

Region of Queens Municipality

COMMUNITY LITTER COLLECTION PROGRAM GUIDELINES

Purpose

The Community Litter Collection Program encourages healthy communities by providing opportunities for non-profit organizations throughout Queens County to earn grant funding in exchange for organizing and completing a community litter clean-up in a location authorized by Nova Scotia Department of Transportation & Infrastructure Renewal (NSTIR) and Region of Queens Municipality.

Funding Available

Compensation is \$125 per kilometer cleaned up, including both sides of the road, up to a maximum of \$625 per cleanup. The amount allocated by Council will be reviewed annually as part of the Operating Budget approval process.

Eligibility

Any incorporated non-profit community organization or group within Queens County is eligible to apply once per application window and must also supply proof of approval from Nova Scotia Adopt a Highway (<https://www.nsadoptahighway.ca/>). Application windows will be advertised and open for submissions for a three-week period followed by a one-week internal review by Municipal Staff.

Application Process

The Region of Queens Municipality will accept applications from groups prior to the scheduled clean-up date. Interested parties must submit a completed "**COMMUNITY LITTER COLLECTION PROGRAM APPLICATION**" (attached) to:

solidwaste@regionofqueens.com

Subject: Community Litter Collection Program Application

Applications will be reviewed for compliance and awarded on a first-come, first-served basis each year subject to budget limitations. Successful applicants will be notified following staff evaluation, provided with their unique reference ID to be included on the completed "**CLEAN UP REPORT**" and "**WAIVER FORM**" and given four weeks to complete their proposed clean-up. Applicants who do not complete the above within the timeframe will forfeit their funding which will be allocated in the next application window.

If there are allocated funds remaining at the end of an application window, a second application window will open where preference will be given to first-time applicants for that fiscal year. Application windows will continue in cycle until all allocated funds are exhausted. Application windows will be advertised on the Municipalities social media channels as well as shared directly with community groups who wish to subscribe by emailing solidwaste@regionofqueens.com.

Clean-up Process

The Adopt a Highway Program can provide the proper PPE and is part of the application process. The Region of Queens Municipality will provide successful applicants with designated program bags, trash grabbers and also remove the collected waste from the designated location within 48 hours following the clean-up.

All collected waste shall be bagged and placed at the designated location for collection by municipal staff. Hazardous materials shall be set aside in a designated area and reported immediately to the Region of Queens. Hazardous materials are not permitted to remain unattended by the roadside. Large items not baggable shall be in the designated area for collection. Scavenging of waste by participants is not permitted.

Safety

Successful applicants must ensure that all participants are provided with proper Personal Protective Equipment including safety vests and gloves and also made aware of safety measures for the clean-up of solid waste alongside Queens County roadways. Recommended PPE is:

- 1) Foot protection that complies with CSA Standard CAN/CSA Z195, with a minimum six (6) inch high boot. Where there is a risk of slipping, participants must wear slip resistant footwear if required.
- 2) Clothing must not be excessively loose. Long hair, jewelry, or other similar items must be tied or covered to eliminate the risk of injury. Participants must wear CSA z96 Class 2 Level 2 high-visibility outer at all times.
- 3) ANSI Level 5 hypodermic puncture protection and ANSI A9 cut resistance hand protection.
- 4) Eye or face protection in accordance with the CSA Standard Z94.3.



The Adopt a Highway program will provide appropriate signage and pylons to the applicants, who will place the equipment along the area being cleaned to ensure the safety of all volunteers. Participants between ages 12 and 17 must be supervised by at least one person over the age of 18 per 4 youth participants.

Clean-ups must take place during daylight hours.

Evaluation of Clean-up

At the conclusion of the community litter program, the applicant will submit the "**CLEAN UP REPORT**" and "**WAIVER FORM**" for all participants. Municipal staff will validate the clean-up to confirm and process payment to the applicant group.

Promotion

The successful applicant shall acknowledge the contribution of the Region of Queens Municipality in all written and social media notifications or promotions of their community litter clean-up. The applicant also agrees that the Municipality may use the name of the successful applicant and any pictures taken of the community litter clean-up for the purposes of promoting the program in the future.

Liability

Each successful group must provide their Registry of Joint Stock Companies Number as part of the application. Every participant in the group must also fill out the waiver form; guardians will complete the waiver for all participants under 18 years of age.

Limitations

The Region of Queens Municipality reserves the right to process applications for funding and award funding each fiscal year in a fair and equitable manner. If multiple applications are received during the same window, the Municipality reserves the right to give preference to groups that have not previously been successful prior to awarding funding to a successful group that has been funded for a clean-up in the previous fiscal year.



COMMUNITY LITTER COLLECTION PROGRAM APPLICATION

Organization Name: _____

Organization's Registry of Joint Stock Companies Number: _____

Organization Contact: _____

Mailing Address: _____

Phone Numbers: Home: _____ Cell: _____

Email Address: _____

Location of Litter Collection Program (please be very specific, ie: Civic 100 to Civic 400 Main Street, Greenfield, NS)

Number of Kilometres: _____ Copy of NSTIR Permit Attached: _____

Date of Proposed Collection: _____ Time: _____

I affirm that I am an authorized agent of the organization named above and that we will undertake to carry out a solid waste collection program on the noted roads, streets, or properties contained herein and that we have read and understand the program guidelines and agree to abide by the supervision, health and safety, and reporting requirements.

Signature of Authorized Agent

Date

INTERNAL USE ONLY

Municipal Approval

Date

Reference ID: _____



CLEAN-UP REPORT

Clean-up Reference ID: _____

Number of Participants: Under 19 _____ Over 19 _____

Number of Program Bags Collected: _____

Hazardous Materials Found: _____

Total Collection Time: _____

Most Often Collected Item: _____

Most Unusual: _____

INTERNAL USE ONLY

Roadside Check Date _____ Solid Waste Removed _____

Signed _____



WAIVER FORM

(to be completed by each participant prior to activities)
Solid Waste Community Litter Collection Program

Participant Name: _____

Clean-up Reference ID: _____

It is understood and agreed that in consideration of the Region of Queens Municipality paying the Participant for cleaning up the stretch of road identified herein (the "Service"), the Participant is and remains at all times an Independent Contractor and assumes full responsibility for all liability that may result from the provision of the Service, including but without limiting the generality of the foregoing, any and all injuries sustained by any persons engaged by the Participant to perform the Service, and any injury to any person or any damage to any property arising from the provision of the Service by the Participant or its agents, employees and invitees.

It is further understood and agreed the undersigned is authorized to sign this Waiver and bind the Participant to the terms of this Waiver and that the undersigned has read and understands the foregoing.

Participant Signature

Guardian Name & Signature, if Participant Under 18 Years of Age

Witness Name & Signature

Date

