

CITY OF WHITE HOUSE
DEPARTMENT OF PUBLIC SERVICES
SANITATION DIVISION
725 INDUSTRIAL DRIVE
WHITE HOUSE, TN 37188
Phone: (615) 672-3654 Fax: (615) 672-3655

Backdoor Garbage / Recycling Service Application

This application applies only to households where no one in the household is physically able due to age, infirmity, illness or handicap to roll the waste or recycle carts to the street for collection by the City/Contractor. (Municipal Code 17-105 Section 4)

APPLICANTS NAME: _____ TELEPHONE NUMBER: _____

ADDRESS: _____

NAME(S) AND AGE(S) OF PERSON(S) LIVING IN THIS HOUSEHOLD:

NAME:	AGE:	NAME:	AGE:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Reason for backdoor service request:

The above is a true and accurate statement that reflects the existing conditions. I acknowledge the City's right to investigate the information furnished.

Applicant's Signature

Date

CERTIFICATE OF DISABILITY

To: Public Works Director, City of White House

From: _____
Attending Physician/Health Department Name, Address, and Phone Number

In my opinion Mr. / Mrs. _____ is physically unable to move the mobile garbage and/or recycle cart from their home to the curb. Such action would be detrimental to his/her health.

Signature _____

APPROVAL: _____ GRANTED _____ DENIED _____ FOR OFFICIAL USE ONLY

Public Works Director

Date