**WASTE ASSESSMENT APPLICATION FORM**

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| **NAME:**  | **Mr /Mrs /Miss/Ms** |  |
| **ADDRESS:** |  |
| **TELEPHONE NUMBER:** |  |
| **MOBILE NUMBER:** |  |
| **EMAIL ADDRESS:** |  |

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| --- |
| 1. **Reason for a Waste Audit (please tick)**
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|[ ]  Household consists of 6 or more occupants **registered** at the property |
|[ ]  Household includes 2 or more children under the age of 3 in nappies |
|[ ]  Household includes one or more residents with special health needs (please provide more details in the Additional Comments section on the next page) |

1. **List of occupants permanently residing in the above address**

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| --- | --- | --- |
| **1.** | NAME: | DATE OF BIRTH: |
| **2.** | NAME: | DATE OF BIRTH: |
| **3.** | NAME: | DATE OF BIRTH: |
| **4.** | NAME: | DATE OF BIRTH: |
| **5.** | NAME: | DATE OF BIRTH: |
| **6.** | NAME: | DATE OF BIRTH: |
| **7.** | NAME: | DATE OF BIRTH: |
| **8.** | NAME: | DATE OF BIRTH: |

1. **Recycling -** To be considered for additional capacity you must be fully recycling.

You should have a minimum of 2 recycling boxes, 1 blue sack, 1 large food caddy and 1 small food caddy.

Are you currently recycling fully by using a:

Green recycling box? YES / NO Blue sack for cardboard? YES / NO Food caddy? YES / NO

(if ‘**NO**’ to any of the above, please explain why in the **Additional Comments** section on the next page)

How many green boxes do you have?

How many blue sacks do you have?

How many small food caddies do you have?

How many large food caddies do you have?

Please provide photographic evidence by attaching a photo of the recycling you present on your most recent collection day (with lids removed so the recycling can clearly be seen). If you do not have the minimum amount of recycling containers or photographic evidence is not supplied with your application, it will be declined.

You can order recycling containers online. Please visit [www.gloucester.gov.uk/additionalwaste](http://www.gloucester.gov.uk/additionalwaste) to request new, additional or replacement recycling boxes, lids, sacks, or food caddies.

**Note: the provision of additional capacity is based on the fact that the household can demonstrate that it is making full use of the recycling facilities on offer. You must continue to comply with the Refuse Collection Policy i.e., closed lid and no side waste, until your application has been processed. You will then be advised accordingly of the outcome.**

1. **Further Information**

How many **additional** black sacks of refuse do you produce for each **fortnightly** collection in addition to what is in your bin?

Does at least one person in the household have access to a car? YES / NO

Do you have a landlord? YES / NO Contact Details:

**Additional Comments**

|  |
| --- |
| Please provide any additional comments in support of your application which explains why the household produces more waste, or if there is any reason(s) why you are not using all the weekly recycling services:  |
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1. **Declaration**

**How we use your information:**Your information may be shared internally and with external partners who provide services on our behalf. We may share your information with other organisations where we need to verify the information provided by you or where allowed by law and for the purposes of prevention and detection of crime and/or fraud. We may contact you using the details you have provided. For further information about how we use your information, please visit [www.gloucester.gov.uk](http://www.gloucester.gov.uk)

[ ]  I have read and agree to the privacy notice

(please note if this box is not ticked it may take longer to process your application)

By signing this form, you are agreeing for the household to fully participate in the kerbside green box, blue sack, and food waste recycling service. You are also agreeing to random waste audits relating to the contents of your bin to ensure the household is fully recycling. The Council reserves the right to refuse or withdraw additional facilities where households are not fully recycling through the kerbside recycling services.

Signed: Date:

Print Name:

Please return the form either via email or post (this information can be found on top of page 1). If you are sending by post, please mark for the attention of City Improvement & Environment Team.