

**APPLICATION FORM**  
**AUCKLAND COUNCIL WASTE MANAGEMENT AND MINIMISATION BYLAW 2019**  
**WASTE COLLECTOR AND TRANSPORTATION LICENCE**

*(Any enquiries please phone Auckland Council on 09 301 0101, or email Waste.Licensing@aucklandcouncil.govt.nz)*

**1. APPLICANT DETAILS**

**Company Name:** \_\_\_\_\_  
 Associated brand names \_\_\_\_\_  
 Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Postal Address: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
  
 Name of key contact \_\_\_\_\_  
 Telephone Number 24/7: \_\_\_\_\_  
  
 Principle of company (Name): \_\_\_\_\_ Phone \_\_\_\_\_

**2. APPLICATION PERIOD**

From 1 August 20\_\_\_\_, to 31 July 20\_\_\_\_ (maximum licence period 5 years)

*Note: the licence will be issued for the period applied for, however a renewal fee must be paid annually.*

**3. DETAIL OF ACTIVITY**

*Part 3 Subpart 2 of the Waste Management and Minimisation Bylaw 2019 sets the criteria under which applications for waste collection licences are assessed. The information required below provides the council with the information it needs to approve a waste collector licence.*

**3 (1) TYPE OF MATERIAL BEING RECEIVED AND HANDLED UNDER THE LICENCE CL. 24(E)**

Please tick

Domestic waste	<input type="checkbox"/>
Recyclables	<input type="checkbox"/>
Green waste	<input type="checkbox"/>
Construction and demolition waste	<input type="checkbox"/>
Commercial waste	<input type="checkbox"/>
Inorganic waste	<input type="checkbox"/>
Hazardous waste	<input type="checkbox"/>
Other (Please specify)	<input type="checkbox"/>

**Licensee and Council checklist. Please ensure you complete all paperwork before returning**

	Lic	AC		Lic	AC		AC
Form completed? Return if not			Invoice sent with T and Cs after completed form rec'd				
Public Liability Insurance cert. ret'd			Invoice paid				
Health & Safety and Quality details ret'd			Monthly reporting of data advised				
Terms and conditions signed and ret'd			Issue licence and veh. stickers				





**4. HEALTH AND SAFETY OF STAFF AND QUALITY OF DELIVERY (CL. 22(2(A))):**

The Bylaw requires that:

- you have a Health and Safety Plan? (Please submit a copy of its Table of Contents)
- you have a Quality Management Plan? (Please submit a copy of its Table of Contents)
- With regards to containment and spillage issues
  - Individual operators must be trained -What level of training is provided for each operator.
  - Do all operators have the capability to deal with every situation and if not
  - Where does responsibility lie.

***Please describe in the box below (or attach a separate sheet):***

**5. EXPERIENCE CL. 18(B)**

Provide details of the applicant's experience in the waste industry.

***Please describe in the box below (or attach a separate sheet):***

**6. PAST OPERATIONAL ISSUES CL. 18(B)**

Provide details of any operational issues that might have affected the applicant's ability to perform in the past.

**7. PUBLIC LIABILITY**

Provide a copy of your CURRENT Certificate of Public Liability Insurance covering the licence period. (A certificate from a broker is sufficient.)

**8. DECLARATION:**

I/we agree to be bound by and fulfil all terms and conditions of the licence by signature, including (without limitation) meeting all information and reporting requirements.

I/we declare that all information provided in this application and any (numbered) attachments and any information subsequently provided under the terms and conditions of the licence are correct and accurate.

Signature of applicant: \_\_\_\_\_

Name and Title of applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**Please note: The person completing this application must be authorised, in writing, to act as a signatory on behalf of the applicant.**

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**Please ensure you complete all paperwork before returning to**  
**Waste.Licensing@aucklandcouncil.govt.nz**