



- **Postal Address**
- 511 Burwood Hwy
- Wantirna South 3152
- Ausdoc: DX18210
- www.knox.vic.gov.au

- **Civic Centre**
- 511 Burwood Highway
- Wantirna South 3152
- Telephone: 9298 8000

## 2019/20 Local Laws Application

### Application for an Independent (Clothing Recycle) Collection Bin

#### Applicant's Details:

Company/Organisation: \_\_\_\_\_ ABN: \_\_\_\_\_

Trading Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Permit Required for:

Location: \_\_\_\_\_

Name on Bin: \_\_\_\_\_

Phone Number: on Bin: \_\_\_\_\_ Number of Bins at site:  1  2

All relevant details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Application Must Include:

- **Fee Payable** (includes \$146.00 non-refundable application fee):  
    **\$276.00** per bin that is directly operated by a fundraising organisation\*  
    **\$692.00** per bin that is not operated by a fundraising organisation  
    \*Requires organisation to be registered or exempt under the *Fundraising Act 1998*
- Sketch plan of site placement.
- Public Liability Insurance (\$10m), an example of wording is below:  
    *"The interests of the City of Knox Council as a principal is hereby noted. The policy is extended to indemnify the Knox City Council in respect of any claim indemnifiable under the policy brought in respect of personal injury or damage to property caused by an occurrence arising directly and solely out of the negligent acts, errors or omissions of the insured. This extension does not extend to any negligent acts, errors or omissions of the Knox City Council, its staff or agents themselves."*

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Office Use Only**

\_\_\_\_\_  
**Cashier**

\_\_\_\_\_  
**LC/LLGRPS (choose PrePayments)**

#### Privacy Notification

The personal information requested is being collected by Council for purposes of applying for the above permit under General Provisions Local Law 2010 and will be used solely by Council for that primary purpose or directly related purposes.

Date Issued:     /     /

Receipt Number \_\_\_\_\_