



# BANKSTOWN CITY COUNCIL

! WASTE CONTAINER APPLICATION  
! SHIPPING CONTAINER APPLICATION  
ON A PUBLIC STREET

**Container is not to be installed without the prior approval and conditions of this application being obtained  
5 Working Days Minimum Notice Is Required**

## APPLICANT'S DETAILS

Name: .....  
Address: .....  
Contact No: ..... Fax: .....  
Mobile No: .....

## SUPPLIER DETAILS

Name: ..... Contact Name: .....  
Address: .....  
Person Interviewed: .....  
Contact No: ..... Fax: .....  
Mobile No. ....

## PROPOSED SITE LOCATION

To apply for a building waste container/shipping container to be placed upon the road (footpath/carrageway - cross out which does not apply) in from of the premises known as:

To apply for a building waste container/shipping container to be placed upon the road (footpath/carrageway - cross out which does not apply) in front of premises known as:

Address: .....

Date from: ..... to: .....

**Note: Waste Containers 14 days maximum placement.  
Shipping Container 5 days maximum placement.**

The container dimensions are: (L) ..... x (W) ..... x (D) .....

Please attach a proposed location sketch: (include nearest driveways, cross streets and traffic facilities).

I agree to bear responsibility for the removal of any waste deposited in and around the container whether by myself or by any other person. I shall be responsible and accept such responsibility for any damage done to the road, kerb or footpath or to any landscaping in the road due to the placement of the container.

I have attached a copy of the Certificate of Currency for Public & Product Liability from supplier.

**APPLICANT'S SIGNATURE**

Signature: .....

Date: .....

**PAYMENT OF APPLICATION FEE**

Payment can be made in the following ways:



In Person

Present the completed form to  
*Customer Service Centre  
Upper Ground Floor of Civic Tower,  
66-72 Rickard Road, Bankstown.*



Mail

Cheques to be made Payable to "Bankstown City Council".  
Enclose the completed application form and send to:  
*Bankstown City Council  
Att: Customer Service  
PO Box 8, Bankstown NSW 1885*

**FEE PAYABLE**

Total Amount Being Paid

\$.....

**PRIVACY STATEMENT**

You will need to provide personal information to Council in respect of this application. Council is required under the Privacy & Personal Information Protection Act 1998 (PPIPA) to collect, maintain & use your personal information in accordance with the Privacy Principles & other relevant requirements of the PPIPA. For further clarification please contact the Privacy Contact Officer at Council.

**BANKSTOWN CITY COUNCIL** PO Box 8, Bankstown NSW 1885 **PH** 02 9707 9400 **FAX** 02 9707 9495 **DX** 11220 **ABN** 38 380 045 375  
**CUSTOMER SERVICE CENTRE** Upper Ground Floor, Civic Tower, 66-72 Rickard Rd, Bankstown **PH** 02 9707 9999  
Hours 8.30am - 5.00pm Monday to Friday **EMAIL** council@bankstown.nsw.gov.au

[www.bankstown.nsw.gov.au](http://www.bankstown.nsw.gov.au)