

**APPLICATION for
SENIOR CITIZENS AND PHYSICALLY DISABLED SIDEWALK
AND DRIVEWAY WINDROW SNOW CLEARING PROGRAM**

To be eligible for this service:

- applicants must be 65 years of age or older **or**
- be physically disabled.
 - Senior citizens must** provide a copy of a birth certificate; or
 - Physically disabled applicants** must provide a doctor's certificate each year. Note – If you are permanently disabled, your Doctor's Certificate should state you are permanently disabled and the note will be kept on file.
- occupy a single family, dwelling which fronts onto a Municipal street in the specified urban areas or the urbanized areas of the specified hamlets, and
- Have no able bodied persons under the age of 65 years residing on the property.

Snow Clearing Service:

- Snow clearing service on municipal sidewalks starts when a snow fall ends and only when there is an accumulation of more than 2 cm of snow on sidewalks.
- Driveway windrow clearing shall **not exceed 3 feet** into the driveway apron. **The driveway windrow snow clearing service is not undertaken until the snow plowing on all Municipal streets has been completed and will not be called out for minimal amounts.**

Should conditions not meet the above criteria, 2 cm of snow on sidewalks and/or 15 cm (approximately 6 inches) of windrow, the resident is responsible to clear and provide material (sand/salt) as required.



Please complete application form on reverse

FOR OPERATIONS DEPARTMENT USE ONLY

LENGTH OF SIDEWALK:

Frontage _____

Flankage _____

Total = _____

DRIVEWAY WINDROW:

Length _____

DECLARATION:

Please Print

NAME OF APPLICANT: _____ **DATE OF APPLICATION:** _____

I hereby request that the Municipality provide snow clearing services adjacent to my single family dwelling located at:

HOUSE NUMBER: _____ **STREET NAME:** _____

TOWN: _____ **POSTAL CODE:** _____

TELEPHONE: _____ **EMAIL** _____

PERSONAL INFORMATION: (check all that apply)

- 1. I am the owner/occupant or the tenant of the above noted dwelling
- 2. I am 65 or over in age physically disabled permanently physically disabled

Proof of Senior Status or disability must accompany application

- 3. The above property is located on a street corner yes no
- 4. I request that the Municipal sidewalk be cleared yes n/a
- 5. I request that the driveway windrow be cleared yes n/a

By signing this form, I understand and agree to the following:

- 1. There are no able bodied persons under 65 years of age residing at this address;
- 2. Snow clearing service on municipal sidewalks will start the day after a snow fall ends and only when there is an accumulation of more than 2 cm of snow on sidewalks;
- 3. **The driveway windrow snow clearing service will not be undertaken until the snow plowing on all Municipal streets has been completed and are not provided for depths of 15 cm (approximately 6 inches) or less;**
- 4. Driveway windrow clearing will not exceed 3 feet into the driveway apron;
- 5. The Municipality of Clarington will not be responsible for any damage caused by equipment used during snow removal on private property consisting of interlocking brick, patio slabs, uneven pavement, etc;
- 6. The Municipality of Clarington will not be responsible for damage caused to adjacent shrubs and landscaping on any private property of individuals receiving the snow removal service; and
- 7. The applicant shall indemnify and save harmless The Corporation of the Municipality of Clarington and their employees from all actions, suits, claims and demands whatsoever which may arise directly or indirectly by reason of a requirement of this application.

I understand and agree that this service does not include snow clearing from private sidewalks into my residence and does not include snow clearing on my driveway other than the windrow of snow at the end of my driveway. I understand that I must provide material (sand/salt) on my sidewalk as needed.

A fee of \$86.45 (\$76.50 + HST) must accompany your completed application along with proper documentation. Make cheques payable to "Municipality of Clarington"

Application Deadline: October 25, 2019

I make this Declaration conscientiously presenting the details as being true.

Signature of Applicant _____ **Date** _____

FOR MUNICIPAL USE ONLY

Approved by: _____ **Date Issued:** _____

No. 2019- _____