LANGEBERG
MUNISIPALITEIT MUNICIPALITY MASIPALA

ADMINISTRATIEWE EN UITVOERENDE KANTOOR
ADMINISTRATIVE AND EXECUTIVE OFFICE
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E admin@breeland.gov.za www.langeberg.gov.za

Verwysingsnr:
Referencenr: 16/5/1/1/3

Navrae:
Enquiries: **GM Slingers**

Geagte Mnr. / Me.

U word versoek om die aansoek te voltooi en aan die Munisipaliteit te voorsien. Epos asseblief getekende vorm na jdavids@langeberg.gov.za vir aandag **Mev. *Judith Davids***.

Dear Mr. / Ms.
You are requested to complete the application form and to return it to the Municipality. Please email the signed application form to jdavids@langeberg.gov.za *for attention* ***Ms. Judith Davids***.

VERVANGING VAN BESKADIGDE OF GESTEELDE DROM / REPLACEMENT OF DAMAGED OR STOLEN BIN

Adres: ……...Address

Erf No.: ……Erf Nr.

Dorp:……..Town

Rede:……Reason

A tariff will be charged to recover the cost of replacement (damaged / stolen) bins.

Number of 240L Wheelie Bins	

Maatskappy Naam:……*Company Name*

Munisipale Rekening No:……*Municipal Account Number*

Kontak persoon:……*Contact Person*

Kontaknommer:……*Contact Number*

E-pos: ……*E-mail*

……. **…….....**
Handtekening / Signature **Datum / Date**

Approved		Not approved	

COMMENTS……

MANAGER: SOLID WASTE MANAGEMENT

FOR OFFICE USE ONLY:

COST: ……..……

DATE: ……..…

ACCOUNT NUMBER:

……