



<b>Site Address:</b>				
<b>Section 1:</b> Estimated Amount of Excavation Material (m <sup>3</sup> ):	<input type="checkbox"/>	Re-use on-site		
	<input type="checkbox"/>	Re-use off site (go to section 2)		
	<input type="checkbox"/>	Landfill Disposal (go to section 3)		
<b>Section 2:</b> Address if re-used off site:				
<b>Section 3:</b> Name and Address of licensed landfill:				
<b>Section 4:</b> Estimated Construction Material Waste				
Type of Material:	Estimated Amount (m <sup>3</sup> ):	How will you manage this waste?		
		Re-use on-site	Recycle Offsite	Landfill
Bricks		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concrete		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tiles		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timber (clean)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timber (treated)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plasterboard		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Green Waste		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Off-Site Recycling Facilities</b>		<b>Licensed Landfill Site/s</b>		
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**Waste Management Plan - Part Three (Ongoing Use)**

<b>Site Address:</b>		
<input type="checkbox"/> Residential Flat Building <input type="checkbox"/> Multi Dwelling Houses	<input type="checkbox"/> Boarding House <input type="checkbox"/> Other _____	<input type="checkbox"/> Shop Top Housing <input type="checkbox"/> Non Residential Development
<i>Please complete Sections 1-3</i>		<i>Please complete Sections 1-4</i>

**Section 1: Generation of Waste**

<b>RESIDENTIAL</b>						
Number of dwellings	Rubbish generation/week (120L/dwelling)	Allocated rubbish bin size (140L or 240L)	TOTAL number of rubbish bins allocated	Recycling generation/week (80L/dwelling)	Allocated recycling bin size (240L)	TOTAL number of recycling bins allocated
<b>COMMERCIAL</b> <i>(if applicable)</i>						
Premises Type	Rubbish generation/week <i>(Based on type of premises and m<sup>2</sup>, see Appendix 3)</i>	Size and number of rubbish bins	Collection frequency per week	Recycling generation/week <i>(Based on type of premises and m<sup>2</sup>, see Appendix 3)</i>	Size and number of recycling bins	Collection frequency per week

**Section 2: Storage of Waste Bins**

1.	Is there sufficient space allocated within each dwelling for one day's waste and recycling?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2.	Is there a waste bin storage room/area provided?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	2a - What is the total area of bin storage provided?	
	2b - Is there sufficient space provided for the allocated rubbish and recycling bins plus handling? <i>(see clause 6.9.4.1 and 6.9.4.2 for requirements)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	2c - Has a minimum 4m <sup>2</sup> bulky waste storage area been allocated?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	2d - Have you submitted a detailed plan of the waste bin storage room/area, together with the nominated collection point and access pathway marked?	Yes <input type="checkbox"/> No <input type="checkbox"/>

3.	Are you using a compactor in the bin storage room? <span style="float: right;">If NO, proceed to question 4</span>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	3a – Please detail the type of system (carousel, lineal, optic sensors, number of bins, automatic bin exchange, size etc.)	
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	3b – What is the proposed compactor diameter?	
	3c – What is the ceiling height of the waste bin storage room room?	
	3d – What is the proposed compaction ratio? (Must NOT exceed 2:1)	
4.	Is there a garbage chute system installed? <span style="float: right;">If NO, proceed to Section 3</span>	Yes <input type="checkbox"/> No <input type="checkbox"/>
	4a – Is there a service room provided on each storey?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	4b – Is there sufficient space allocated for 2x 240L recycling bins in the service room(s)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	4c – How many storeys will the chute service?	

**Section 3: Collection of Waste**

1.	Is there a caretaker on-site responsible for managing waste?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	1a - Designate which body is responsible for cleaning of waste storage areas	
	1b - Designate which body is responsible for transfer of waste and recycling bins to and from the collection point (if applicable)	
2.	Are you proposing to use a waste bin presentation area for collection of waste?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3.	What is the maximum distance from the waste bin storage room/area to the street kerb?	
4.	Are you proposing for Council's collection contractor to enter the site to collect the bins? (see clause 6.9.4.3)	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Section 4: Shop Top Housing and Non-Residential Development**

1.	Has a separate waste bin storage room/area been provided for commercial/retail tenancies?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	1a - Does the waste bin storage room/area have sufficient space allocated for storage of estimated bins? (as per Section 1)	Yes <input type="checkbox"/> No <input type="checkbox"/>
	1b - Is the waste bin storage room/area size and layout flexible to allow for future changes in use?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	1c - Have you provided the necessary requirements for storage and collection of specific wastes types (i.e food, medical, hazardous etc.)	Yes <input type="checkbox"/> No <input type="checkbox"/>

2.	Has sufficient space close to retail/commercial premises been allocated for storage of re-usable commercial items such as crates, pallets, kegs etc?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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