

WHITTLESEA CITY COUNCIL APPLICATION FOR CLOTHING RECYCLE BIN PERMIT COMMUNITY LOCAL LAW 2024

(Please allow 10 working days for processing)

Please note: 1 application fee per bin

Ι,				
		(Name)		
of				
		(Street Address/Mailing Add	ress)	
Name	of Organisation			
	application to place a Clo		nce with the City of Whittlesea	
At the	following location:			
Addres	SS			
		(Street Address)		
Name	of site / business			
Site ov	vner			
		Liability Insurance attache		
_	• •	not be issued without insura		
	,			
	(*mandatory – permit will not be issued without proof of agreement)			
	(*mandatory – permit will not be issued without site plan) Payment of \$220.10 attached*			
_	(* payable for each bin)			
	,			
(Signature of Applicant)			(Date)	
Applicant 24 Hour contact phone number:			or	
• •	·			
Office	Use Only:			
Officer	Initials: Dat	e of Inspection:	_ Approved Yes No	
	Fee payable \$220.10			
	Account No.	3195 1932 845	Rec. Type: 410	
	Descipt No.		Doto	