



Dear Sir/Madam,

Please find enclosed the application and declaration forms for the Council-funded Assisted Rubbish Collection Service.

The service is for a rubbish collection only. The Council's contractor will remove the recycling and organics bins from the property until Council is advised that the service is no longer required. If your application is approved, your collection will occur fortnightly on the same day as your street's kerbside collection day.

Please check the conditions below for eligibility to ensure that you fit the criteria before applying for this service;

- Disability, impairment or frailty prevents the applicant from using the service in the particular circumstances of the applicant's property; AND
- Household or community support is not available
- Properties provided with this service must keep the bin in a fixed location that is readily accessible from the street and provides the contractor with unimpeded access to the property for the purpose of collecting and returning the wheelie bin.

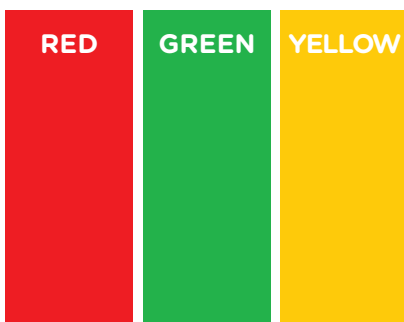
COUNCIL REQUIRES SUPPORTING DOCUMENTATION (this can be a letter or medical certificate) from your General Practitioner or other registered medical professional which verifies that you are incapable of taking a wheelie bin to the kerbside.

If you are accepted for this service, Council will contact you annually to confirm your contact details and that the service is still required. If you find you no longer need the Assisted Rubbish Collection Service, please contact the Council to inform them and to organise for the recycling and organics bins to be returned at no charge.

For further information please contact Council's Customer Call Centre on (03) 941 8999.

Yours faithfully,

Solid Waste Contracts Team
City Operations Group



Christchurch City Council
City Water and Waste
53 Hereford Street, Christchurch
PO Box 73014, Christchurch 8154
Phone: (03) 941 8999
Web: www.ccc.govt.nz

Christchurch
City Council

C'mon Christchurch
let's get our
rubbish sorted!

Assisted Rubbish Collection Service

Application Form



Name of Applicant: _____

Property Address for the service: _____

Contact Phone Number: _____

Reason(s) for applying for assistance: _____

Alternative contact:

Council requires an alternative contact person in case it is unable to make contact with you.

Name: _____

PhoneNumber: _____

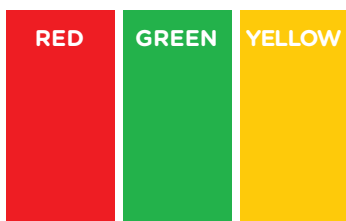
PostalAddress: _____

Alternative information:

If someone lives with you that is capable of putting out the wheelie bins, Council may not consider you eligible for the Assisted Rubbish Collection Service.

If other people live with you at this address, please state their name(s) and relationship to you (the applicant):

What community support is currently provided to you, i.e. house cleaner, gardener, etc?



Assisted Rubbish Collection Service

Application Form continued



Conditions of Acceptance and Declaration

Acceptance of Conditions:

1. In providing the Assisted Rubbish Collection Service, neither the Council nor the Council's contractors will be liable for any damage or loss that may be incurred as a consequence of providing this service.
2. The contractor shall have unimpeded access, for the purposes of bin collection, to the property.
3. An accessible location for the **rubbish wheelie bin** shall be provided by the applicant. The location shall be subject to approval by the collection contractor and shall not be shifted without the approval of the collection contractor.
4. Any threatening and/or inappropriate behavior (human or animal) to the collection contractor will lead to the Assisted Rubbish Collection Service being withdrawn.
5. If you no longer require this service contact the Council on (03) 941 8999. Council will require at least two weeks' notice to order and redeliver a recycling and organic wheelie bin to the property.

Declaration (please tick):

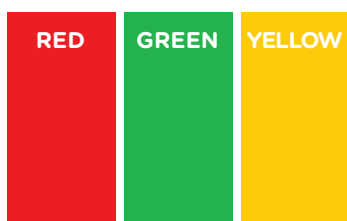
- I accept the conditions.
- I confirm there is no one within the household who is capable of assisting me (the applicant) in using the kerbside collection service.
- I confirm there is no community support being provided to the household that can assist me (the applicant) in using the kerbside collection service.
- In applying for this service, I authorise Christchurch City Council to complete all the checks required to verify that the applicant should receive an Assisted Rubbish Collection Service and whether it is feasible for this service to be provided.

Applicant's Signature: _____

Date: _____

Please return your application form, with your supporting documentation from your General Practitioner or other medical professional to:

Solid Waste Contracts Team
City Services Group
PO Box 73014
Christchurch 8140



Christchurch
City Council



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