



→ **APPLICATION FOR A 240 LITRE GARBAGE BIN AT A DISCOUNTED RATE FOR KIDNEY DIALYSIS PATIENTS – FINANCIAL YEAR 2011-2012**

NOTE: This form is to be completed by the owner of the property

**Applicant Details** *(Please print in blue or black pen)*

Date of Notification		
Property Owner(s) name <i>(not tenant)</i>	Surname	
	Given Name	
Address of Residence	Address	
	Suburb	Postcode
Contact Number [9 am to 5 pm]		

Due to the excessive waste generation associated with the medical condition of a resident at the above address, I request Wollongong City Council change the garbage bin at the above property from its current size to a 240 litre bin.

**A doctor's certificate confirming the condition is attached.**

I understand that I must advise Wollongong City Council in writing when the 240 litre bin is no longer required for medical reasons.

As owner of the above residence, I understand that the above mentioned property will be provided with a 240 litre garbage bin but will be charged a garbage levy based on a 120 litre garbage bin size, which is set at \$352 for the 2011/2012 financial year.

**Authorised signature of Owner/Agent:**

Signature: ..... Date: .....

<i>OFFICE USE ONLY</i>
Medical Certificate Attached: Y/N
Record No: