CHECKLIST – BIN REQUEST

Damaged ☐ **Stolen** ☐ **New** ☐ **BA7*** ☐ **RFP**** ☐ **Additional***** ☐
* BA7 – New House Completion ** Rural Facility Pass ***Additional - RS Level 1
☐ RS Level 2 ☐ RS Level 3 ☐ RS Level 4 ☐ RS Level 5 ☐

To be completed by the person making the request:

1. OWNER/PROPERTY DETAILS

Owners Name: _____

Details of Damage (if applicable)**:** _____

Person making request: _____

Contact details:_____

Property Address:_____

Which bin requires replacement/fixing? (please circle)

General Waste Bin Recycle Bin (Yellow Top)

How many new / additional bins required?

General Waste Bin ☐ Recycle Bin ☐

OFFICE USE ONLY:

TASK TO BE ACTIONED

Pass to Coordinator Infrastructure Services to task for action in Works Planner.

DEPOT TO COMPLETE

NOTE: Depot staff to provide all bins numbers at property regardless of whether a new/replacement bin has been issued.

Name: _____ **Date:** _____ **Removed Bin No:** _____

General Waste Bin No: _____ **Recycle Bin No:** _____
General Waste Bin No: _____ **Recycle Bin No:** _____
General Waste Bin No: _____ **Recycle Bin No:** _____

Operations Supervisor to return this form to Rates Officer

Rates Officer to record bin numbers and/or charge interim for new service then send to AVON for adjusting Service Route