

	<h2 style="margin: 0;">ADDITIONAL BIN COLLECTION REQUEST</h2>	Form #	3.1224 / 2
		Reviewed:	31 August 2018
FORM			

Applicant Details

Applicant Name:	
Postal Address:	
Mobile:	
Email:	

Bin Collection Details

Type of Collection:	<input type="checkbox"/> Residential	<input type="checkbox"/> Rural	<input type="checkbox"/> Commercial
Property Address:			
Number of Additional Bins:			
Frequency per week:			

I/We agree:

- That any variation to the Additional Bin Collection will only have effect if advised in writing by either party to this agreement.
- To pay the annual fee (reviewed each year) in advance, I will be invoiced for Additional Bin Collection in July of each year.
- To pay each tax invoice within 14 days of receipt of invoice.
- That the Additional Bin Collection will occur subject to signing and returning this agreement to Council.

Signed:		Date:	
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OFFICE USE ONLY			
Date Received:		Assessment #:	
Account/NAR #:		Invoice #:	
File #: EF22/43	Registration #:	Referred to:	