



Utility Billing
 1 Centennial Square
 Victoria, BC V8W 1P6

T 250.361.0226
F 250.361.0214
Office Hours: 8 a.m. – 4:30 p.m., Monday – Friday

Residential Solid Waste Helping Hands Program

The Helping Hands Program was designed for persons living with a disability and seniors over 80 years of age, who have no other resident on their property that is capable of wheeling grey and green waste collection bins to and from their curb.

Depending on which category you fall under it may be necessary to have your doctor’s approval for you to qualify for this service.

Part 1 (to be completed by applicant)

Property Location: _____

Address Utility Account Number: _____

Applicant’s Name: _____

Phone #: _____ Email: _____

I hereby apply for a level of garbage collection service that includes retrieving and returning my bin(s) to my yard, on the grounds that (please check one):

- I am a person who is unable, without undue hardship or risk to health, to roll wheeled bin(s) to and from the curb, as a result of a permanent or temporary physical disability. (Part 2 required)
- I am over the age of 80 and no other resident of my property is capable of rolling wheeled bin(s) to and from the curbside (Part 2 not required).

Applicant’s Signature: _____

Date: _____

Part 2 (to be completed by Physician)

Physician’s Name: _____

Physician’s Address: _____
STREET/CITY/POSTAL CODE

The date I last saw the Applicant was: _____

In my opinion, the Applicant is unable, without undue hardship or risk to health to roll a wheeled waste collection bin to and from the curb on scheduled collection days as a result of a permanent or a temporary physical disability.

If a temporary disability, please indicate the expected date of recovery: _____

Physician’s Signature: _____

Date: _____

Return Application to:
 City of Victoria
 Utility Billing
 #1 Centennial Square
 Victoria, BC V8W 1P6

The personal information collected by this form is used for the purpose of determining eligibility for the Helping Hands program. The legislated authority to collect the personal information is section 26(c) of the Freedom of Information and Protection of Privacy Act. For further information regarding the collection of your personal information, please contact, INSERT HERE a generic job title, email address and phone number.