

Blue Dot Service Application Form

A **Special Needs Waste Collection Service** - commonly known as a **Blue Dot Service** - is a special waste collection for people who are unable to move their bins (garbage, recycling and green waste) from their property to the kerbside to be emptied, and back to their property

To be eligible for a Blue Dot Service, a resident must take the following four steps:

1. **Complete Part A of the Application Form**, including a declaration that they have no other available people to perform this service (for example a family/friend/neighbour)
2. **General Medical Practitioner (Doctor) to complete Part B and supply a Dr. Certificate** certifying that they have a genuine medical need for the service. Please note: cost of this is borne by the Applicant
3. **Return the completed Application Form and Dr. Certificate** to Council, and
4. **The residents property must satisfy Council's Work Health and Safety requirements.** This will be determined by inspection of the property by a Council Officer.

PART 1: Applicant details

Name of Applicant :

Address of Property where Blue Dot service is required:

.....

Contact Number: (Home)..... (Mobile).....

Types of services required: (please tick)

Fortnightly garbage service

Fortnightly recycling service

Weekly green waste service

Name and contact number of Next of Kin/Friend/Neighbour

(This information is required by Council as a secondary contact person in circumstances where Council cannot contact the Applicant)

Name:..... Phone Number:.....

Relationship to Applicant:.....

Declaration (please tick):

I am unable to move my bins from my property to the kerbside, to be emptied, and put back
 There are no other people (for example: family/friends/neighbours) who can regularly put my bins out to be emptied

I will let Council know if my circumstance changes (eg. change address, assistance no longer required)

I accept the Terms and Conditions of the Blue Dot Service as stated below

Applicant's Signature:.....

PART 2: To be completed by the Applicant's Doctor

Name of Doctor:..... **Contact Number:**

Address:

Provider Number: **Dr's Signature:**

Dr. Certificate Attached (application can not be lodged without accompanying certificate)

Yes No
(please tick)

In your opinion the applicant is in genuine need of a Blue Dot Service:

Are you aware if the applicant has any family /friends/neighbours that could assist:

How long does the applicant require the service: 12months 2 years

NB: Cost of the examination is to be borne by the Applicant

Terms and Conditions of Blue Dot Service

1. Where the property is assessed by Council as presenting unacceptable Work Health and Safety risk to collection staff, the
2. Blue Dot Service applications are not transferrable and relate to the Applicant and the Applicant's property only.
3. The Applicant or next of kin/neighbour/friend must advise Council's CSC (ph: 4921 0333) if the Blue Dot Service is no longer
4. If the Applicant moves to another property then the Applicant must notify Council's CSC of the change of address to enable an
5. Council may place an identification tag (reflective tape or disc) on the Applicant's bin(s) to assist collection staff in identifying the
6. Blue Dot Service holders are asked to bag all garbage – not recyclables or green waste – where possible to assist Council's
7. The bin(s) must be visible from the front of the property. Council and contractors collection staff will not enter back yards,
8. The approved Blue Dot Service is valid for a maximum period of 2 years from the date of commencement of the service at the
9. For 12-month requirement the service will expire 12 months from the time of processing and a letter sent advising of cancellation.
10. Applications will not be processed without a Dr. Certificate.

Privacy and personal information protection notice

The *Privacy and Personal Information Act 1998* applies to personal information held, used and disclosed by Council. If you would like further information, please contact Council on 4921 0333. The information will be used by staff and the nominated institution for the purpose mentioned or a directly related purpose (to register or modify premises; to contact the business as needed; to provide or request information). The information is provided on a voluntary basis and you may apply to Council for access or amendment of the information at any time.

Return of form and Dr's Certificate

Please send completed Blue Dot Service Application and Dr Certificate to Council by:

- * Post: Lake Macquarie City Council, Box 1902 Hunter Region Mail Centre, NSW 2310;
- * Email: council@lakemac.nsw.gov.au

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