



## VERIFICATION OF ELIGIBILITY FOR DRIVEWAY WINDROW REMOVAL

### MEDICAL CERTIFICATE

#### Medical Information

Medical information must be filled out by a Canadian Regulated Health Practitioner.

A licensed physician, chiropractor, nurse practitioner (extended class), physiotherapist or occupational therapist may certify the applicant's condition on this application.

#### Eligibility Requirements

To be permanently confined to a wheelchair, restricted to the permanent use of crutches or braces, or otherwise be permanently disabled in such a way as to restrict physical mobility.

#### Medical Certification

I hereby certify the applicant has a permanent disabling condition and meets the necessary eligibility requirements as listed above.

Signature of Regulated Health Practitioner

Please Print or Stamp  
Name & Address of  
Regulated Health Practitioner

Date

DD	MM	YYYY
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Telephone No.

**Additional Comments** *(optional)*

Ensure you keep a copy for your records.