



## Walk-Up Recycling and Trash Service Application

We offer walk-up service for customers who are physically unable to get their recycling and trash to the curb. There is no charge for this service.

### PART ONE – To be completed by the customer

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

### I am requesting walk-up service for

Trash  Recycling

### I will place my materials so they are visible from the street used during the normal collection route.

at the front door  other (please describe) \_\_\_\_\_

I certify that there is no one in my home who can take my recycling and/or trash to the curb for me.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (day, month, year)

### PART TWO – To be completed by the physician

I certify that this patient has health limitations that prevent him or her from getting their recycling and/or trash to the curb. This condition is:

temporary (specify time period) \_\_\_\_\_

long term (at least one year)

\_\_\_\_\_  
Name of Physician (print)

\_\_\_\_\_  
Signature of Physician

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date (day, month, year)

**Please return this form by fax to Bridge City Sanitation 641-682-8118.  
This form expires one year from the date signed by the physician.**