

Charity Rate Waiver Garbage Tag Reimbursement

Service Information				
Organization Name	Charitable Number			
Service Address (Street Number and Street Name)			Utility Service Number	
Site Business Contact Information				
Authorized Representative Name (First, Last)	Telephor		ne Number	
Billing Address (Street Number, Street Name, Suite/Unit Number, City/Town, Province, Postal Code)		Email		
Garbage Tag Reimbursement				
	Rate per Garbage Tag		Specify the quantity of Garbage Tag(s) purchased at an approved retail outlet	
Curbside Garbage Collection Fee Per Garbage Tag (January 1, 2018 to December 31, 2018)	\$5.11			
Curbside Garbage Collection Fee Per Garbage Tag (January 1, 2019 to December 31, 2019)	\$5.38			
 Notes: Please submit individual Reimbursement forms for each individual Reimbursement forms for each individual Receipts for claim reimbursement must be attached qualify for reimbursement Reimbursement calculations are based on year and date reflected by authorized retail outlet 				
I validate that receipts submitted represent Garbage Tags used for collection service at the above specified Service Address during 2018 and 2019.				
Authorized Signature			Date (yyyy-mm-dd)	

Mail the completed form with original receipts to: Charity Rate Waiver Garbage Tag Reimbursement

c/o: Data Team

Solid Waste Management Services City Hall, 25th floor, East Tower 100 Queen Street West Toronto, Ontario M5H 2N2

Inquiries related to this reimbursement

Email: swmscs@toronto.ca

Subject Line: Charity Rate Waiver Garbage Tags

Reimbursement

Fax: (416) 392-4754

Attention: Charity Rate Waiver Garbage Tag

Reimbursement

Office Use Only – Reimbursement	
Reimbursement = \$5.11 X number of garbage tag(s) purchased	
Reimbursement = \$5.38 X number of garbage tag(s) purchased	
Total Reimbursement	→

