

Backyard Collection Service Application *For Atherton Residents with Permanent Physical Limitations*

If you are permanently physically limited, Backyard collection services for your Base Service GRAY and BLUE carts may be available at no extra cost. There must be no other persons residing in or providing services to the home on a weekly basis that are physically able to move these two (2) carts to within 5' of the curb and retrieve carts following collection service. To apply to receive this service accommodation, complete the application and have a licensed medical doctor authorized to practice medicine in the State of California certify this form. After receiving the completed application, GreenWaste may schedule a service appointment to evaluate the site. Upon approval, you will be notified and Backyard collection services, or an alternative methodology of accommodation, will begin immediately. For additional information, please contact GreenWaste at (650) 798-5999.

		APPLI	CANT INFORM	MATION			
Applicant Name		Number of p	ersons residing in h	ousehold:			
Phone Number		Number of pe	Number of persons residing on property/parcel:				
Service Address			Number of ab	Number of able-bodied persons in household or on property:			
			-	other persons on s carts? Y or N (circ	•	that can assist	
		PHYSIC	CIAN CERTIFI	CATION			
above is my pati wheeled solid wa	I am a licensed med ent and has an ong aste cart to the stred a issued to the appl	going and permane et or curb. Note: Ij	ent physical limita f the applicant has	tion that specifical a placard for a per	ly renders him/her rmanent disability,	unable to move a	
Doctor Signature Date			License Nun	License Number			
Doctor Name (Print)			Phone Numb	Phone Number			
Business Address			Fax Number	Fax Number			
		APPLIC	CANT CERTIF	ICATION			
my Base Service understand Gree physical condition provided by othe Under penalties authorize Green false or misleadi		E carts to and from est annual certifica nousehold member ice providers that we tre that all informa-	n the Curb. I auth tion renewal. <u>I wil</u> is that affect this ap visit my home at lea ation on this appli	norize GreenWaste Il notify GreenWas. Oplication, includin ast once weekly an cation is true, cori	to verify my eligi te of any improven g new or more fre d can assist with n rect and complete	bility and nents in my quent services noving carts. and expressly	
Applicant's Sig	, iiuuui e						

Submit Completed Application to GreenWaste. M.

Mail: 610 E. Gish Road, San Jose, CA 95112

Email: atherton@greenwaste.com