



Shire of Kent

REFUSE SITE ACCESS CARD REGISTRATION

NEW APPLICATION

CHANGES

REGISTRATION INFORMATION		
Company / Trust		
Surname		
Given Name(s)		
Phone	MOBILE	
Email		
Residential Address		
Postal / Mailing Address		
ACCESS CARD NUMBER		

Please Note: Only one swipe card per ratepayer will be issued. Any additional or replacement access cards required will be provided upon completion of a new registration form .

Comments: _____

Signature: _____ Date: _____

Please return form to the Shire of Kent Administration Office

Mail: Shire of Kent, PO Box 15, NYABING WA 6341

Fax: 9829 1083

[Email: dceo@kent.wa.gov.au](mailto:dceo@kent.wa.gov.au)

Office Use Only	
Issued to:	
Issuing Officer:	
Date:	





OF KENT

■ PINGRUP