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KUNUNURRA

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8.00am - 4.00pm MON - FRI

Bin Request

This form is to be completed by the owner of the property only, or an authorised party (i.e. Real Estate Agent).

PROPERTY DETAILS

Applicant Name			
Owner Name			<input type="checkbox"/> As above
Occupier Name			<input type="checkbox"/> As above
Unit/House no.			Lot No <input type="text"/>
Street Name	<input type="text"/>		
Contact Phone	<input type="text"/>	Mobile	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>

SERVICE UPDATE (for new services/new bins only)

Details	Current Status	Update to
Number of Bins	<input type="text"/>	<input type="text"/>
Number of Collections per week	<input type="text"/>	<input type="text"/>

Request	Details
Repair Bin <i>(please specify in details)</i> <input type="checkbox"/>	
New Bin <i>(for new properties only)</i> <input type="checkbox"/>	
Replace Damaged Bin <i>(please put damaged bin out for collection on your normal collection day)</i> <input type="checkbox"/>	
Replace Stolen Bin <i>(Police report no is required)</i> <input type="checkbox"/>	
Other <i>(provide details)</i> <input type="checkbox"/>	
New Sticker Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/> <i>(please provide the reason for a new sticker in the details section)</i>	

OFFICE USE ONLY

Received by (Officer Name)	<input type="text"/>	Officer Signature
Assessment No.	<input type="text"/>	New Bin Number	<input type="text"/>
Old Bin Number	<input type="text"/>	Date of Delivery	___/___/___
Date Bin was repaired	___/___/___		