

**PERMIT APPLICATION FORM
APPLICATION FOR PLACING OF BINS AND SKIPS IN PUBLIC STREETS**

Fax to:	City of Maroondah
Fax No:	9294 5634
Date:	

BIN & SKIP DETAILS

1: ADDRESS BIN / SKIP IS SERVICING

.....
2: PROPOSED SITING OF BIN / SKIP (CIRCLE LOCATION)

On roadway On nature strip In ROW Other

3. CONTACT ON SITE

Name:.....Telephone:

4: BIN / SKIP SIZE AND NUMBER

Size:Cub Metre Number of bins proposed:.....

5: PROPOSED PLACEMENT DATE:

6: PROPOSED COLLECTION DATE:

7: MAIN TYPE OF WASTE BEING COLLECTED (Circle one only)

Household Household Household Building Commercial Industrial
Renovation Garden Waste Other Construction

CONTRACTOR DETAILS

8: BIN CONTRACTOR DETAILS

Name:.....Telephone:.....

Address:.....Telephone (AH).....

Fax Number:.....

9. SIGNATURE OF APPLICANT*

..... Date:.....

*Acknowledges issue of permit shall be in accordance with relevant Council by laws and conditions

COUNCIL USE ONLY

- | | | |
|---------------------------------------|--|-------------|
| 1. Council Accreditation | YES/NO | Expiry..... |
| 2. Liability Insurance | YES/NO | |
| 3. Fees Charged | \$..... | |
| 4. Fee Payment (circle) | Cash Account Prepayment Other (Specify) | |
| 5. Advice of permit given to | | |
| 6. Permit No. | Permit Date:..... | |
| 7. Authorising Officer | Signature of Authorising Officer..... | |
| 8. Date faxed to Bin Contractor | | |