Contact Michelle Robinson

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**E** kmcldkmc.nsw.gov.au

**W** www.kmc.nsw.gov.au

**ABN** 86 408 856 411



## TRADE WASTE & TRADE RECYCLING **SERVICE ADJUSTMENT FORM**

Business Name			Acc #	
				Phone
Would like to ☐ inc				
				e evening before your designated day.
	<u> </u>			
Existing Service Trade Waste Service			New Service Level Required Trade Waste	
Monday Tuesday Wednesday Thursday Friday Saturday			Monday Tuesday Wednesday Thursday Friday Saturday	
Existing Service Trade Recycling Service			New Service Level Required Trade Recycling	
Monday Tuesday Wednesday Thursday			Monday Tuesday Wednesday Thursday	
For my new service	level I will re	equire;		
	No. of bins	Type of b	oin	Price/bin/collection 20/21 fin yr
Bins to be delivered				Waste -
				Recycling -
Bins to be removed				
Please start my nev	v service from	m		(date
Authorised Person (	Name )			
Signed	(dat			

se return this form to Council at Kmcidkmc.nsw.gov.au.

In completing this form you will be prompted to supply information that is personal information for the purposes of the Privacy and Personal Information Protection Act 1998. The supply of this information is voluntary. If you cannot provide, or do not wish to provide the information sought, Ku-ring-gai Council may be unable to process your application. Council is required under the Act to inform you about how your personal information is being collected and used. If you require this or any further information please contact Council's Privacy Officer.