



City of Watertown NEW YORK

Department of Public Works Curbside Refuse & Recycling Assistance Form

Submit this form if you have a physical or other limitation that prevents you from complying with the curbside collection program. By submitting this form you are certifying that neither you nor anyone in your home is capable of moving a refuse or recycling collection container out to the curb for service. Residents requesting assistance with curbside refuse collection shall comply with the following standards, terms, and conditions:

- The applicant must be the principal occupant;
- The applicant must have a physical or other limitation, precluding them from moving a collection container to the curb for service;
- The applicant shall certify that no other person residing with them is physically able to move the collection containers to the curb for service;
- The applicant's collection containers must be easily accessible to sanitation workers and not enclosed in a fence or garage.
- The applicant shall provide a **doctor's statement verifying that the applicant has a medical condition** that precludes them from moving collection containers to the curb for service. The statement must be dated and printed on the medical practice letterhead.

This form must be completed and submitted for approval each year. If you have any questions regarding your qualification or eligibility status, please call DPW (315-785-7842). See form details below.

Applicant First Name: _____ Applicant Last Name: _____

Applicant Age: _____ Phone Number: _____

Email: _____

Address: _____

Signature: _____

Please send **BOTH** this form and a medical verification statement together by either mail or email to:

City of Watertown
DPW Office
557 Newell Street
Watertown, NY 13601

PublicWorks@watertown-ny.gov

The application will not be processed until we receive **BOTH** this form and a medical verification statement.