as follows:

Applicant's Name: _____ Phone: _____

Address: _____ Email: _____

Lot/s: _____ Sec: _____ Portion: _____ DP: _____

House No.: _____ Street / Road Name: _____

Town / Village Name: _____ Rate Assessment No.: _____

Damage Sustained: _____

How was the bin damaged: _____

Date bin was damaged: _____

Please indicate Replacement or Repair of Bin (please tick):

- ☐ Replacement of bin
☐ Repair – type of repair required. _____

Please indicate the size of Mobile Garbage Bin (please tick):

Mobile Garbage Bins:

☐ 140L - \$101.70

☐ 240L - \$101.70

Replacement Recycling Bin:

☐ 240L - \$101.70

.....
Applicant's Signature

Date

PLEASE NOTE - Conditions of Mobile Garbage Bin/Recycling Bin Service

- Replacement bin cost is the responsibility of the resident or owner.
- Bin collection is as per Council's specified route or specified collection points as notified by the Waste Operations Supervisor.

Office Use Only

Serial No of damaged bin: _____

Registration Date: _____

Serial No of replacement bin: _____

Document No: _____

Operator: _____

Officer Initial: _____

Date MRF notified: _____

Disposal
2 yrs ☐ 7 yrs ☐ 10 yrs ☐ S/A ☐

Date entered into spreadsheet: _____