

## CANTERBURY APPLICATION FOR WASTE OR SHIPPING CONTAINER ON PUBLIC STREET

Container is not to be installed without the prior approval and conditions of this application being obtained 10 Working Days Minimum Notice Is Required

APPLICANT'S DETAILS					
	Name:				
	Address:				
	Contact No.	Fax:			
	Mobile No.	Email:			
	WODIIC NO.	Liliaii.			
SL	SUPPLIER DETAILS				
	Name: Co	ntact Name:			
	Address:				
	Person Interviewed:				
	Contact No.				
	Contact No	гах			
	Mobile No.				
PROPOSED SITE LOCATION					
	To apply for a building waste container/shipping container to be placed upon the road (footpath/carriageway - cross out which does not apply) in front of the premises known as:				
	To apply for a building waste container/shipping container to be placed upon the road (footpath/carriageway - cross				
	out which does not apply) in front of premises known as:				
	Address:				
	Date from:	to:			
	Note: Waste Containers 14 days maximum placemen Shipping Container 5 days maximum placemen				
	The container dimensions are: (L)	x (W) x (D)			
	Please attach a proposed location sketch: (include nearest	driveways, cross streets and traffic facilities).			
	I agree to bear responsibility for the removal of any waste deposited in and around the container whether by myself or by any other person. I shall be responsible and accept such responsibility for any damage done to the road, kerb or footpath or to any landscaping in the road due to the placement of the container.				
	I have attached a copy of a Certificate of Currency for with a minimum of \$20,000,000.00 Canterbury Bankston				
ΑF	PLICANT'S SIGNATURE				
		Date			
	Signature:	Date:			

## PAYMENT OF APPLICATION FEE

Payment can be made in the following ways:

**İ** 

**In Person** Present the completed form to

Customer Service Centre

Upper Ground Floor of Civic Tower, 66-72 Rickard Road, Bankstown.

Or

Campsie Customer Service Centre

137 Beamish Street Campsie NSW 2194

Mail

Cheques to be made Payable to "Canterbury Bankstown Council".

Enclose the completed application form and send to:

Canterbury Bankstown Council

Att: Customer Service

PO Box 8, Bankstown NSW 1885

FFF PAYARI
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Total Amount Payable	\$
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## **OFFICE USE ONLY**

Date of receipt: Receipt No: Accepted By: Fee Paid: \$

## **PRIVACY STATEMENT**

You will need to provide personal information to Council in respect of this application. Council is required under the Privacy & Personal Information Protection Act 1998 (PPIPA) to collect, maintain & use your personal information in accordance with the Privacy Principles & other relevant requirements of the PPIPA. For further clarification please contact the Privacy Contact Officer at Council.