

AUTHORITY TO ISSUE ANNUAL WASTE FACILITIES PASS TO PROPERTY MANAGEMENT AGENCY FORM

Please download, complete, sign and return this form by email to info@sop.wa.gov.au, post to Shire of Plantagenet, PO Box 48, Mount Barker WA 6324 or deliver to Reception at the Administration Building at 22-24 Lowood Road, Mount Barker.

Assessment Number: _____

Property Owner's Name(s): _____

Property Address: _____

Phone: _____

Email: _____

I/We the owners of the property listed above, give consent for the Annual Waste Facilities Pass that is issued with the Shire of Plantagenet rates notice, be given directly to the Property Management Authority listed below for issue to the tenant.

Property Management Authority Name: _____

Property Management Authority Address: _____

Property Management Authority Phone: _____

Property Owner Signature(s): _____

Date: _____

OFFICE USE ONLY

- Tip Pass Register updated:
- Synergised all relevant documents:

Officer Signature

Date

Position