ACCREDITATION FORM



Application for accreditation as a supplier of bins and skips for placement in public streets / thoroughfares / road reserves

Application to Maroondah City Council

| 1. | NAME OF APPLICANT (supplier) |
|----|--|
| 2. | ADDRESS |
| 3. | TELEPHONE/S FAX |
| 4. | EMAIL ADDRESS |
| 5. | AFTER HOURS CONTACT (name) |
| 6. | AFTER HOURS TELEPHONE |
| 7. | DATE ESTABLISHED BINS HIRED (C.M) |
| 8. | TRADE REFERENCES (for the establishment of credit) |
| | Company |
| | Telephone Contact |
| | Company |
| | Telephone Contact |
| 9. | In consideration of Accreditation being granted to |
| | SIGNED POSITION IN COMPANY |
| | DATE |
| | MANDATORY ATTACHMENT: Copy of Public Liability Certificate of Currency (Minimum \$20 million) |
| | |

Note: Please include Maroondah City Council as an interested party on your Public Liability Insurance policy.

Policy No. Expiry Date

Maroondah City Council is committed to protecting your privacy as prescribed by the Privacy & Data Protection Act 2014 and the Health Records Act 2001. The information you provide on this form is being collected by Maroondah City Council for the strict purpose of conducting Council business. Your information will not be disclosed to any external party without your consent, unless Council is required or authorised to do so by law. Failure to provide the information requested may make you ineligible to receive the service or be part of an event/function that is the subject of this form. Any access to the information, amendments that may be required or any privacy enquiries may be directed to Council's Privacy Officer & Health Records Officer on 9298 4211 or email - privacy@maroondah.vic.gov.au