



Multi-residential Property Waste, Recycling and Organic Collection Plan

This form is our: First Submittal Revised Form Ownership Change

SECTION 1: PROPERTY INFORMATION

Property Name		Effective Date	
Street Address		Postal Code	
Number of Dwelling Units			
Ownership Style	<input type="checkbox"/> Rental <input type="checkbox"/> Condominium <input type="checkbox"/> Combination Rent/Own		
Type of Property	<input type="checkbox"/> Apartment <input type="checkbox"/> Townhomes <input type="checkbox"/> Apartment Style Condominiums <input type="checkbox"/> High Rise <input type="checkbox"/> Other		

SECTION 2: PROPERTY OWNERSHIP & CONDO BOARD CONTACT

Owner Name				
E-mail				
Phone #				
Mailing Address				
City		Province		Postal Code

Condo Board Contact Name(s)				
Board Position				
Email Address				
Phone #				
Mailing Address				
City		Province		Postal Code

SECTION 3:**PROPERTY MANAGEMENT CONTACT**

Company Name					
Contact Name				Onsite Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No
E-mail					
Phone #					
Mailing Address					
City		Province		Postal Code	

SECTION 4:**WASTE COLLECTION SERVICES**

Company Name					
Contract Expiry					<input type="checkbox"/> N/A
Phone #					
Mailing Address					
City		Province		Postal Code	

WASTE COLLECTION LEVEL OF SERVICE

Container Type(s)	Container Size(s) Gallons, Litres, Cubic Yards	# of Containers	Collection Frequency
Carts			
Dumpsters			
Molok Style Bins			
Roll Off Bin			
Compactor			
Other:			

Enclosures

Is the waste collection area enclosed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type (i.e. fence, gate, building):
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SECTION 5:

RECYCLING COLLECTION SERVICES

Company Name					
Contract Expiry	<input type="checkbox"/> N/A				
Phone #					
Mailing Address					
City		Province		Postal Code	

RECYCLING COLLECTION LEVEL OF SERVICE

Container Type(s)	Container Size(s) Gallons, Litres, Cubic Yards	# of Containers	Collection Frequency
Carts			
Dumpsters			
Molok Style Bins			
Roll Off Bin			
Compactor			
Other:			

Check off which of the following materials are included in your recycling program:

- Newspaper
 Catalogues and magazines
 Mixed paper, flyer, envelopes
 Shredded paper: must be enclosed or contained within a securely tied transparent or semi-transparent bag
 Telephone Books and soft cover books
 Boxboard
 Corrugated Cardboard
 Metal food and beverage containers
 Aluminum cans, aluminum foil and aluminum foil plates
 Refundable beverage containers (not glass)
 Plastic containers with the recycling symbols 1-7, excluding polystyrene foam
 Plastic Bags, Wrap and Film: bundled within a single bag for collection
 Tetra Packs
 Other _____

Are residents required to sort their recycling into categories or is the collection co-mingled?

If required to sort, please describe sorting requirements:

Enclosures		
Is the recycling collection area enclosed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type (i.e. fence, gate, building):

SECTION 6: ORGANIC COLLECTION SERVICES

Company Name					
Contract Expiry	<input type="checkbox"/> N/A				
Phone #					
Mailing Address					
City		Province		Postal Code	

ORGANIC COLLECTION LEVEL OF SERVICE			
Container Type(s)	Container Size(s) Gallons, Litres, Cubic Yards	# of Containers	Collection Frequency
Carts			
Dumpsters			
Molok Style Bins			
Roll Off Bin			
Compactor			
Other:			

Check off which of the following materials are included in your organic program:

- Fruit scraps, vegetable scraps, food leftovers, plate scrapings
- Meat, fish, giblets and bones
- Dairy products, butter, mayonnaise, dressings, solidified fats and grease
- Eggshells
- Bread, cereal, grains, pasta, pizza
- Baked goods, candies, baking ingredients, herbs, spices
- Coffee filters, coffee grounds, tea bags
- Houseplants, cut and dried flowers, yard and garden waste, leaves and grass clippings
- Nuts, pits, seeds and shells
- Soiled paper towels and tissues, used paper cups and plates, soiled pizza boxes
- Compostable serving wear and bags
- Animal bedding/Pet waste
- Other _____

Are residents required to use Certified Compostable Bags?

Enclosures

Is the organic collection area enclosed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type (i.e. fence, gate, building):
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SECTION 7: ADDITIONAL INFORMATION

RESIDENT WASTE, RECYCLING & ORGANIC DROP OFF AREAS (only applicable if residents are not depositing waste, recycling & organics into Collector Bins described above)		
	#of rooms/areas	Type and Size of Container Provided in this area if applicable
Waste Chutes		
Recycling Chutes		
Organic Chutes		
Waste Room		
Recycling Room		
Organic Room		
Other:		
Additional information		

SECTION 8: SITE MAP

SECTION 9:

SIGNATURE

Date:

Signature:

Name: