



Curbside Green Cart Selection Form

Owner's Name: _____

Address: _____

Account Number: _____ Access Code: _____

Phone No.: _____ Email: _____
(Require either phone # and/or e-mail)

Owner's Signature: _____

Date: _____ Confirmed Owner

If taken by phone and no Account # or Access Code provided:

Middle Name: _____

Any other names on title: _____

Staff Initial: _____

P/U Day

Tue.

Wed.

Thurs.

Fri.

\$24.63/month

80L
False Bottom

39.19"

(\$7.03/month for extra cart*)

80L
CART FOOTPRINT

20.20"

22.98"

\$25.38/month

120L

39.19"

(\$7.67/month for extra cart*)

120L
CART FOOTPRINT

20.20"

22.98"

\$26.31/month

240L

40.58"

(\$8.37/month for extra cart*)

240L
CART FOOTPRINT

26.70"

28.11"

\$26.88/month

360L

45.13"

(\$9.07/month for extra cart*)

360L
CART FOOTPRINT

28.50"

33.73"

Check box to indicate request:

A) New Service: Cart Size: _____ Extra Cart Only:

B) Exchange: From Cart Size: _____ To Cart Size: _____

Moved: Date of Move: _____
(No Charge)

1st Exchange: *(Non move)* (No Charge May 1, 2023 - April 30, 2025)

2nd Exchange: *(Non move)* \$25.00 Fee

C) Replace or Repair Due To: *(Leave damaged cart at curb for pick up on collection day)*

Weather/other natural: Cart Size: _____

Resident: Details: _____

Emterra: _____

D) Cart Missing: Cart Size: _____

Details: _____

Please email completed form to curbside@chilliwack.com

Data Entered: Staff Initial: _____ Date: _____

** Please note there is a one-year commitment period for additional Green Carts.*