



Please print clearly in **BLACK** pen and try to provide as much information as possible, so that we can correctly identify your property. If this form has not been completed, we may send it back to you or ask you for more information, before we can process your request.

Please return completed form to Cleanaway to: PO Box 10, Bega NSW 2550 or email: [emptymybin@cleanaway.com.au](mailto:emptymybin@cleanaway.com.au) or Fax: 6492 3704

**BIN REPLACEMENT REQUEST FORM**

**Contact Details**

Full Name \_\_\_\_\_

Contact Phone \_\_\_\_\_

Email \_\_\_\_\_

**Property Detail** (where the bins are to be replaced)

Rates Assessment No \_\_\_\_\_

Unit/House No \_\_\_\_\_ Street \_\_\_\_\_

Town/Locality \_\_\_\_\_ Postcode \_\_\_\_\_

**Type of Service**

Domestic

Commercial

**Reason for Replacement**

Lost

Stolen

Damaged/Destroyed

**Type of Bin**

80 Litre General Waste (Red Lid)

80 Litre Recycling Bin (Yellow Lid)

140 Litre General Waste (Red Lid)

240 Litre Recycling Bin (Yellow Lid)

240 Litre General Waste (Red Lid)

360 Litre Recycling Bin (Yellow Lid)

80 Litre Organics Bin (Green Lid)

140 Litre Organics Bin (Green Lid)

240 Litre Organics Bin (Green Lid)

**Authorisation**

I believe the information on this form to be true and correct.

Signature \_\_\_\_\_

Date

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