Garbage and Recycling Collection Services
Application – Multi-Family Homes

Part 1 Service Address (complete one for each property)

Building name(s) __________________________________ Number of units _______________
Attention ______________________________________________________________
Address ______________________________________________________________
Phone __________________________ Fax __________________________
Email __________________________ Postal code ___________

Part 2 Property Owner Information (if different from above)

Owner/business name ____________________________________________________________
Billing address ________________________________________________________________
Phone __________________________ Fax __________________________
Email __________________________ Postal code ___________

Part 3 Service Request (to be filled out by City representative)

<table>
<thead>
<tr>
<th>Garbage Collection Service</th>
<th>Recycling Collection Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Front-load bin; size________ number_________</td>
<td>□ 360L plastic cart; number_________</td>
</tr>
<tr>
<td>□ on wheels</td>
<td>□ Front-load bin; size________ number_________</td>
</tr>
<tr>
<td>□ weekly</td>
<td>□ on wheels</td>
</tr>
<tr>
<td>□ every two weeks</td>
<td>□ lockable lid</td>
</tr>
<tr>
<td>□ twice a week</td>
<td></td>
</tr>
<tr>
<td>□ Unlocking service ($38/bin/month)</td>
<td>□ Unlocking service ($38/bin/month)</td>
</tr>
<tr>
<td>□ Pull-box service ($20/bin/collection)</td>
<td>□ Pull-box service ($20/bin/collection)</td>
</tr>
<tr>
<td>□ No change</td>
<td>□ No change</td>
</tr>
<tr>
<td>□ Discontinue service</td>
<td>□ Discontinue service</td>
</tr>
</tbody>
</table>

You are responsible for purchasing or renting the required number of containers.
Containers are provided by the City.

Part 4 Agreement

I understand and agree that I am signing up for or discontinuing the services I have noted in Part 3.
Print name of applicant ____________________________________________________________
Signature __________________________________________ Date __________________________

Please return this application form:
• by mail to Solid Waste Services Division, 1120 Waverley Street, Winnipeg, Manitoba, R3T 0P4
• by email to WWD-SolidWaste-Clerks@winnipeg.ca
• by fax to 204-774-6729

June 2020
Any personal information collected is done so pursuant to S.36(1)(b) of The Freedom of Information and Protection of Privacy Act (FIPPA). This information will be used to administer your Garbage and Recycling Collection Services application and will not be used or disclosed for any other purposes, except as authorized by law. If you have any questions about the collection of this information, contact the Corporate Access and Privacy Officer by mail to City Clerk’s Department, Susan A. Thompson Building, 510 Main Street, Winnipeg MB, R3B 1B9, or by telephone at 311.

June 2020