

Activity Application Place Clothing Bin(s) in a Public Place

Under Section 68 - Part C3 of the Local Government Act 1993.

Effective from July 2024 to June 2025

About this form

Use this form to apply to place clothing bins or the like in a public place in the Municipality of Woollahra. Pursuant to Council's '*Policy on Clothing Bins on Council Land'*. Council will only permit charity operated clothing bins in Council's public car parks

Documentation

As detailed below, including sketch plans, an insurance certificate and proof of membership of the National Association of Charitable recycling Organisations (NACRO) or charitable organisation.

Please call our Customer Service Centre on (02) 9391 7000 for any assistance.

Applicant's details (Charity name, address and contact details)							
ABN / ACN:							
Full name:							
Address:							
Phone:	Ema	il:					
Contact name:							
(Who has control of locating and servicing the clothing bins)							
Public liability insurance details (You must attach a copy of the Certificate of Currency for the insurance which must nominate Council as an insured interested party)							
Name of Insurer:							
Address of insurer:							
Phone:	Ema	il:					
Contact: (only if a company)							
Insurance Policy no:							
	(Note: Please attached a copy of insurance policy)						

Carpark details (Attach plan to show precise location of bins within the carpark)								
Checklist (The	following information mu	st accompany you	application)					
☐ A fully dime	nsioned location sketch plar	1						
☐ Details on th	Details on the number and size of clothing bin(s)							
A management statement on how the bin(s) and surrounding area is to be maintained, including time and frequency of emptying the bin(s)								
Proof of membership of National Association of Charitable Recycling Organisation (NACRO) or proof that the organisation is a 100 percent charitable organization								
Applicant's dec	claration and signature							
• •	above nominated charity, I ve	erify that the informa	tion submitted v	with this applicati	on is true and accurate			
Name (must be s	igned by the Charity applyin	g for the approval)		ate				
Fees								
	to be paid with this applicat	ion.						
Privacy and co	nditions of use							
	tion about Privacy & Person	al Information Policy	: www.woollah	ra.nsw.gov.au/pr	<u>ivacy</u> .			
Lodgement det	ails							
Who to contact:	The Compliance Officer handling your application in the Compliance section. If you wish to discuss a proposal with one of our Compliance officers, it is essential that you arrange an appointment. We recommend that you consult with a Compliance officer before lodging this application.							
Mail to:	Woollahra Municipal Coun PO Box 61 Double Bay 13	-	536	ncil Chambers New South Head ole Bay NSW 202				
Email:	records@woollahra.nsw.go	ov.au Telep	hone: (02)	9391 7000				
Website:	www.woollahra.nsw.gov.au	<u>.</u>						
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.								
OFFICE USE ONLY To be completed by Council's Cashier and Customer Service Officer GST may be applicable (refer receipt) Retain your receipt as proof of lodgement		Fee type		Fee	Receipt code			
		Application fee		\$44.00	Т34			
		Total						
of the application					_			
Cashier:			Date	ə :				



Payment Form

Payment methods

Payment in person at Council's Customer Service Centre can be made in cash, EFTPOS, cheque or money order or credit card (American Express, MasterCard and Visa).

Payment details

All credit card payments will incur a processing fee of 0.55%.

Separate cheques are required for integrated development fees to the relevant body. Cheques and money orders are payable to **Woollahra Council.**

Payments should be sent to Woollahra Council at: 536 New South Head Road DOUBLE BAY NSW 2028;

PO Box 61 DOUBLE BAY NSW 1360

Privacy notice

The personal information in this form is required under the Environmental Planning and Assessment Act 1979 and will only be used for processing of payments. If you do not provide the information, Council will not be able to process your payment and application. Payment information is restricted to Council officers. Council is to be regarded as the agency that holds the information. You may request amendment of any personal information held by Council that is incorrect.

Payment particulars							
Payment for:							
Council reference:							
Application address:							
Credit card details							
Card type:	□ Visa		☐ MasterCard	☐ Americar	n Express		
Card number:							
Cardholder name:				Expiry date:			
Total amount paid \$:				cvv:			
Cardholder signature:				Contact number			
OFFICE USE ONLY							
Cashier's name:	er's name: Cashier's signature:						
Payment processed: Ye	s 🗆	No 🗆		Date:			