



Name: _____

Address: _____

Phone: _____
 Home/Business Mobile

E-Mail: _____

Property Address: _____

Council Assessment Number: _____ Council Property Number: _____

Has a Certificate of Occupancy been provided to Council? Date Issued:
(New Services only) Yes No (if known) _____

I wish to apply for a Waste Collection Service to be supplied to the above mentioned property. This change will be a: (please tick)

New Service
(for properties who previously had no Waste Disposal Services)

OR

Additional Service (tick all that are required below)
(for properties who currently have a Waste Collection Service and require an extra service)

General Waste Service

Recycle

Glass

Green Waste

- a charge will be incurred for this service with an invoice to be forwarded to myself in due course for payment within 30 days; and
- that the bins remain the property of Pyrenees Shire Council.

Signed _____ Date _____

OFFICE USE ONLY		
Waste Task Number:	Entered By:	Date:
_____	_____	_____