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FEBRUARY 2024

WARRAWONG COMMUNITY HEALTH CENTRE

WASTE MANAGEMENT PLAN



Question today *Imagine tomorrow* Create for the future

Warrawong Community Health Centre Waste Management Plan

WSP

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REV	DATE	DETAILS
A	03/11/2023	Draft Waste Management Plan
B	22/11/2023	Draft Waste Management Plan
C	28/11/2023	Waste Management Plan
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	NAME	DATE	SIGNATURE
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1 INTRODUCTION

NSW Health Infrastructure (HI) is redeveloping the north-eastern corner of the Port Kembla Hospital site by demolishing some existing buildings and constructing a Community Health Centre for Warrawong. The project scope for the Warrawong Community Health Centre includes:

- Demolition of existing Building D, Building E, and Building H, along with nearby retaining walls, gazebos and pathways.
- Construction of a new building (part single storey and part two storey) with a gross floor area of around 2,000 m², providing the following services:
 - Services currently hospital based which are more appropriately, conveniently, and effectively delivered within a community health setting.
 - Child and Family services including Port Kembla Hospital Child Development Service, Illawarra Early Childhood Nurses, Domestic Family Violence and Sexual Assault Services and Binji & Boori Child & Family Illawarra Aboriginal Services.
 - Ambulatory and Primary Health Care services including facilities offering Chronic Disease Prevention and Rehab Services such as the Aunty Jeans Program and Healthy Hearts program.
 - District Wide Sexual Health Service.
 - Drug and Alcohol Services, based in the community including Drug & Alcohol Needle & Syringe Program (First Step), Opioid Treatment Program (Bungora OTP) and Counselling & Withdrawal Management.
 - Community based Mental Health services.
 - Allied Health (including Brain Injury Service).
 - Maternity services.
- Alterations and additions to carparking and access, including expand the south carpark.
- Ancillary infrastructure and works, including service connections, landscaping, and signage.

The following Waste Management Plan (WMP) has been prepared for the proposed new development of Warrawong Community Health Centre at 91 Cowper Street, Warrawong, New South Wales.

This WMP has been prepared in accordance with best practice waste management methodology and technologies commonly available in Australia. The waste generation rates provided within have been prepared based on the NSW Environmental Protection Agency (EPA) and case study waste generation data held by WSP.

1.1 LAND USE

Client:	Savills Australia
Land Use Type:	Commercial (Community Health Centre)
Number of Levels:	2 storeys

Table 1 Development Summary

Development Use	Quantity / Area
Consult room	225 m ²
Interview room	89 m ²
Therapy room	47 m ²
Audiology testing room	20 m ²
Procedure room	20 m ²
Meeting room	106 m ²
Offices	248 m ²
Staff room	36 m ²

1.2 DEFINITIONS

Within this report, two categories are established to describe waste systems:

Common waste is considered in this report to be waste generated through the ongoing operation of the site, which does not have specific disposal requirements under the *AS3816: 1998 Management of clinical and related wastes*. These streams include general waste, commingled recycling, paper/cardboard, organics (food waste) and secure paper.

Clinical & related wastes (referred to as “clinical waste” throughout) are considered in this report to be waste which is regulated under the *AS3816: 1998 Management of clinical and related wastes*. In the context of this report, this waste includes clinical waste, sharps and pharmaceutical substances.

1.3 GUIDANCE DOCUMENTS

WSP has taken the following guidelines into consideration when developing this WMP:

- Australasian Health Facility Guidelines, Part B 0700, August 2022
- NSW Government Protection of the Environment Operations (Waste) Regulation 2014
- AS3816:1998 Management of clinical and related wastes

2 COMMON WASTE MANAGEMENT PLAN

The following section provides an analysis of **common waste** systems proposed for the Warrawong Community Health Centre. Refer to section 1.2 for the definition of **common waste** streams. **Clinical & related waste** will be covered in Section 3.

2.1 WASTE GENERATION

Weekly waste generation rates relating to **common waste** streams are shown in Table 2. Calculations are based on a 5 day per week operation for all uses. A weekly waste generation assessment for the development is shown in Table 3.

Table 2 Common Waste Generation Rates

Use	Waste Generation Rate (L/100m ² /day)			
	General waste	Recycling	Cardboard	Organics
Consult Room	45	18	57	5
Interview room	45	18	57	5
Therapy room	45	18	57	5
Audiology Testing Room	45	18	57	5
Procedure Room	45	18	57	5
Meeting room	45	18	57	5
Office	45	18	57	5
Staff room	45	18	57	5

Note that the above is based on estimated waste generation rates. Bin quantities and collection frequencies may be modified once the health centre becomes operational.

Table 3 Common Waste Generation Assessment

Use	Area	Waste Generation Assessment (L/week)			
		General waste	Recycling	Cardboard	Organics
Consult Room	225 m ²	101	40	129	11
Interview room	89 m ²	40	16	51	4
Therapy room	47 m ²	21	8	27	2
Audiology Testing Room	20 m ²	9	4	11	1
Procedure Room	20 m ²	9	4	11	1
Meeting room	106 m ²	48	19	61	5
Office	248 m ²	112	44	142	12
Staff room	36 m ²	16	6	21	2
TOTAL		356	141	453	38

2.2 COMMON WASTE SYSTEMS

Waste shall be sorted on-site by staff and/or cleaners as appropriate into the following streams:

- General Waste
- Commingled Recycling
- Cardboard
- Food Organics
- Extended Waste Streams such as:
 - Hard Waste
 - E-waste (Electronic Waste)
 - Secure Paper

See Section 3 for clinical waste volumes and systems.

2.2.1 DISPOSAL FACILITIES

Throughout the health centre, it will be ensured that it is as easy to dispose of recyclable waste as it is general waste. This will be achieved by ensuring the development is appropriately furnished with bin stations throughout the health centre. The bin stations are to be clearly signed such that waste stream separation is easily identifiable and the correct use of the bins is upheld.

The use of bin stations in Figure 1 within communal areas and/or disposal rooms throughout the health centre is highly recommended to encourage separation of recyclables. This system incorporates the provision of multiple bins for different waste streams at central locations and common areas for ease of disposal. This system is beneficial as users are required to make a conscious decision as to which bin they place their items in. This typically results in an increase in diversion from landfill. The use of bin stations also reduces the number of locations cleaners are required to service throughout the development.

Figure 1 Example Bin Station Application



Internal Fit out Examples



Public Place Fit out Example

2.2.2 GENERAL WASTE, COMMINGLED RECYCLING & CARDBOARD

All general waste, commingled recycling and cardboard waste generated throughout the health centre and within the disposal facilities will be transferred to the disposal room and disposed of within the respective 240L bins.

General waste is to be disposed of bagged. Commingled recycling and cardboard are to be disposed of loosely within the provided 240L bins. All plastic liners/bags are to be disposed of within the general waste bins provided. Large cardboard items are to be broken down and flattened prior to disposal.

2.2.3 FOOD ORGANICS

If implemented, each space in the health centre that is expected to generate food organic waste shall have provisions for a kitchen caddy or small tubs (approx. 20L capacity) for the separation and temporary holding of food organic waste.

Kitchen caddies or tubs can be lined with biodegradable bags (i.e., corn-starch bags) or paper (i.e., newspaper) if desired.

Cleaners or staff will manually empty food organics waste from caddy/tubs into the appropriate 120 litre food organics bin provided within the disposal room.

Figure 2 Small Organics Bins



20L Organics Tubs



23L Organics Caddy/Bin



7L Maze Kitchen Caddy

2.2.4 EXTENDED WASTE STREAMS

Table 4 below outlines the typical systems for the extended waste streams. Due to the requirement for a suitable volume of each waste to be generated prior to collection, all extended streams will be collected on an as-needed basis by a private collection contractor.

Table 4 Extended Waste Streams Equipment and Storage

Use	Storage Method	Area / Equipment Provided
Hard Waste	The dedicated 3m ² space within the waste enclosure will be for the storage of hard waste and electronic waste. Separate bins or containers may be provided within the area for the collection of smaller items such as mobile phones, keyboards, and small appliances as deemed appropriate by building management. Hard waste and e-waste will be collected as separate streams by a private collection contractor on an as-needed basis.	3m ² area within waste enclosure
Electronic Waste		
Secure Paper	Secure paper stored internally within the office floorplates and swapped in place by the service contractor as needed. No permanent secure paper storage within the waste enclosure.	240L bin within admin areas / copy rooms
Garden Organics	Any landscaped areas will be maintained via a private contractor who will be responsible for removing (and subsequently disposing of) any garden waste from the site. No permanent garden waste storage is provided onsite.	nil
Chemical / Hazardous	Chemical and hazardous waste will be managed, stored, and collected in accordance with appropriate standards. Storage areas will only be accessible by authorised personnel.	nil
Polystyrene	Generally stored within large plastic bags within back of house areas. Waste is brought to the collection point for collection as required - no permanent storage within the main waste store.	nil
PVC	Generally stored in a 240L bin in the common waste storage areas (e.g., dirty utility rooms), volumes are managed in a similar manner to the other recycling bins.	nil

3 CLINICAL WASTE MANAGEMENT PLAN

The following section provides a general overview of the proposed **clinical & related waste** management to occur within the Warrawong Community Health Centre. In no way is the detail of this section to supersede any regulatory or safety requirements. The ultimate management of the clinical waste and adoption of the procedure will be subject to the occupant's specific requirements. **Common waste** is covered in Section 2, and refer to section 1.2 for the definitions.

3.1 WASTE GENERATION

Weekly waste generation rates relating to **clinical waste** streams are shown in Table 5. Calculations are based on a 5 day per week operation for all uses. A weekly waste generation assessment for the development is shown in Table 6. It is anticipated that the below uses will generate clinical waste on a regular basis.

Table 5 Clinical Waste Generation Rates

Use	Clinical Waste Generation Rate (L/100m ² /day)
Consult Room	45
Therapy room	45
Audiology Testing Room	45
Procedure Room	45

Note that the above is based on estimated waste generation rates. Bin quantities and collection frequencies may be modified once the health centre becomes operational.

Table 6 Clinical Waste Generation Assessment

Use	Area	Clinical Waste Generation Assessment (L/week)
Consult Room	225 m ²	101
Therapy room	47 m ²	21
Audiology Testing Room	20 m ²	9
Procedure Room	20 m ²	9
TOTAL		140

3.2 WASTE SYSTEMS

Clinical waste shall be sorted on-site by users as appropriate into the following streams:

- Clinical Waste
- Needle and Syringe Program
- Pharmaceutical Waste
- Additional Streams such as:
 - Cytotoxic
 - Metal Instruments
 - Anatomical Waste
 - Laparoscopic Waste
 - PVC (IV fluid bags, oxygen tubing and oxygen masks)

3.2.1 CLINICAL WASTE

The disposal room shall have provision for a plastic lined 240L clinical waste bin for the disposal of clinical waste. Staff or cleaners will transfer waste from the rooms to the disposal room to discard of all clinical and related wastes. It is expected that single-use sharps disposal units within the Warrawong Community Health Centre will be disposed of into the clinical waste stream.

Staff will dispose of clinical sharp waste within disposable sharps containers and discard the sharps containers within the clinical waste stream. There is an opportunity for sharps waste to become a separate waste stream with its own dedicated bins that can also be reused. This opportunity has not been explored within this report.

3.2.2 NEEDLE AND SYRINGE PROGRAM

It is understood that the health centre is considered a primary needle and syringe outlet which will distribute and recover needles and syringes. It is anticipated that the health centre will install a sharps dispensary and disposal unit outside of the facility for the public to access. The dispensary and disposal bins will be serviced separately by a collection contractor.



Example Syringe/Sharps Dispenser and Disposal Unit

3.2.3 PHARMACEUTICAL WASTE

It is understood that the health centre is expected to store a suitable pharmacy impress and install a vaccination fridge. It is anticipated that pharmaceutical waste will be generated in **small quantities** at the health centre.

The disposal of pharmaceutical waste shall be within the 240L bin in the disposal room. Expired medicine that is held on-site shall be transferred to the pharmaceutical bins for disposal. A private collection contractor will be responsible for the collection of pharmaceutical bins.

3.2.4 ADDITIONAL STREAMS

Further waste disposal provisions for additional clinical streams will be allowed throughout health centre spaces as required. Additional clinical streams may include:

- Cytotoxic
- Metal Instruments
- Anatomical Waste
- Laparoscopic Waste
- PVC (IV fluid bags, oxygen tubing and oxygen masks)

Additional clinical streams, as listed above, are often managed through smaller specialised containers, which may be stacked upon shelving for ease of storage.

The extent of additional clinical waste stream separation will be subject to the site's management operations.

All clinical waste will be collected by an authorised collection contractor. Typically, collection contractors will collect and exchange clinical waste bins directly from the clinical waste storage areas as per common practice.

4 WASTE EQUIPMENT & COLLECTION

4.1 BIN QUANTITY, SIZE & COLLECTION FREQUENCY

Table 7 and Table 8 contain information regarding common waste bin quantity, size and frequency of collection for the subject development.

Table 7 Common Waste: Bin Information and Capacity

Stream	Equipment	Collections per Week	Weekly Capacity	Weekly Volume
General waste	2x 240L Bins	1	480 L	356 L
Commingled Recycling	1x 240L Bin	1	240 L	141 L
Cardboard	2x 240L Bins	1	480 L	453 L
Food Organics	1x 120L Bin	1	120 L	38 L
Clinical Waste	1x 240L Bin	1	240 L	140 L
Pharmaceutical Waste	1x 240L Bin	1	Refer to Section 3.2.3	

Table 8 Typical Equipment Dimensions

Equipment	Width	Depth	Height
240L Bins	585	730	1,060
120L Bins	480	545	930

4.2 WASTE STORAGE AREA & LOCATION

Table 9 demonstrates the cumulative area requirements (excluding circulation) and provision of waste storage areas for the proposed development. Please refer to the scaled waste room drawing shown in Appendix A demonstrates the waste storage layout.

Table 9 Common Waste Storage Area Requirements

Area / Location	Stream	Waste Equipment	Area Required (without circulation)	Total Area Required (included circulation)	Area Provided
Disposal Room	General Waste	2x 240L Bins	0.86 m ²	6.54 m ²	10.07 m ²
	Commingled Recycling	1x 240L Bin	0.43 m ²		
	Cardboard	2x 240L Bins	0.86 m ²		
	Food Organics	1x 120L Bin	0.26 m ²		
	Clinical Waste	1x 240L Bin	0.26 m ²		
	Pharmaceutical Waste	1x 240L Bin	0.26 m ²		

Area / Location	Stream	Waste Equipment	Area Required (without circulation)	Total Area Required (included circulation)	Area Provided
Bin Enclosure	Hard Waste & E-Waste	3.00 m ²	3.00 m ²	9.54 m ²	10.00 m ²
	Temporary Bin Holding	7x 240L Bins 1x 120L Bin	3.27 m ²		
TOTAL			9.54 m²	9.54 m²	10.00 m²

It should be noted that all **clinical & related waste** streams should be secured on site. This will require the disposal room and the bin enclosure to be lockable and only accessible to health centre staff.

4.3 WASTE COLLECTION METHODOLOGY

Common waste will be collected by a private collection contractor, as outlined in Table 10.

Table 10 Common Waste Collection Summary

Waste Stream	Equipment	Collection Frequency	Collection Vehicle Size and Type	Collection Operator
General Waste	2x 240L Bins	1 x per week	MRV (Rear-lift)	Private Contractor
Commingled Recycling	1x 240L Bin	1 x per week	MRV (Rear-lift)	Private Contractor
Cardboard	2x 240L Bins	1 x per week	MRV (Rear-lift)	Private Contractor
Food Organics	1x 120L Bins	1 x per week	MRV (Rear-lift)	Private Contractor
Clinical Waste	1x 240L Bin	1 x per week	MRV (Flat bed)	Private Contractor
Pharmaceutical Waste	1x 240L Bin	1 x per week	MRV (Flat bed)	Private Contractor

Collection vehicles will enter and exit the site in a forward direction via Fairfax Avenue (refer to Appendix B for swept path diagrams).

On collection days, staff will transfer the appropriate bins for collection from the disposal room to the waste enclosure. An MRV vehicle will enter the site and park at the collection point. The contractor will collect bins directly from the waste enclosure and return them once emptied. Empty bins will then be returned to the disposal room for use.

Clinical & related waste streams will typically have full bins collected and replaced with empty bins. It should be noted that clinical & related waste stream collections shall occur at-grade, and so clinical & related waste collection vehicles should be installed with a tail gate lift for bin loading operations.

Bins will not be stored outside the title boundary or presented to the kerb for collection at any time. Building management will ensure sufficient access is provided for collection vehicle operators during collection times.

5 STANDARDS & COMPLIANCE

5.1 BIN COLOUR AND SUPPLIER

All bins will be provided by private suppliers. The below bin colours are specified by Australian Standard AS4123.7 2006, however, due to the private nature of the collection services, these are only recommendations and are not mandatory:

- General waste bins shall have red lids with dark green or black body.
- Commingled Recycling bins shall have yellow lids with dark green or black body.
- Cardboard bins shall have blue lids with blue body.
- Organics bins shall have burgundy lids with dark green or black body.
- Secure Paper Bins shall have blue lids and blue body.
- Clinical waste bins shall have yellow lids with yellow body and with the black biological hazard symbol (refer to Section 5.2.2).
- Pharmaceutical bins shall have red lids with red body and with a black pill symbol (refer Section 5.2.2).

NOTE: Private collection contractors often provide their own bins for collection.

5.2 WASTE STREAM SIGNAGE

5.2.1 COMMON WASTE STREAM SIGNAGE

Waste storage areas, bins and equipment are to be clearly marked and signed with industry standard signage or equivalent, such as that illustrated below.

At a minimum, waste stream signage should:

- Utilise Australian standard colours for waste streams (AS4123.7 2006).
- Include examples of accepted vs. not accepted material contents.
- Utilise a combination of universally accepted words, terms and images.

Building users/occupants will be instructed by building management to adhere to these requirements.

Figure 3 Waste Stream Signage



5.2.2 CLINICAL & RELATED WASTE STREAM SIGNAGE

Clinical & related waste storage areas and bins are to be clearly marked and signed with the industry standard signage (and corresponding symbols) such as that illustrated below.

Users will be instructed by building management to adhere to these requirements.

Figure 4 Clinical & Related Waste Signage



5.2.3 VENTILATION

Ventilation will be provided in accordance with Australian Standard AS1668.

5.2.4 WASHING AND VERMIN PROTECTION

A third-party bin washing service will be engaged to perform bin washing service on a regular basis. Bin washing suppliers must retain all wastewater within their washing apparatus and not impact the drainage provisions of the site.

5.2.5 NOISE REDUCTION

All waste areas shall meet BCA and AS2107 acoustic requirements as appropriate, with operational hours and collection times assigned to minimise the acoustic impact on surrounding premises.

5.3 HIGH LEVEL PURCHASING SCHEDULE

Table 11 lists the waste equipment required for the development under the conditions proposed within this report.

Table 11 Equipment Supply Schedule

Item	Qty.	Lid Colour	Body Colour	Supplier**
240L General Waste Bins	2	Red	Dark Green / Black	Private Supplier (Sulo or equivalent)
240L Commingled Recycling Bins	1	Yellow	Dark Green / Black	Private Supplier (Sulo or equivalent)
240L Cardboard Bins	2	Blue	Blue	Private Supplier (Sulo or equivalent)
120L Organics Bins	1	Burgundy	Dark Green / Black	Private Supplier (Sulo or equivalent)
240L Clinical Bins	1	Yellow	Yellow	Private Supplier (Daniels Health or equivalent)
240L Pharmaceutical Bins	1	Red	Red	Private Supplier (Daniels Health or equivalent)

* Services requirements are indicative only and must be confirmed with the manufacturer prior to the commencement of construction.
** Private waste collection contractors often supply their own bins for collection.

5.4 SUPPLIER CONTACT INFORMATION

A complimentary listing of contractors and equipment suppliers is provided in Table 12 below for your reference. You are not obligated to procure goods/services from these companies. This is not, nor is it intended to be, a complete list of available suppliers. WSP does not warrant (or make representations for) the goods/services provided by these suppliers.

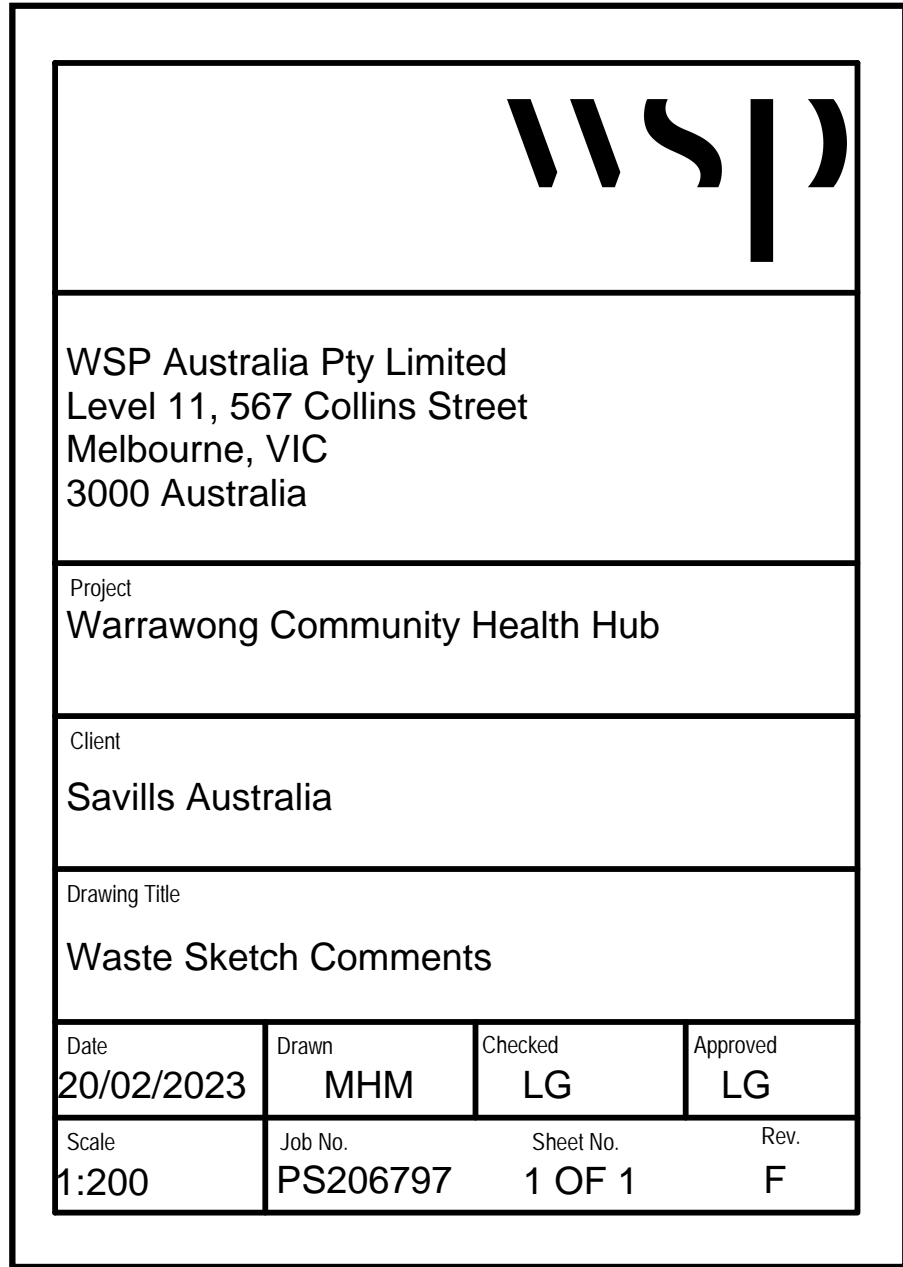
Table 12 Supplier Contact List

Service Type	Contractor / Supplier Name	Phone	Website
Private Waste Collectors	Citywide Service Solutions	(03) 9261 5000	www.citywide.com.au
	SUEZ Environment	13 13 35	www.sita.com.au
	Cleanaway	13 13 39	www.cleanaway.com.au
	Veolia	132 955	www.veolia.com
	Cleanaway Daniels (Clinical waste collection)	1300 667 787	www.danielshealth.com.au/
Equipment Suppliers	Sulo Australia (Bins)	1300 364 388	www.sulo.com.au
	Cleanaway Daniels (Clinical waste bins)	1300 667 787	www.danielshealth.com.au/
Bin Washing Services	The Bin Butlers	1300 788 123	www.thebinbutlers.com.au
	Kerbside Clean-A-Bin	(03) 9830 7381	www.kerbsidecleanabin-srp.com.au
	Calcorp Services	1800 225 267	www.calcorpservices.com.au
	WBCM Environmental Australia	1300 800 621	www.wbcm-aust.com.au
E-waste Collection Services	TechCollect	1300 229 837	www.techcollect.com.au
	Mobile Muster (Mobile Phones)	1800 249 113	www.mobilemuster.com.au
	ToxFree (Secure E-waste Destruction)	1300 869 373	www.toxfree.com.au

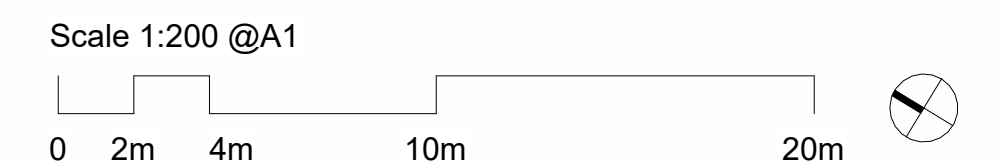
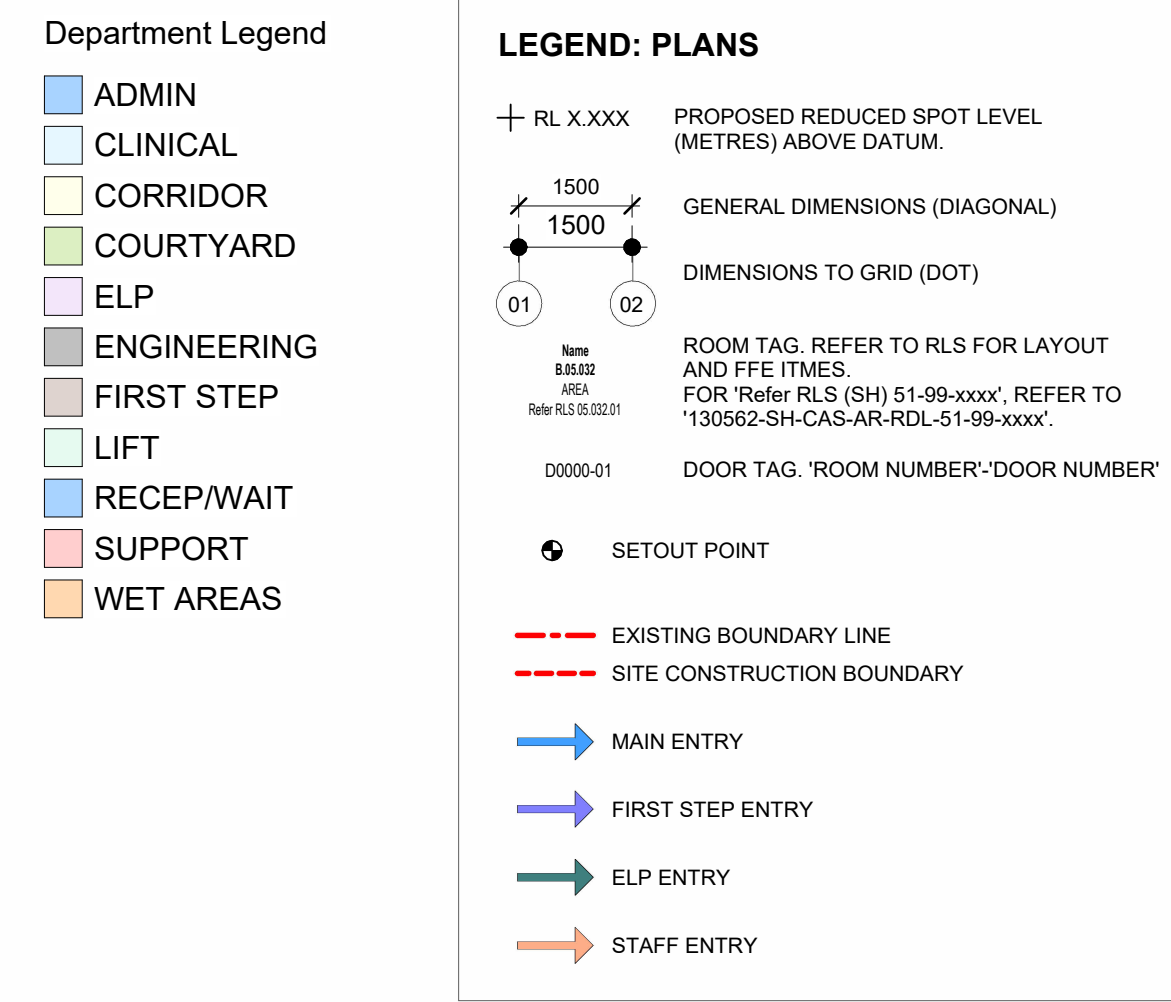
APPENDIX A

SCALED WASTE ROOM DRAWINGS





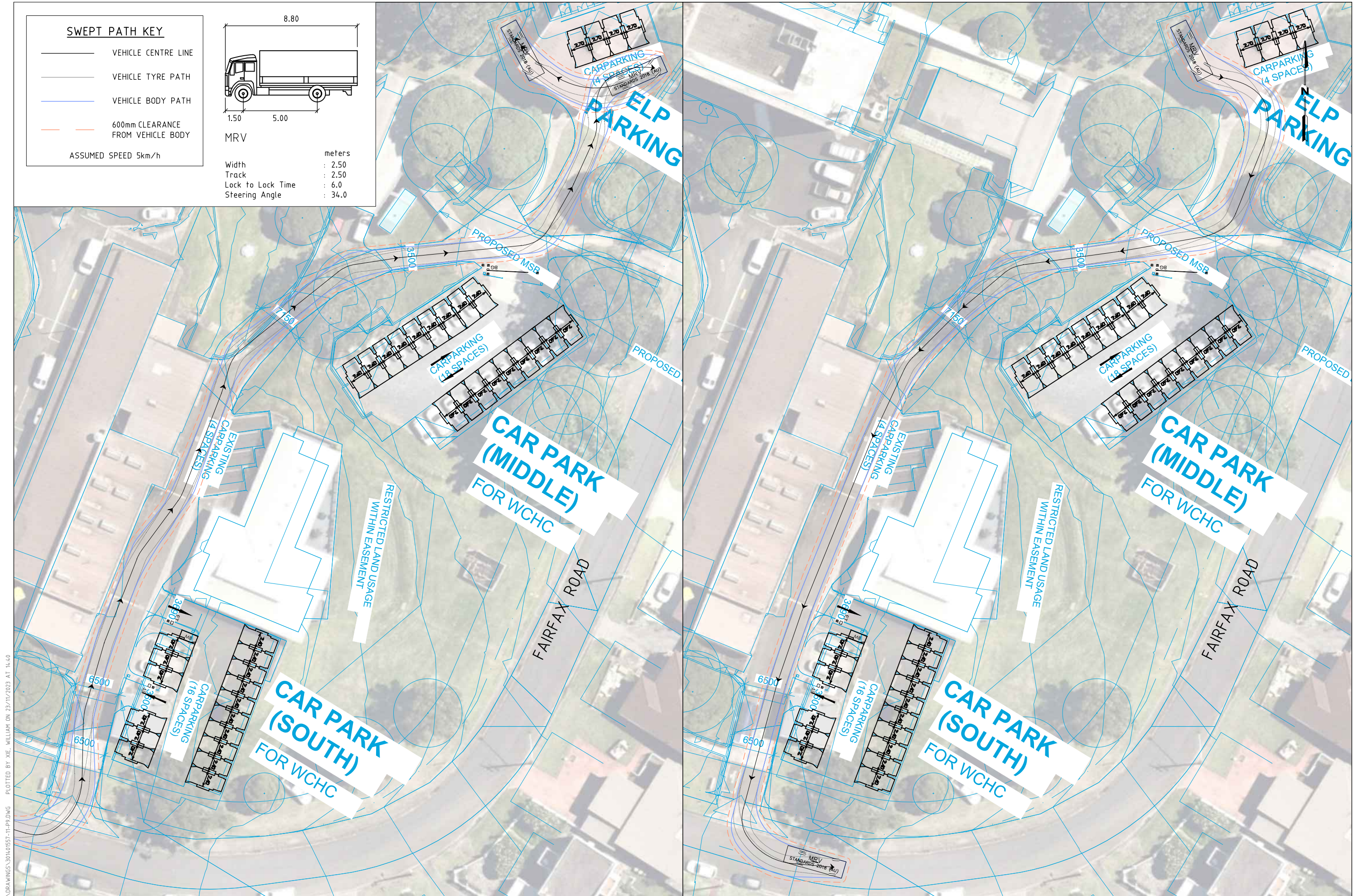
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APPENDIX B

COLLECTION VEHICLE SWEPT PATHS





SWEPT PATH KEY

- VEHICLE CENTRE LINE
- VEHICLE TYRE PATH
- VEHICLE BODY PATH
- 600mm CLEARANCE FROM VEHICLE BODY

ASSUMED SPEED 5km/h

MRV

Width : 2.50
Track : 2.50
Lock to Lock Time : 6.0
Steering Angle : 34.0

8.80
1.50
5.00

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PRELIMINARY PLAN
FOR DISCUSSION PURPOSES ONLY
SUBJECT TO CHANGE WITHOUT
NOTIFICATION

WARNING
BEWARE OF UNDERGROUND SERVICES
THE LOCATIONS OF UNDERGROUND SERVICES ARE
APPROXIMATE ONLY AND THEIR EXACT POSITION
SHOULD BE PROVEN ON SITE. NO GUARANTEE IS
GIVEN THAT ALL EXISTING SERVICES ARE SHOWN.

DESIGNED
W.XIE

APPROVED BY
B.MAYNARD

DESIGN CHECK
B.MAYNARD

DATE ISSUED
23 NOVEMBER 2023

SCALE
A3 0 2.5 5 10 1:500

CAD FILE NO.
301401557-11-P9.DWG

WARRAWONG COMMUNITY HEALTH CENTRE

REF - FAIRFAX ROAD ACCESS
VEHICLE SWEEP PATH ASSESSMENT

DRAWING NO. 301401557-11-04 SHEET 04 OF 06 ISSUE P9