WASTE SERVICES

Application Form to Request an Assisted Collection

Waste Services provide an assisted collection for residents that are elderly; have a medical condition or a disability and/or are unable to present their waste and recycling containers to the designated collection point.

Applications will be considered where there is no one in the property to assist with the collection.

Crews will collect, and return the container based on a risk assessment carried out for each property. If your application is successful you shall be informed of your responsibility for maintaining access for the crews to the collection point.

Clackmannanshire Council shall review assisted collections at least every 2 years to monitor whether the service is still required or not.

If you require an assisted collection, please complete the form below and return it to Waste Services. In certain circumstances a visit from an officer may be required.

Title Mr; Mrs; Miss; Ms; Other_________________________________________(delete as appropriate)
Forename __________________________ Surname __________________________
Address _______________________________________________________________
Postcode __________________________
Date of Birth ________________________ Phone No _________________________
Email ________________________________________________________________
If you wish to receive your response by email, please tick [ ]

Please state the reason you require an assisted collection:

____________________________________________________________________________________

Please select which containers you have:

☐ Green Bin ☐ Blue Bin ☐ Brown Bin ☐ Food Caddy ☐ Blue Box

Currently, where are the containers stored?

☐ Front Garden ☐ Rear Garden ☐ Side of property

Are there any restrictions that may cause access issues (i.e. locked gate)

☐ Yes ☐ No

If Yes; please advise

____________________________________________________________________________________

Please return to: Waste Services, Kelliebank Depot, Riverbank Industrial Estate, Alloa, FK10 1NT or Speirs Centre, Primrose Place, Alloa, FK10 1AD

PTO
Are there any steps between your property and presentation point that the bin requires to go up/down?

☐ Yes  ☐ No

If Yes; how many?

Please list the names of people that permanently live in your home with you, their date of birth and relationship to you.

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<th>Name</th>
<th>Date of Birth</th>
<th>Relationship</th>
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**Telephone numbers and e-mail address**

Please provide a telephone number and/or e-mail address in case we need to contact you about your application.

You do not need to give us this information but it will help us contact you quickly if we have a question about your application.

**How we will use your personal information**

Your personal information will be used to determine entitlement to an Assisted Collection and will only be held by us for as long as this service is requested by you.

We may share your information with other sections of the Council in order to prevent fraud or protect public funds.

**Your declaration**

I understand that you will use the information I have provided to process my request for an Assisted Collection.

You may check the information with other sources within Clackmannanshire Council, in order to:

- Make sure the information is accurate;
- Protect public funds and prevent fraud

I declare that the information I have given on this form is correct and complete, and that if this found not to be the case my entitlement to an Assisted Collection may be withdrawn. I will inform the Council immediately of any changes to my circumstances that may affect my entitlement.

Signature ___________________________________________________  Date _____________________

Please return to: Waste Services, Kelliebank Depot, Riverbank Industrial Estate, Alloa, FK10 1NT or Speirs Centre, Primrose Place, Alloa, FK10 1AD