

## Application for Landfill Levy Relief in Victoria

This form is for Charitable Recyclers to apply for the Victorian Landfill Levy Relief program.

Eligibility Questions			
Community Organisation Name			
Nominated Representative			
Position			
Address			
State	Post Code		
Email			
Phone	_ Fax		
ls your organisation Not for Profit?		Yes 🗆	No [
Does your organisation meet all the eligibility criteria listed overleaf?		Yes 🗆	No [
Landfill Levy Relief Details			
Please advise the number of locations, as follo	OWS		
	Metro Areas	Regional Area	as
Number of Op Shops (Retail Outlets)			
Number of Warehouses (Sorting Centres)			
Number of Donation Bins			
Method(s) to be used:	Self Haul 🗖	Contractor $\Box$	





Eligibility for this program is limited to charitable recycling organisations that received donations from the community for the purpose of re-using or selling the goods for reuse. The definition of a charitable recycling organisation for this purpose is an organisation that:

is a not for profit; and

Authorised Signature

- has obtained Deductible Gift Recipient Status from the Australian Tax Office; and
- operates a recycling and reuse program which delivers landfill avoidance outcomes in Victoria;
- operates public drop off points in Victoria where the community can donate items, such as charity bins or shops receiving items from the public
- is constituted in accordance with the appropriate charity legislation in Victoria
- has paid employees and or volunteers that are directly involved in the operation of the recycling program(s) including collection, sorting, retailing, exporting of used clothing and associated products or providing clothing to the public for charitable purposes and that is (or are) exclusively run to support the charitable purpose of the organisation; and
- does not sell or otherwise allow their brand name to be used by a commercial operator to solicit donated goods; and
- has been actively involved in the consistent operation of a recycling program for a minimum of 12 months prior to seeking funds.

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☐ I declare that	
(Insert name of applying organi	isation)
meets with the eligibility criteria docun	mented above.
$\square$ I certify that to the best of my knowled	dge the statements made in this application are true.
Signature	Date
Name	Title
Organisation Name	

Please email Application to omer@charitablerecycling.org.au

Omer Soker, CEO, Charitable Recycling Australia, PO Box 1133, Mittagong NSW 2575 M 0401 099 821 | T 02 9712 8547

National Association of Charitable Recycling Organisations trading as Charitable Recycling Australia