

# SITE WASTE AND RECYCLING MANAGEMENT PLAN (SWRMP) CHECKLIST NO. 1

RECEIVED  
Waverley Council  
Application No: DA-114/2019  
Date Received: 11/4/2019



Made under *Waverley Development Control Plan (WDGP) 2012 - Part B1, Waste*

OFFICE USE

Application No.: DA

Date Received:

## TO BE SUBMITTED WITH YOUR DEVELOPMENT APPLICATION

This Checklist is part of your *Site Waste and Recycling Management Plan (SWRMP)* and will be assessed against the provisions of *WDGP 2012 - Part B1, Waste*. This checklist will help advise Council that requirements for waste and recycling storage and management have been addressed. It will ensure that during future use of the property waste and recycling can be collected in an efficient and safe manner.

To minimise any delay in receiving a decision about your application, please ensure you submit all relevant information and answer all questions. Mark 'N/A' where a question is not relevant to your development. Should you require assistance please contact Council's Customer Service centre on 9083 8000.

### DESCRIPTION OF PROPOSAL

Property Address: 24 Arden St, Waverley

Site Description including current structures on the site:  
Small Building containing a balcony.

Development Type: \_\_\_\_\_

### SPACE REQUIREMENTS (See *Part B, Annexure B1-2 Waste and Recycling Generation Rates*)

	Residential	Commercial
No. of units retail/commercial units	0	1
Total floor space of units retail/commercial	Metres <sup>2</sup>	Metres <sup>2</sup>
Estimated waste generation	Litres	Existing Litres
Estimated recycling generation	Litres	Existing Litres
Number of Mobile Garbage Bins (MGBs) for waste		Existing
Number of MGBs for recycling		Existing
Size of waste storage area	Metres <sup>2</sup>	Existing Metres <sup>2</sup>

### ACCESS

Describe access by tenants to waste facilities (highlight on plan / drawings).

As existing

Describe the route for transferring the waste and recycling bins from the central storage area to the collection point (highlight on plan / drawings).

As existing

Describe access by waste and recycling contractors to kerbside collection point or on site collection area (highlight on plan / drawings).

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## AMENITY

Describe how noise and odour associated with occupants using the bins and collection contractors emptying the bins has been minimised:

As existing

Describe the ventilation of the waste and recycling storage area (highlight on plan / drawings):

As existing

Describe facilities for washing bins and the waste and recycling storage areas.  
Is there an authorised connection to the sewer (highlight on plan / drawings)?

As Existing

Describe measures taken to ensure the aesthetics of the waste storage rooms and areas are consistent with the rest of the development:

As Existing

## CHECKLIST: have you shown the following information on your plans?

Refer to *WDCP 2012 – Part B1*

	Yes	No	N/A
The location of a centralised waste and recycling storage area that can accommodate the required number of bins or skips			✓
Calculate this using the guidelines in the relevant sections of <i>WDCP 2012 – Part B1</i>			✓
Construction of the waste storage area: complies with the specifications in the DCP			✓
The transfer route of the bins from the centralised storage area to the kerbside collection point			✓
A waste cupboard space or other area inside the dwelling for the sorting and storage for two day's waste and recycling (residential only)			✓
Area for green waste to be stored of 1m <sup>3</sup> minimum (multi unit dwellings with garden only)			✓
Caged area for discarded bulky items of 4m <sup>3</sup> minimum (multi unit dwellings only)			✓
Vehicle access route and turning area, if collection is within the premises – see also <i>WDCP 2012 – Part B, Annexure B1-3 Vehicle Dimensions and Turning Circles</i>			✓

## PRIVACY POLICY

The information requested in this form is required under WDCP 2012 – Part B1 and will be used in connection with the requirements of the Plan. The information will be available to Councillors, Council Officers and members of the public as required by the Act. Please advise Council if any information you have provided either changes or is incorrect or if you require your address to be withheld for personal or family safety.

Applicants Signature: \_\_\_\_\_

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

*[Signature]* 1/8/19