



**SHIRE OF DERBY/WEST KIMBERLEY**

Telephone : (08) 91 910 999

Facsimile : (08) 91 910 998

**Use this form if your bin is damaged or stolen.**

For use by non-Homeswest owners/ tenants only.

**HOMESWEST tenants to liaise directly with the dept.**

**REPLACEMENT BIN APPLICATION  
DAMAGED/STOLEN BINS**

I, \_\_\_\_\_ of : \_\_\_\_\_  
(OWNER'S NAME) (POSTAL ADDRESS)

declare that the 240 litre rubbish bin supplied to the property listed below by the Shire of Derby/West Kimberley has been:

DAMAGED \_\_\_\_\_

**DETAILS**

**POLICE REPORT NUMBER IS REQUIRED IN CASES WHERE THE BIN IS DAMAGED OTHER THAN WEAR AND TEAR**

STOLEN \_\_\_\_\_  
**POLICE REPORT NUMBER IS REQUIRED**

**PROPERTY TO WHICH BIN BELONGS:**

Assessment No. \_\_\_\_\_

Lot No. \_\_\_\_\_ Street No. \_\_\_\_\_ Unit No. \_\_\_\_\_

Street Name \_\_\_\_\_

I understand that the Shire of Derby/West Kimberley in supplying me with a replacement bin will do so under the following conditions:

1. I have not damaged my original bin in any way;
2. If my previous rubbish bin is found or returned I will notify the Shire office immediately.

\_\_\_\_\_  
OWNER'S SIGNATURE DATE

\_\_\_\_\_  
PHONE NO. FAX NO.

**Private Witness or Council/Waste Management Contractors Witness :**

Signature : \_\_\_\_\_ Name : \_\_\_\_\_

**OFFICIAL USE ONLY**

DATE FAXED TO DEPOT \_\_\_\_\_

NUMBER OF BINS CURRENTLY CHARGED \_\_\_\_\_ BIN NO. \_\_\_\_\_

NEW BIN NO. \_\_\_\_\_ REPLACING BIN NO. \_\_\_\_\_

DELIVERY DATE \_\_\_\_\_

PROPERTY & BIN SYSTEMS UPDATED \_\_\_\_\_ (SIGN/DATE)