

# SNOW WINDROW REMOVAL ASSISTANCE FORM

## (for one car width only)

**This form is for NEW applications only. ALL sections of this form MUST be completed.**

### About The Program

A snow windrow is the pile of snow at the end of the driveway created by the plows when they clear the road. Markham's Snow Windrow Removal Program is available to **all** residents of Markham who require assistance in removing their snow windrow, and who meet the requirements below.

### What are the Requirements to Qualify?

In order to receive assistance in removing a portion of the snow windrow on your driveway, each person over the age of 12 must meet one of the following requirements:

- Must be 60 years of age or older, or
- If under the age of 60 years, must have a doctor's/note identifying that they are unable to shovel snow

To qualify, each person over the age of 12 years must provide proof of their age (please refer to the list of valid documentation

options below). Each person between the ages of 12 and 60 years must also provide a current doctor's certificate identifying that they are unable to shovel snow. Persons 60 years and older are only required to provide proof of age.

In addition, the primary resident must also provide proof of Markham residency (please refer to the list of valid documentation options below). If your proof of residency (such as a Driver's Licence) also includes proof of age, then no other documentation is required. If you cannot provide valid documentation, please call the Customer Contact Centre at 905.477.5530.

### Proof of Age (only one of the following for each person is required with your application):

- Driver's Licence   
  Birth Certificate   
  Ontario Health Card   
  Citizenship Card   
  Passport

### Proof of Residency (only one of the following required for the primary resident):

- Driver's Licence   
  City of Markham Tax Bill   
  Recent PowerStream Bill   
  Recent Enbridge Bill



Snow  
Windrow

### Please complete for all persons living at this address:

First Name:	Last Name:
Address:	
Daytime Phone Number:	Email:
Reason: <input type="checkbox"/> 60 years of age or older <input type="checkbox"/> Age (please specify): <input type="checkbox"/> Under the age of 60 and with a disability	
First Name:	Last Name:
Reason: <input type="checkbox"/> 60 years of age or older <input type="checkbox"/> Age (please specify): <input type="checkbox"/> Under the age of 60 and with a disability	
First Name:	Last Name:
Reason: <input type="checkbox"/> 60 years of age or older <input type="checkbox"/> Age (please specify): <input type="checkbox"/> Under the age of 60 and with a disability	
First Name:	Last Name:
Reason: <input type="checkbox"/> 60 years of age or older <input type="checkbox"/> Age (please specify): <input type="checkbox"/> Under the age of 60 and with a disability	
Mail your completed form to:	If you require any additional information, please contact us at:
City of Markham 101 Town Centre Blvd. Markham, ON L3R 9W3 Attn: Contact Centre – Snow	Tel: 905.477.5530, Email: customerservice@markham.ca Monday to Friday, 8:00 a.m. - 5:00 p.m. Thursdays until 7:00 p.m.
<i>Please allow five (5) business days for processing from date of receipt.</i>	

**Please see other side of page for Terms and Conditions, and to complete the form by signing**

## Terms and Conditions

- I agree to notify the City if I move from the address on the other side of this form during the winter season or no longer qualify for this service.
- I understand that the City reserves the right to determine when snow windrow removal will be done.
- I understand that Snow Windrow Removal service will only take place following a 7.5 cm snow fall, no matter if the front street is serviced.
- I am aware that the Snow Windrow Removal service does not include the clearing of the remainder of the snow from the private walkways to my residence, my driveway, or the snow windrow left by the sidewalk plow.
- I am aware that due to varying storm conditions, it may take up to eight (8) hours after my road has been plowed for the snow windrow to be cleared.
- I agree to remove any obstructions at the end of my driveway.
- I will not hold the City responsible for any damage.
- I will keep my house number visible and illuminated.
- I understand that it will be one car width of my snow windrow at the end of my driveway that will be cleared.
- I understand that laneways do not qualify for this service.
- For applicants who are 60 years and older, this application will be automatically renewed each year.
- For applicants under 60 years of age with a medical condition, please provide supporting medical documentation to the Contact Centre to have your status renewed automatically.
- I agree to notify the City of any changes to my personal information, my medical condition or if I no longer require this service.

I have read and understood the terms and conditions of this service, and I solemnly declare that the information provided is true.

I acknowledge that the City of Markham may recover any costs incurred should there be any misrepresentation by the undersigned and that failure to comply with the above Terms and Conditions may result in termination of the service.

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**Signature of Applicant**

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**Date**

This information is collected under authority of the Municipal Act *S.R.O. 1990 Chap.M.45 S.210Par.60-63* in order to validate an applicant's request to obtain windrow snow removal. The information is collected voluntarily by the applicant and is protected under the Municipal Freedom of Information and Protection of Privacy Act.