

### CONTRACTOR DETAILS:

Company name:	ABN:
Trading name:	Phone:
Contact name:	Phone (AH):
Address:	Facsimile:

### CONDITIONS FOR ACCREDITATION:

- Council Land includes any road (or road reservation) and any land owned, maintained or controlled by Knox City Council.
- Waste or skip bins must not be placed in a position that:
  - Obstructs any vehicle or pedestrian. Adequate provision must be made for the safe movement of pedestrians (including those with disabilities) and cyclists
  - Obstructs the view of any motorist or pedestrian
  - Obstructs any drainage pit or outlet channel
  - Obstructs access to any item legally placed, or any permitted event on any road or public place
  - Obstructs any emergency vehicle or service, or utility service
  - Contravenes any traffic control sign or road rule
  - Is likely to cause any damage to any public or private property
  - Is not adequately lit to ensure public safety and safe access for filling and emptying purposes
- All skip bins **must be lit** by way of retro-reflective tape on all sides and corners of the bin. Flashing amber light may be used and must be placed on the outer edge (roadside) of the bin. Bins must not be left in an overloaded state. Bins must have the name of the bin owner or company, business address and their contact phone number prominently and permanently displayed on both side of the bin.
- Council is to be advised each time a bin is placed within the municipality by the accredited supplier, prior to bin being placed.
- The waste bin can remain in a public space for a period no greater than 7 days.
- A waste bin must be removed by the supplier upon request from an authorized officer of the Council.
- Should any damage to public land be caused by the waste or skip bin, Council may request the responsible person(s) to cover the cost of repairs needed
- Evidence of public liability insurance of a minimum of \$20 million must be submitted with Council providing principals' indemnity cover. This should include the Name of Insurer, Name of Policy Holder, Insurance Expiry date, Policy number and list Knox City Council as an interested party.

**Please tick:**

- ☐ I have read, understood, and agree to comply with the conditions above and to advise Council each time a Waste/Skip bin is placed on public lands within Knox.
- ☐ I agree to comply with the Code of Practice for the placement of waste bins on roadsides, published by Vic Roads, each time a Waste/Skip bin is placed on public land within the City of Knox.
- ☐ I understand that failure to comply with the conditions above and the Code of Practice may result in my accreditation being cancelled.
- ☐ I have included the permit fee of **\$500.00** and understand that this is an annual registration fee that must be paid each year to ensure my continued accreditation within the City of Knox. Each bin placement is subject to a **\$50.00** fee per bin.
- ☐ I have attached a copy of my public liability insurance as required, and understand that I am required to supply a current copy of this insurance each year to ensure my continued accreditation within the City of Knox.

NAME:

SIGNATURE:

POSITION:

DATE:

**Office Use Only**

**Cashier LC/LLGRPS (choose Prepayments)**

Date Issued:                /        /

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

**Privacy Notification**

The personal information requested is being collected by Council for purposes of applying for the above permit under Amenity Local Law 2020 and will be used solely by Council for that primary purpose or directly related purposes.