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>□ unlocking service ($39/bin/month)</td>
</tr>
<tr>
<td>□ twice a week</td>
<td>□ Pull-box service ($20/bin/collection)</td>
</tr>
<tr>
<td>□ Unlocking service ($39/bin/month)</td>
<td>□ No change</td>
</tr>
<tr>
<td>□ Pull-box service ($20/bin/collection)</td>
<td>□ Discontinue service</td>
</tr>
<tr>
<td>□ No change</td>
<td>□ Discontinue service</td>
</tr>
<tr>
<td>□ Discontinue service</td>
<td></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

January 2021
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.