



REQUEST FORM *for*
NEW CLEANSING SERVICE
AT A MULTI- UNIT DWELLING COMPLEX (MUD's)

Cairns Office
 PO Box 359,
 Cairns Qld 4870
 Tel: 4044 8210
 Fax: 4044 8228

Mossman Office
 PO Box 359
 Cairns QLD 4870
 Tel: 4099 9459
 Fax: 4098 2902

Property Address: _____

Number of Units in premises (if > 1)	Assessment No.
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Date property will be occupied from: _____

Property Owner's Name: _____

Owner's Phone Number: H: _____ W: _____ M: _____

Requestor's Name: _____ Phone No: _____
 (Please PRINT)

Company Name: _____

PLEASE COMPLETE THE FOLLOWING (Place an X in appropriate section)

NEW GARBAGE SERVICES FOR FLATS OR UNITS	
<input type="checkbox"/>	GARBAGE 240 LTR WHEELIE BINS _____ NUMBER OF BINS REQUIRED
NEW RECYCLE SERVICES FOR FLATS OR UNITS	
<input type="checkbox"/>	RECYCLE 240 LTR WHEELIE BINS _____ NUMBER OF BINS REQUIRED
NEW SERVICES FOR FLATS OR UNITS	
<input type="checkbox"/>	GARBAGE BULK BIN REQUIRED
<input type="checkbox"/>	RECYCLE BULK BIN REQUIRED
** Please note that a Site Evaluation must be undertaken at the property site before a bulk bin service can commence.	

PLEASE NOTE BINS WILL ONLY BE DELIVERED UPON THE REQUEST OF THE BODY CORPORATE AND WHERE THE PROPERTY IS OCCUPIED AND A SAFE STORAGE PLACE IS AVAILABLE.

FOR OFFICE USE ONLY:

Body Corp Assessment Number:	Parcel number:
Number of Entitlements:	Rates Notified:
Lotus Note(s):	Recycling Brochure Yes / No
Date Service Commenced:	Revised: 17 April 2008