

Request for Accommodation for Household Waste Collection

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

To Whom It May Concern,

I am writing to formally request assistance with my household waste collection services due to a disability that affects my ability to manage waste disposal independently. I am currently facing difficulties in handling waste due to [briefly explain your disability, e.g., mobility issues, chronic illness, etc.].

As a resident of [Your Neighborhood/Area], I kindly ask for accommodations that may include:

- Special arrangements for waste collection on my behalf.
- Adjustments to collection times that might better suit my needs.
- Any additional assistance that could facilitate a more manageable waste disposal process.

I have attached the necessary medical documentation to support my request and would be grateful if we could discuss any potential accommodations at your earliest convenience.

Thank you for considering my request. I look forward to your prompt response.

Sincerely,

[Your Name]