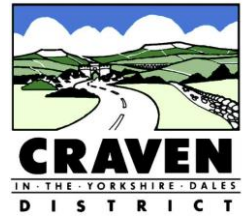


# CRAVEN DISTRICT COUNCIL

## APPLICATION FOR ASSISTED WHEELED BIN COLLECTIONS



### Applicants Details

Name .....

Address.....

.....

Post Code.....

Daytime Contact Telephone Number.....

### Please provide details of all permanent residents living at the property

Name 1 ..... Name 4 .....

Name 2 ..... Name 5 .....

Name 3 ..... Name 6 .....

*If you need more space, please continue on a separate piece of paper and attach it to this form.*

### Which bin(s) do you require assistance with?

Green bin (refuse)  Blue bin (recycling)   
(Non-recycling) (Paper, cardboard, glass, cans, plastic bottles, cartons)

Brown bin (garden)

### Reason for requesting assistance

.....  
.....  
.....  
.....

*If you need more space, please continue on a separate piece of paper and attach it to this form*

### If you require temporary assistance, how long do you require assistance for?

.....

**Is there any able bodied persons that live at the above address who are over 18 years of age and are capable of wheeling the bin to the collection point?**

Yes  No

**If No, do you have any neighbours, relatives or daily visitors to your property who may be able to place the bin at the collection point for you?**

Yes  No

**If Yes, please provide details:**

**If your application is approved, access will need to be made available on the day of collection. Are there any restrictions that may prevent collection such as locked gates, dogs loose in garden etc.**

Yes  No

**If Yes, please describe**.....  
.....

<b>Declaration</b>	
I certify that the information provided in this form is true and correct. I understand that any false information given will result in the cancellation of my request.	
I will notify Craven District Council Waste Management via telephone, email or in writing, should there be any change in my circumstances.	
Signed .....	Date .....

**Please return this application form to:**

**Craven District Council  
Waste Management  
1 Belle Vue Square  
Broughton Road  
Skipton  
North Yorkshire  
BD23 1FJ**

**Telephone: 01756 700600  
Fax: 01756 700658  
Email: [wastemanagement@cravencd.gov.uk](mailto:wastemanagement@cravencd.gov.uk)  
Website: [www.cravencd.gov.uk](http://www.cravencd.gov.uk)**

For office use only	ROUND NUMBER:
Date Received:     /     /	Green Bin..... Brown Bin.....
Eligibility: Accepted / Declined	Database updated: Yes / No
Authorised by .....	Date.....