Assessment No	 	



COMMERCIAL RUBBISH & RECYCLING COLLECTION REQUEST

To the Chief Executive Officer

This application is for a request to alter the rubbish and recycling collection as indicated below.

Applicant									
Property Add Collection Re			ubbish –						
Name of Ow	ner or Busi	ness:							
Postal Addre	ess:		_						
Tel:			E	Email / Fax:					
 Indicate the Note the nu 	n in front of to total number of service to the description of the des	the number. or of service vices you no es. oct to rental ed by the SI the proper	For example s you would eed to indica charges pleanire inclusive	e +6 or -2. like for the ate is the number contact of the annumber of the annu	property imber of bin Avon Waste ual service c	collections. (9641 1318) osts. Bins a	For example for fees.	e 2 bins col	lected twice a
Type of Bin Service	240L Rubbish	240L Recycle	1.5m³ Rubbish	1.5m³ Recycle	3.0m³ Rubbish	3.0m³ Recycle	4.5m³ Rubbish	4.5m³ Recycle	6.0 m ³ Cardboard
Commercial Service - Weekly									
Commercial Service - Fortnightly									
Total Rubbish Services:									
Applicant Ta I hereby cert charges as s will be effecti	ify that I reaspecified in ive on appr	the Shire	of Northa	m Schedu					
Applicant Na	me: 								
Signature:						Date:			
******	******	*******		*********** DFFICE U		******	*******	******	:*****
• FORM T	RM TO CONTRACTOR Of			ficer Initials:			Date:		
• FORM T	DRM TO RATES O		Office	icer Initials			Date [.]		