



## CITY OF WEYBURN REFUSE CART SETOUT/SETBACK APPLICATION

### APPLICANT INFORMATION:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### CONDITIONS:

- 1) The occupant of this property has a permanent physical disability that prevents him or her from moving the cart to and from the collection point and does not have an able-bodied person to help them with this activity
- 2) The occupant must provide proof of physical disability or have a physician sign the verification of disability section
- 3) The cart must be visible from the street and freely accessible (not be placed inside a closed building or a gated area)
- 4) During winter months a path must be cleared of snow and ice to allow the staff to get the cart to the street and back
- 5) The City of Weyburn is not responsible for any damage to private property resulting from the provision of this service

\_\_\_\_\_  
Applicant Signature Date

**VERIFICATION:** Attach proof of disability, or have a physician complete the following:

Physician Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date: \_\_\_\_\_  
Physician Signature: \_\_\_\_\_

**Please note:** Your physician may charge for the verification of this document. The applicant is responsible for any costs involved in obtaining this information.

**Submit application to:** City Hall, 157 3<sup>rd</sup> Street, Weyburn, Saskatchewan, S4H 2K6

#### FOR OFFICE USE ONLY

Approved  Denied  Reason for Denial: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_