

## **Goulburn Mulwaree Council**

## Application for Clean Fill Disposal

184-194 Bourke Street, Goulburn NSW 2580

☐ Locked Bag 22, Goulburn NSW 2580

☐ (02) 4823 4444

☐ Council@goulburn.nsw.gov.au

| Details of Applicant  |  |  |
|---|--|--|
| Applicant Name:   |  |  |
|   |  |  |
| Business Name:  |  |  |
|   |  |  |
| Postal Address:   |  |  |
|   |  |  |
| Contact Number: Email:  |  |  |
| Clean Fill Source Address:  |  |  |
| Clean I III Source Address.   |  |  |
| Expected Quantity (tonnes):   | Clean Fill Type/s (to  | p soil, clay or gravel):               |
|   |  | · · · · · · · · · · · · · · · · · · ·  |
| Details of Transporter  |  |  |
| Business Name:  |  |  |
|   |  |  |
| Mailing Address:  |  |  |
|   |  |  |
| Contact Name:   | Contact Number:  |  |
| Designation of Terror of Visite 6   |  |  |
| Registration of Transport Vehicle/s:  |  |  |
| Conditions of Service   |  |  |
|   | op soil, clay and gravel and must be tra                         | nsported separately.                   |
|   | d to grass/lawn, trees and bushes mus                            |  |
| All contaminants including but not lim  | ited to concrete, bricks and building ma                         | aterials must be removed before the    |
| clean fill will be accepted.  | stos or any other hazardous substance                            | will not be acconted                   |
|   | provide test results showing that the c                          | •                                      |
| any hazardous substances before it v  |  |  |
| <ul> <li>If the Clean Fill Disposal Application if<br/>five (5) working days notice before the</li> </ul> | s approved the clean fill generators will ev can begin disposal. | Il be required to provide Council with |
| • The disposal fee for clean fill is \$11.0   | 0/tonne (2022/23). Council may appro-                            | ve for the clean fill to be accepted   |
|   | contamination. Please note that by sign                          |  |
| comply with the terms and conditions  | outlined above and that all of the deta                          | ils supplied are correct.              |
| Applicant Name:   | Signature:   | Date:                                  |
|   | 2: .   |  |
| Transporter Name:   | Signature:   | Date:                                  |



## **Goulburn Mulwaree Council**

Application for Clean Fill Disposal

| Office Use Only          |                       |                 |
|--------------------------|-----------------------|-----------------|
| Test Results Provided:   | Application Approved: | Date:           |
|                          |                       |                 |
| Gatehouse Operator Name: | Initials:             | Receipt Number: |
|                          |                       |                 |

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