Manual Waste Service -**Application for Service and Indemnity**



Application Requirements

If you are unable to physically move your bin to the kerb for collection, and have no able-bodied person at home to do this, you can apply for a manual service.

A manual service can be temporary or ongoing. For an ongoing service, an updated medical certificate is required each year.

The medical certificate from a registered GP should include the reason for inability to put bins out and if, applicable, the duration of the manual service.

All fields on this form must be completed

A !!				
Applicant Details				
Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss				
Given name(s)				
Surname				
Residential address				
Suburb	Postcode			
Cubuib	Osicode			
Dhana Dan Dan Mahila				
Phone (W) (H) Mobile				
Email address				
Property Address				
Residential address				
Suburb	Postcode			
Cubuib	Osicode			
Property Details				
Where are the bins located on the prope	erty?			
☐ Front yard ☐ Back yard ☐ S	ide of property			
Other (please describe):				
other (prease deserber).				
Are there any dogs on the property?				
If yes , please ensure all dogs are contained during collection.				
Are there any security or locked gates? $\ \square$ Yes $\ \square$ No				
If ves please ensure these are unlocked on collection day				

Additional Information Required

☐ Medical certificate attached

Declaration

I/We request a manual service for Domestic Waste collection on the above property.

I/We have supplied a Medical Certificate from a registered GP as per application requirements.

I/We give Redland City Council permission to enter the property for the purpose of emptying waste bins (including recycling and green waste bins) and returning such waste bins to a designated location, on property.

I/We hereby indemnify and agree to keep indemnified the Redland City Council, its contractors including employees and agents of either in respect of the whole amount of any liability, claims, demands, costs and expenses made against any of them or incurred by any of them in respect of any damage on the property while undertaking the manual service of the bins.

CRWR no.		Property	
CSC initials		Date	
☐ Medical certificate attached			

Office Use Only

Applicants signature

CSWS008 - 06/07/2021

Date

Information Privacy Act 2009 - Redland City Council is collecting your personal information in order to process this application. This information will only be used by authorised Council Officers for the purpose of this Indemnity Form and ensuring our records are accurate. Your information will not be given to any other person or agency unless you have given us permission or we are required by law to do so.