

## **Non-Residential Bin Order Form**

Charities, Institutions and Religious Organizations (CIRO)

Organization Contact Information		(Please Prii	nt Clearly)
Organization Name			
Service Address (Street Number, Name, Suite/Unit Number, City/Town, Province, Postal Code)			
Billing Address (if different from a	bove)		
Authorized Representative Name	horized Representative Name (First, Last)  Registered Charitable Number		umber
Telephone Number (including extension) ( )		Email	
Bin Order Request			
Garbage:			
Specify Quantity of Garbage Bi	ns Requested		
Small 18 gal	Medium 35 gal	Large 65 gal	Extra Large 95 gal
Fees are associated with collection of garbage bin(s). To apply for the Waste Diversion Rate Waiver Program you must visit www.toronto.ca/garbage under Non Residential for more information.			
Recycling:			
Specify Quantity of Recycling Bins Requested Only 95 Gal bins will be provided. No fees associated with the collection of recycling bin(s).			
Organics:			
Specify Quantity of Organic Bins Requested Size of organic bin(s) provided will be determined by Solid Waste Management Services. No fees associated with the collection of organic bin(s).			
26 or 35 gal Organic Bin(s)			
Authorized Representative Signature (Request cannot be processed without the signature of authorized representative)  Date (yyyy-mm-dd)			Date (yyyy-mm-dd)
For any inquiries, please contact (416) 392-7738			
Completed form must be returned via <u>ONE</u> of the following methods:			
1. Mail	Customer Service and	ement Services Division and Waste Diversion Implementation ram Yard, Toronto, ON M6M 2L6	
2. Fax	Attn: Non-Residential (416) 392-0396	Program	
3. Email	Attn: Non-Residential swmsupport@toronto.		