

APPLICATION REQUIREMENTS

Clothing Drop Box Location Permit

Clothing Drop Box

Each box requires a Clothing Drop Box Permit. (P90)

How can I apply?

- Online by e-mailing MLSroadallowance@toronto.ca or in person at 850 Coxwell Avenue, 3rd Floor.

What documents and information do I need to provide if applying in person?

- Declaration of Confirmation of Placement (City of Toronto form).
- Approval from Property Owner/Manager – the City of Toronto may contact the Property Owner/Manager for confirmation;
- Application Fee: \$113.52;
- Site Plan or Survey of location, measurements **MUST** be shown on the survey which includes: location of the proposed box; distance from box to closest parking space; distance from box to intersection; entrance/exit of parking; distance from box to municipal sidewalk. Your site plan will be reviewed prior to approval under Chapter 395;
- Certificate of Insurance on the City of Toronto form.
- Clothing Drop Box Operator Licence (B90)
- Engineer Report certifying safety of the propose clothing drop box
- Photo confirming that the clothing drop box is in a lighted area
- Pick up schedule (sample attached)

Please note:

- Only two drop box will be allowed per municipal address.
- All clothing drop box operators, INCLUDING charitable organizations, must display the permit sticker
- Circulation will be sent to the Ward Councillor.



Fiona Chapman, Director
Business Licensing and
Regulatory Services

Municipal Licensing and Standards Division
Carleton Grant, Executive Director

Licence and Permit Issuing
East York Civic Centre
850 Coxwell Avenue, 3rd Floor
Toronto, ON M4C 5R1

Tel: 416-392-6700
Fax: 416-392-4515
mlsroadallowance@toronto.ca

Declaration of Confirmation for Placement of Clothing Drop Boxes

Clothing Drop Box Operator Name: _____

Municipal Licence # (if required): _____ B90- _____

Contact Name/Phone Number/Address: _____

Per Toronto Municipal Code Chapter 395 Clothing Drop Boxes section 395-2B(3)f, I/we declare the following to be true:

That we are applying for a permit/permits to erect,display,locate or place clothing drop boxes on the premises listed,where we have obtained permission by the property owner to do so. (Please attach a list of the municipal addresses where you are seeking a permit(s) and the number of boxes at each location.)

(Signature)

(Date)

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Declaration of Charitable Organization

Clothing Drop Box Operator Name: _____

Contact Name/Phone Number/Address:

Per Toronto Municipal Code Chapter 395 Clothing Drop Boxes section 395-2B(3)h, I/we declare the following to be true:

1. As a representative and/or above-named clothing drop box operator, I/we confirm that there **have not been more than three convictions for violations under any section of this chapter;**
2. As a representative and/or above-named clothing drop box operator, I/we confirm that we **have not been charged more than three times under any section of this chapter for which the proceedings have not been finally disposed of; and**
3. As a representative and/or above-named clothing drop box operator, we declare that **we are a charitable organization, non-profit organization or religious institution and have included the appropriate:**

(please check)

charitable registration number _____

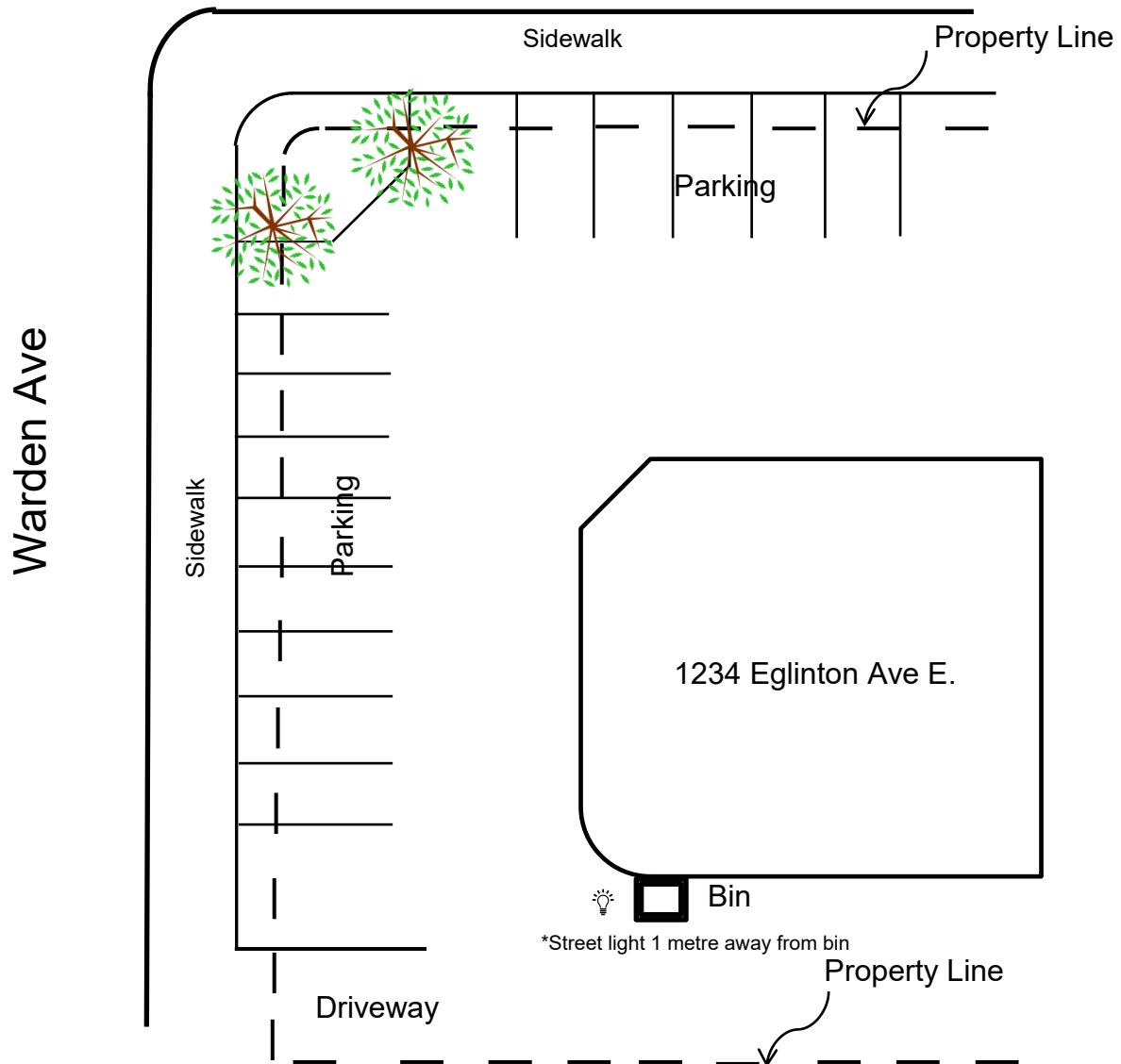
proof of declared status (please append or describe below)

(Signature)

(Date)

CLOTHING DROP BOX SAMPLE SITE PLAN

Eglinton Ave East



Notes:

- * Clothing drop boxes shall be located on private property and not closer than 1 metre from a municipal sidewalk.
- * Clothing drop boxes shall not obstruct or be located within 1 metre of a required parking space.
- * Clothing drop boxes shall not be erected, displayed, located or placed within 3 metres of a driveway entrance or exit or a side property line.



CERTIFICATE OF INSURANCE
(to be completed only by the Insurer or its authorized representative)

Name of Insured:		Operating Name:		Telephone No.:
Address of Insured:			Postal Code:	
Name of Insurance Company:				
Operations of the named insured for which this Certificate is issued: Clothing Drop Box - all bins			Permit #:	
COMMERCIAL GENERAL LIABILITY <i>(minimum limit to be evidenced - \$2,000,000.00)</i>				
Policy No. / Insuring Co.:	Effective Date (dd/mmmmm/yy):	Expiry Date (dd/mmmmm/yy):	Coverage (per occurrence):	
PROVISIONS OF AMENDMENTS OR ENDORSEMENTS OF LISTED POLICY(IES)				
Commercial General Liability is extended to include Bodily Injury Liability, Contractual Liability, Owner's and Contractor's Protective Coverage, Products-Completed Operations, Contingent Employers Liability and Non-owned Automobile Liability.				
The City of Toronto has been named as an Additional Insured but only with respect to liability arising out of the operations of the Insured for which a permit, license or agreement has been issued by the City of Toronto.				
The Commercial General Liability policy(ies) identified above shall protect each insured in the same manner and to the same extent as though a separate policy has been issued to each but nothing shall operate to increase the limits of liability as identified above beyond the amount or amounts for which the Company would be liable if there had been only one Insured.				
If insurance is placed in primary and excess layers, file Separate certificates for each. If a facsimile has been transmitted, the original certificate must follow. The Commercial General Liability policy(ies) identified above shall apply as the primary insurance and not excess to any other insurance available to any of the Additional Insured as set out in Paragraph 2.				
If the policy is canceled or changed in any manner, for any reason, during the period of coverage as stated herein so as to affect this certificate, thirty (30) days prior written notice (ten (10) days if cancellation is due to non-payment of premium) by registered mail will be given by the insurer to:				
Municipal Licensing & Standards 850 Coxwell Avenue, 3rd Floor Toronto, Ontario M4C 5R1			Email: mlsroadallowance@toronto.ca Subject: COI Business Address of Insured	
Name of Insurance Broker:		Telephone No.:		Email Address:
Address:			Postal Code:	
I certify that the insurance is in effect as stated in this certificate and that I have authorization to issue this certificate for and on behalf of the insurer(s). This certificate is valid until the expiration date(s) shown unless notice is given in writing.				
_____ Signature and Stamp of Authorized Representative			_____ Date	

The acceptance of this certificate by the City of Toronto does not certify that the limits of liability and terms and conditions of the policy referred to above meet the specified requirements of the Commissioner of Finance nor will the acceptance of this certificate by the City waive the City's rights of action against the application and/or insurer for failure to comply with provisions governing the use of permits and licences granted herein.