

## Domestic Waste Service Request Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Assessment Number: \_\_\_\_\_

Please indicate below that you would like to have your domestic waste collected and rates updated to reflect the increase in fees.

Yes, I would like to purchase a waste collection service and associated rates updated. One waste collection service will provide 1 X red lidded bin (waste), 1 X yellow lidded bin (recycling) and regular collection of both

OR

- Replacement general waste bin  
 Replacement recycle (yellow lid) waste bin

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Note: This form must be returned to the Council Office in Coolah or Coonabarabran to allow commencement of the collection service.*

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*For Internal Use Only:*

**Rates**

*The Service Charge was coded into the rates system:* \_\_\_\_\_

*Signed:* \_\_\_\_\_

*Date:* \_\_\_\_\_

**Warrumbungle Waste**

*Arrangement made to collect services from:* \_\_\_\_\_

*Bins delivered:* \_\_\_\_\_

*Bin Number:* \_\_\_\_\_

*Signed:* \_\_\_\_\_ *Date:* \_\_\_\_\_