Strathbo	Strathbogie Stolen Bin									
Your Detail	ls									
Name:										
Property Ac	ldress	:								
Collection F	Point:									
Phone:				Mobile:						
Email addre	ess:									
Date bin/s	was s	tolen wh	nile out for c	ollect	ion:					
The hin/s t	hat wa	es stoler	n was (pleas	o circ	lo):					
ווופ טווויס נו	iiai wa	as stolet	i was (picas	e circ	i c).					
Garbage (red lid)			20 litre	2	240 litre					
Recycling (yellow lid)			120 litre		240 litre	36	0 litre			
Organics (green lid)			20 litre	240 litre						
Kitchen Cad	ddy									
DECLARA	ΓΙΟΝ									
I do solemn	ly and	sincerel	y declare tha	it the a	bove inforn	nation	is cor	rect.		
I am reques	sting re	eplaceme	ent bin/s to be	e deliv	ered to my	prope	rty ad	dress	S.	
Print Name:	•									
Signature:							Date			
Office Use (Only –	please d	o not fill out							
Assessment No					Date Repla					
Date Contractor Notified					Approving Signature					
Garbage Serial No			Recycle Serial No				anics al No			