

Esquimalt's Residential Solid Waste Assistance Program

The Township of Esquimalt's new Waste Management Program will begin in early 2014. There are two components to the program: 1) separation and collection of kitchen scraps and 2) curbside pickup of both garbage and kitchen scraps.

The change to curbside pickup from backyard pickup will mean that residents will need to move their bins to the roadside for collection and return the empty bins to their original location once emptied by Public Works crews. The Township recognizes that there are people who need help returning bins to their homes and will be providing assistance for qualified individuals through the Residential Solid Waste Assistance Program.

The *Residential Solid Waste Assistance Program* is designed for those with disabilities, and seniors over the age of 80 years of age who have no other resident on their property capable of providing assistance. If you are under 80 years of age you will need to provide an existing Disabled Parking Permit or a note from your doctor to qualify for this service.

If you meet the criteria of the program, please fill out the attached Residential Solid Waste Assistance Program Application Form. For detailed information and frequently asked questions, please go to www.esquimalt.ca/municipal-services/garbage-recycling, or call 250-414-7108.

**TOWNSHIP OF ESQUIMALT RESIDENTIAL SOLID WASTE ASSISTANCE PROGRAM
ASSESSMENT FOR SPECIAL GARBAGE COLLECTION ARRANGEMENTS**

PART 1 – TO BE COMPLETED BY APPLICANT

APPLICANT INFORMATION (OWNER)

First and Last Name	Telephone
Property Address (Street Number and Name)	
<p>I am applying for the Solid Waste Assistance Program on the grounds that (please check one):</p> <p><input type="checkbox"/> I am a disabled person who is unable, without undue hardship or risk to health, to roll a wheeled cart to and from the curbside, as result of a permanent or temporary physical disability. (Part 2 required)</p> <p><input type="checkbox"/> I am over the age of 80. (Part 2 not required)</p> <p>And no other resident of my property is capable of rolling a wheeled cart to and from the curbside.</p> <p>**Note: If you currently have a Disabled Parking Permit, please provide your permit number here _____ and you will not be required to take this form to your physician.</p>	
Applicant Signature	Date

PART 2 – TO BE COMPLETED BY PHYSICIAN

Physician's Name	Telephone	
Address (Street Number and Name)	City/Town	Postal Code
Date physician saw applicant: _____		
<p>In my opinion, the applicant is unable, without undue hardship or risk to health to roll a wheeled cart to and from the curbside as a result of a <input type="checkbox"/> permanent or a <input type="checkbox"/> temporary physical disability.</p>		
Physician's Signature	Date	

PERSONAL INFORMATION: Personal information contained in this form is collected under Section 26 (c) of the Freedom of Information and Protection of Privacy Act and will only be used for the form's stated purpose. If you have any questions about the collection or use of your personal information, please contact the Corporate Officer at FOI@esquimalt.ca or 250-414-7135. More information can be found through our privacy policy

Return Application to: Township of Esquimalt
1229 Esquimalt Road
Esquimalt, BC V9A 3P1

Enquiries: 250-414-7108
Fax: 250-414-7160
Office Hours: Monday – Friday
8:30 am – 4:30 pm