

Carry Out Service

Domestic Waste from Residential Properties

Effective from July 2021 to June 2022

Residents who are aged or infirm may apply for assistance with the removal of domestic waste from inside residential premises.

For further information, please contact Customer Service Centre on (02) 9391 7000.

Applicant								
Title:		Full name:						
Company name (if applicable)	e: [
Collection addr	ess:							
Postal address (if different to the co	=							
Phone:				Email addres	ss:			
Reason for Car	ry Out Servic	e request:						
Important info	rmation							
Council will colle	ect only domes	tic waste from wit	hin the re	sidential premises	listed a	bove subject to	the followi	ng conditions:
and exit to	perform the r	nduct an assess equested carry of be presented in C	out servic		ant and	inspect the pro	emises fo	r safe entry
Applicant's de	eclaration ar	nd consent						
I,								agree to pay
Council the Carr 2021-2022.	y-Out Service	Fee as set out in	Woollahra	a Council's Delive	ry Progra	am 2018-2022 a	and Opera	tional Plan
		service Charge of e weekly service)		one 55L bin, or \$2 voiced annually.	2.13 for (one 120L, 140L	or two 55l	_ bins, or \$4.55
Annlicant's sig	naturo					Date		

Fees (Invoiced annually - Fees are valid until 30 June 2022)

Weekly Service Charge:

2 x 55L bin: \$2.13 per week 1 x 240L bin: \$4.55 per week

Privacy and conditions of use

For more information about Privacy & Personal Information Policy: www.woollahra.nsw.gov.au/privacy.

Lodgement details

Mail to: Woollahra Municipal Council In person: Council Chambers

PO Box 61 Double Bay 1360 536 New South Head Road Double Bay NSW 2028

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Email: records@woollahra.nsw.gov.au Telephone: (02) 9391 7000

Website: www.woollahra.nsw.gov.au

Payment methods:

Payment can be made at our Customer Service Department by the following methods: cash, EFTPOS, Money Order cheque (make cheques payable to Woollahra Council), or credit card – American Express, MasterCard or Visa.

Credit card payments will incur a processing fee.

OFF	ICE	USE	ONLY	•
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Form completed and signed by owner: CSO name: