

Application for Waste Collection Cart Program

Personal information on this form is collected pursuant to Section 11 of the Municipal Act, 2001 and will be used to receive special consideration with respect to the garbage bag limit. Questions about this collection should be directed to the City's Freedom of Information Coordinator at 50 Centre Street South, Oshawa, Ontario, L1H 3Z7 or by phone at 905-436-3311.

Applicant's Name:	Property Address:
Phone Number:	Postal Code:
Please review program criteria and eligibility recubinitting the form.	juirements on page 2 prior to completing and
Do you reside at this address? ☐ Yes ☐ No	Are there able bodied persons under the age of 65 residing at this address?
Is your disability permanent or temporary? Yes No	If temporary, anticipated end date (Month/Day/Year):
I agree that the individual listed on this form is u	unable to lift waste off a cart for collection.
Doctor's Name	Doctor's Address
Doctor's Signature	Date
	will notify Service Oshawa if any conditions change s of the Waste Collection By-law No. 113-2008 cation (refer to page 2)
Applicant's Signature:	Date:

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Waste Collection Cart Program Information

About the Program:

- The program allows persons with disabilities to leave their refuse on an approved cart for collection
- Choice of cart is to be approved by the City
- The City will issue a sticker which must be placed on the cart to identify approval to the City's collection staff
- Participants are responsible to comply with all other requirements in the City's Waste Collection By-law, No. 113-2008

Criteria for Participation:

- Resident must live in a single family dwelling
- There must be no able-bodied person living at the residence
- Resident must have a disability that prevents them from lifting waste from a cart for collection by City staff
- Proof of eligibility must accompany each application

Instructions to Resident:

- The program sticker must be affixed to approved cart and be clearly visible
- Please advise Service Oshawa if any conditions of your application change

Proof of eligibility:

- ODSP
- CNIB Client Card
- Access 2 Entertainment
- Disability Travel Card
- Doctor's note or signature on application
- CPP Disability Support
- Accessible Parking Permits issued by the Ontario Ministry of Transportation

Submission

- Please return the completed form and proof of eligibility to Service Oshawa
 - 50 Centre Street South, Oshawa, Ontario L1H 3Z7
 - o Email: service@oshawa.ca
 - o Fax: 905-436-5642
- For more information call Service Oshawa 905-436-3311 or visit www.oshawa.ca/waste

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