



## Door Side Assistance Form

The City of Arlington contracts with Republic Services to provide residents with trash and recycling services. The City's Ordinance of the Health and Sanitation Chapter Section 2.04 states the following: *Door side collection of waste and recycling may be provided to residents, living in a single-family home, who are mobility or visually impaired. To qualify for this service the resident must provide a doctor's note or permanent handicap placard; and shall have no other member of the household that is physically able to place carts at the curb. Qualifying residents may place their carts in a location designated by the City or its Collector.*

Name:	Phone Number:
Address:	Email Address:

Please complete **either** the Doctor's Certification **OR** the Applicant's Certification below.

<b><u>Doctor's Certification</u></b>	<b><u>Applicant's Certification</u></b>
I, the undersigned, hereby certify that I am a medical doctor licensed to practice medicine in the State of Texas. I further certify that my patient, named below, has an ongoing disability that prevents him/her from moving the recycling cart to the curb for collection.	I am physically unable to move my household trash and/or recycling to the curb for collection. I further verify that there is no able-bodied person living at my residence that can move my trash/recycling to the curb for collection.
Doctor's Name:	Attached is a copy/photo of my permanent handicap placard.
Doctor's License Number:	I understand that it is my responsibility to resubmit this form annually from this date for continued assistance.
Business Address:	Applicant's Signature:
Telephone Number:	Date:
Patient's Name:	
Doctor's Signature:	
Date:	

**Email completed form to [trashpickup@arlingtontx.gov](mailto:trashpickup@arlingtontx.gov)**