



About this form

Use this form to terminate your Commercial Waste Service Agreement with Council.

Council Contact Details

Customer Service 1 Pope Street, Ryde NSW Post Locked Bag 2069, North Ryde NSW 1670 Email commercialwaste@ryde.nsw.gov.au Phone (02) 9952 8118

PART 1: CUSTOMER DETAILS

Debtor Number					
ABN					
Trading as					
Billing Address*					
Suburb*					Postcode*
Preferred contact	Mobile	Phone	Email		
Mobile				Fax	
Phone					
Email*					
Contact / forwarding	details foll	lowing terminat	ion of contra	act are: e.g. to forward invo	ice or credit notes
Title*	Mr I	Mrs Ms	Miss	Other	
Title* Given Name*	Mr I	Mrs Ms	Miss	Other Family Name*	
	Mr I	Mrs Ms	Miss		
Given Name*	Mr I	Mrs Ms	Miss		Postcode*
Given Name* Address* Suburb* Business Name	Mr I	Mrs Ms	Miss		Postcode*
Given Name* Address* Suburb* Business Name If applicable	Mr I	Mrs Ms	Miss		Postcode*
Given Name* Address* Suburb* Business Name	Mr I	Mrs Ms	Miss		Postcode*
Given Name* Address* Suburb* Business Name If applicable	Mr I	Mrs Ms	Miss		Postcode*
Given Name* Address* Suburb* Business Name If applicable Address*	Mr I	Mrs Ms Phone	Miss		
Given Name* Address* Suburb* Business Name If applicable Address* Suburb*					
Given Name* Address* Suburb* Business Name If applicable Address* Suburb* Preferred contact				Family Name*	

Please turn page over

Personal information collected from you is held and used by Council under the provisions of the *Privacy and Personal Information Protection Act* 1998. The supply of information is voluntary, however if you cannot provide, or do not wish to provide the information sought, Council may be unable to process your request. Please note that the exchange of information between the public and Council, may be accessed by others and could be made publicly available under the *Government Information Public Access Act* 2009 (GIPA Act). If you require further information please contact Council's Customer Service Centre on 9952 8222.

PART 2: LOCATION OF SERVICE ADDRESS

Business Name								
Service Address*								
Suburb* Bin(s) location if in different locatio e.g. laneway Comments	n,			Postcode*				
PART 3 : CURRENT SERVICE SCHEDULE								
Wasta Tuna	Din size (I)	No of hins	Service days	Bin serial numbers				
Waste Type	Bin size (L)	No. of bills	Service days	Imprinted on side of bin in white numbers				
Garbage:	660L							
	1100L							
Recycling / Paper and Cardboard:	240L							
	660L							
	1100L							
Garden Organics:	240L							
Date for changes to take effect:								
PART 4 : DECLA	RATION							
I agree to the termination of the above contract as detailed in Part 3. I understand termination will be within 4 weeks of notification. I understand the Security Payment will be refunded to me on termination of the account, subject to a satisfactory return of all bins and payment of any outstanding amounts.								
I understand that if the bins are not returned in a satisfactory condition I may be charged per clause 5e of the Terms & Conditions.								
Name*								
Signature* Date*								
Please us know why you are terminating this account:								
Closing busines	Closing business Moving address outside Ryde Moving address inside Ryde but no longer needed							
Another supplier providing service If yes, name of provider:								
Other								