

# 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)	Telephone 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 <b>(January 1, 2020 to December 31, 2020)</b>	<b>\$5.70</b>	
Curbside Garbage Collection Fee Per Garbage Tag <b>(January 1, 2021 to December 31, 2021)</b>	<b>\$5.79</b>	

<b>Notes:</b> <ul style="list-style-type: none"> <li>Please submit individual Reimbursement forms for each individual service address</li> <li>Original Receipts for claim reimbursement must be attached to this form in order to qualify for reimbursement</li> <li>Reimbursement calculations are based on year and date reflected on receipt provided by authorized retail outlet</li> </ul>	
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<b>I validate that receipts submitted represent Garbage Tags used for collection service at the above specified Service Address during 2020 and 2021.</b>	
Authorized Signature	Date (yyyy-mm-dd)

**Mail the completed form with original receipts to:** Charity Rate Waiver Garbage Tag Reimbursement  
 c/o: Customer Account Requests Team  
 Solid Waste Management Services  
 Metro Hall, 19<sup>th</sup> floor  
 55 John Street  
 Toronto, Ontario M5V 3C6

**Inquiries related to this reimbursement**

**Email:** [swmscs@toronto.ca](mailto: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 = \$5.70 X number of garbage tag(s) purchased	
Reimbursement = \$5.79 X number of garbage tag(s) purchased	
<b>Total Reimbursement</b>	→