

# Sanitary Product Rebate Application

Please complete the following form and return to [waste.services@stirling.wa.gov.au](mailto:waste.services@stirling.wa.gov.au)

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**Name:**

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**Residential Address:**

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**Contact Number:**

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**Email Address:**

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**Date of Purchase:**

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**Total Amount Spent on**

**Reusable**

**Sanitary Products (inc GST):**

*\*Do not include postage*

\$ \_\_\_\_\_ . \_\_\_\_\_

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**Bank Details:**

**Account Name:** \_\_\_\_\_

**BSB:** \_\_\_\_\_ - \_\_\_\_\_

**Account Number:** \_\_\_\_\_

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**Declaration:**

- ☐ I reside fulltime in the City of Stirling
- ☐ I have attached a copy of my Driver's Licence, recent rates notice or utility bill (within 3 months)
- ☐ I have attached the itemised receipt of purchase, dates within the past 12 months
- ☐ My household has not previously received a rebate for Reusable Sanitary Products from the City
- ☐ I have read and understood the condition of the Rebate

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**Signature:**

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**Date:**

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## OFFICE USE ONLY

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

Approved: \_\_\_\_\_

☐ **Yes**

Total value to be rebated: \$ \_\_\_\_\_

☐ **No**

Reason: \_\_\_\_\_

New Creditor Required: \_\_\_\_\_

☐ **Yes**

☐ **No**

Creditor Number: \_\_\_\_\_