

**Town of Carrboro – Public Works Department  
RESIDENTIAL REAR YARD SANITATION SERVICE**

Per Section 11-19 (d) of the Town Code, rear yard service may be provided if the following requirements are met.

REQUIREMENTS for rear-yard sanitation services to be initiated:

1. A letter from the occupant’s physician. If more than one occupant, a letter will be needed for each occupant.
  - Letter should be written on the physician’s official stationary
  - Length of the occupant’s disability should be stated, i.e., temporary for a stated time period or permanent for an indefinite period.
2. This completed form certifying there are NO persons within the residence who are able to assume responsibility for the moving of the refuse container curbside is required.

Letter and form should be addressed and forwarded to: **Director of Public Works, Town of Carrboro, 301 West Main Street, Carrboro, NC 27510**

Upon receipt of both the physician’s letter(s) and this certification form, rear-yard service shall be initiated pending approval by the Director of Public Works.

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Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Names of All Occupants: \_\_\_\_\_

I/We, \_\_\_\_\_ hereby certify:  
Name(s) Printed

- There are no persons within the above stated residence who are able to resume responsibility for the moving of the mobile refuse container curbside on the designated collection day or following the servicing of such container
- If someone does become available to resume the responsibility of the moving of the container curbside, I will notify the Public Works Department immediately.

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**SIGNATURES**

<b>Occupant 1:</b>	<b>Date:</b>
<b>Witness:</b>	
<b>Witness’ Address</b>	
<b>Occupant 2:</b>	<b>Date:</b>
<b>Witness:</b>	
<b>Witness’ Address</b>	