



PO Box 614 Kununurra 6743
20 Coolibah Drive KUNUNURRA

Koolama Street WYNDHAM

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F | 9168 1798

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8.00am - 4.00pm MON - FRI

Bin Request

This form is to be used to update collection frequency or for bin replacement.
Applications must be made by the owner of the property or an agent.

PROPERTY DETAILS

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

SERVICE UPDATE

Details	Current Status	Update to
Number of Bins		
Number of Collections per week		

BIN UPDATE

Request	Details	
Repair Bin	<input type="checkbox"/>
New Bin	<input type="checkbox"/>
Replace Damaged Bin	<input type="checkbox"/>
Replace Stolen Bin	<input type="checkbox"/>
Return Bin	<input type="checkbox"/>

OFFICE USE ONLY

Received by (Officer Name)		Receiving Officer Signature		
Officer Role		Date Received	___/___/___	
Assessment No.		Responsible Officer	Signature	Date
Old Bin Number		Kimberley Waste		___/___/___
New Bin Number		Kimberley Waste		___/___/___
Date Bin was repaired	___/___/___	Kimberley Waste		___/___/___
Date of delivery	___/___/___	Kimberley Waste		___/___/___
Charges to Apply	\$ _____ . ____	Depot Clerk		___/___/___
Invoice Number		Rates Officer		___/___/___
Date Rates Details Updates	___/___/___	Rates Officer		___/___/___