Domestic Waste Service Request

Wheel In Wheel Out Service (2023/2024)



 ¶ Civic Centre, 68 Elizabeth Street, Moss Vale NSW 2577 (PO Box 141, Moss Vale NSW 2577)

L (02) 4868 0888 ■ mail@wsc.nsw.gov.au

The Wheel in Wheel out Service is available to residents who are unable to present bins to the kerb.

This form needs to be completed by the resident and a medical practitioner.

| 1. Applicant Details | | | | | | |
|---|-------|--|-----|-----------------------|----|--|
| Full Name of Applicar | nt: | | | | | |
| Mobile Phone: | | | | Business Phone | : | |
| Email: | | | | | | |
| 2. Property Details | | | | | | |
| Property Number: | | | | | | |
| As shown on rates notice | | | | | | |
| Property Address | | | | | | |
| Name, Street/Lot Nun Locality | nber, | | | | | |
| Is this your current mailing address? (please circle one) Yes | | | | | No | |
| If no, please provide y mailing address here: | | | | | | |
| Special instructions to locate property | | | | | | |
| when delivering or removing your bins: | | | | | | |
| This document has three (3) pages. The completed form can be returned to: Email: mail@wsc.nsw.gov.au Mail: Wingecarribee Shire Council, PO Box 141, Moss Vale, NSW 2577 In Person: Customer Service, Wingecarribee Shire Council, Civic Centre, 68 Elizabeth Street, Moss Vale For more information about the service you are currently being charged or how to complete this form, please email the address above, or call (02) 4868 0888. | | | | | | |
| WSC Office Use Only: | | | JRR | Office Use Only: | | |
| Date Received: | | | Dat | e Received: | | |
| Date Processed: | | | Dat | e Processed: | | |
| Property No: | | | Pro | cessed By (Name): | | |
| Processed By (Name): | | | Pro | cessed By (Name): | | |

Working with you

Docket No:

Debtor No/ Invoice No

WSC.NSW.GOV.AU

| 3. Me | dical Ce | ertificate | | | | | | | |
|-------------------|--|---|---|------------------------|---------------------|------------|------------|---------|----------------|
| Medic | al Practit | ioner's Name: | | | | | | | |
| Practice Name: | | | | | | | | | |
| Practice Address: | | | | | | | | | |
| Contac | ct Numbe | er: | | | | | | | |
| I certify | that the ap | plicant is unable to pr | esent bins to the kerk | and requires assista | nce for | this activ | vity (plea | se tick |): |
| | Short te | rm (insert dates) - Po | eriod of assistance | required is from | / | / | to | / | / |
| | Long ter | m. The requirement | for assistance is or | ngoing. | | | | | |
| Signat | ure: | | | | D | ate: | | | |
| | I underst | and I will receive an a aste charges levied on Garbage Bin Collection Frequency | ing terms: nnual invoice for this the property. The cos | | service N Rec | | T(| year. | It is separate |
| | 3 bin | Weekly Waste | 52 | 26 | | 28 | | 01.40 | |
| | service | Fortnightly Waste | 26 | 26 | | 28 | \$1! | 52.00 | |
| | 2 bin | Weekly Waste | 52 | 0 | | 28 | \$1! | 52.00 | |
| | service | Fortnightly Waste | 26 | 0 | | 28 | \$10 | 02.60 | |
| 2. | | and that my property oviding the Wheel In W | | ne collection contract | tors to e | ensure W | /H&S rec | quirem | ents are met |
| 3. | 3. I understand that my bins must be in a suitable location to be accessed by the contractors. | | | | | | | | |
| 4. | 4. I understand that the cost is based on the number of bins and frequency of collection paid for by the Domestic Waste Management Charge on the property, not on whether the bins are full or empty on any given day. | | | | | | | | |

To avoid a delay in this application from being processed please ensure the form is fully completed, signed and all required documentation attached.

| Applicant Name | Applicant Signature | Date | |
|--|---------------------|------|--|
| | | | |
| I am completing this form as one of the following (please tick one): | () the owner, or | | |
| | () the resident | | |

Privacy Statement

In lodging this form, you are providing personal information such as your name and contact details. The personal information that Council has collected or is collecting from you is personal information for the purposes of the *Privacy and Personal Information Protection Act 1998* (PPIPA). Your personal information will be handled in accordance with the PPIPA and Council's <u>Privacy Management Plan</u>. For further information regarding Council's privacy obligations, see <u>Privacy Guidelines</u>.

Purpose of collection: Your personal information is being collected for the purpose of contacting you or serving correspondence upon you in relation to your domestic waste request. Your personal information will also be communicated to <u>JR Richards & Sons</u>, Council's domestic waste collection service provider, for the purpose of providing the requested waste service and contacting you in relation to your waste service.

Intended recipients: The intended recipients of the information include Council officers, contractors and agents of Council (including JR Richards & Sons) and persons granted lawful access under the *Government Information (Public Access) Act 2009*.

Supply: Supply of your personal information is voluntary, however, if you cannot or refuse to provide some or all of the information sought, Council may be unable to process your request.

Access/Correction: You may make application to access or amend your personal information held by Council. Council will consider any such application in accordance with the PPIPA.

Storage: Your personal information is being, or has been, collected and will be held by: Wingecarribee Shire Council, Civic Centre 68 Elizabeth Street, Moss Vale NSW 2577. Your personal information will also be held by JR Richards & Sons 92-94 Manning Street, Tuncurry NSW 2428. This form will be placed on a relevant file and/or recorded in both Council's and/ or JR Richards & Sons' electronic document and records management system.