



Connecticut Department of Energy and Environmental Protection (DEEP)  
 Bureau of Materials Management & Compliance Assurance  
 79 Elm Street - 4<sup>th</sup> Floor  
 Hartford, CT 06106-5127

## CT SOLID WASTE COLLECTOR ANNUAL **DEEP** SOLID WASTE REPORTING FORM to be Submitted to **DEEP** FY \_\_\_\_\_

Must be Submitted by **July 31<sup>st</sup>** (for the Previous Fiscal Year i.e. July 1-June 30) to the Connecticut DEEP. The completed report can be:

- Faxed (860) 424-4059 Attn: Solid Waste Facility Reporting - Paula Guerrero; **or**
- Scanned** and e-mailed to [DEEP.SOLID&HAZWASTEREPORTS@CT.GOV](mailto:DEEP.SOLID&HAZWASTEREPORTS@CT.GOV) (Do not send hard copy if sending electronically); **or**
- Land-mailed (Connecticut DEEP; Bureau of MM&CA-Recycling Office; 79 Elm Street - 4<sup>th</sup> Floor; Hartford, CT 06106-5127; Attn: Attn: **SOLID WASTE FACILITY REPORTING- PAULA GUERRERA**) (**Must be double sided** and preferably on paper with a minimum **30% post-consumer** content).

To confirm **DEEP** receipt of your report contact [Paula Guerrero](mailto:Paula.Guerrera@deep.state.ct.us) (860 424-3334)

**COLLECTOR/HAULER - CONTACT INFORMATION:**

Collector Name:  Phone #:  E-mail:

Street Address:  Town:  State:  Zipcode:

Mailing Address:

The information you provide below should reflect Connecticut generated solid waste and/or recyclable items which (1) you collected/hailed **and** (2) which did not go through or to a CT permitted or registered solid waste facility.

### Part 1 – Connecticut Generated Source Separated Recyclable Items Collected<sup>1</sup>

(A) TYPE of RECYCLABLE ITEM <sup>2</sup>	(B) SOURCE OF RECYCLABLE ITEM			(C) NAME and ADDRESS of FIRST DESTINATION	(D) TONS
	(B1) Residential or Non-Resid <sup>3</sup> (check all that apply)	(B2) Waste Stream	(B3) CT City or Town where Recyclable Was Generated		
	<input type="checkbox"/> Residential <input type="checkbox"/> NonResidential <input type="checkbox"/> Mix-Res&NonRes	<input type="checkbox"/> MSW <input type="checkbox"/> C&D Waste <input type="checkbox"/> Landclearing			

<sup>1</sup>It is mandatory to report information regarding recyclables (1) collected and hauled from a CT entity other than a Connecticut permitted or registered solid waste facility **and** (2) delivered to a destination other than a Connecticut permitted or registered solid waste facility i.e. **CT recyclable items which did not pass through or go to a CT permitted or registered solid waste facility.**

<sup>2</sup> Categories of recyclable items collected include but are not limited to: (1) Dual stream in same collection truck (bottles & cans, paper); (2) Single stream mix of bottles, cans, paper; (3) Bottle bill containers collected separately from other bottles & cans; (4) Boxboard collected separately; (5) Brush; (5) Corrugated collected separately; (6) Glass containers collected separately; (7) Gypsum wallboard collected separately; (8) Food waste; (9) High grade white office paper collected separately; (10) Lead acid storage batteries; (11) Leaves; (12) Magazines collected separately; (13) Metal containers collected separately; (14) Newspaper collected separately; (15) Plastic containers collected separately; (16) Scrap metal; (17) Wood

<sup>3</sup>Residential sources means real estate containing one or more dwelling units. **Condominiums and apartments are residential sources of recyclables. Hospitals, motels or hotels are "nonresidential"** (CGS Section 22a-220a(a)). **Any waste (other than waste oil) burned is considered disposed.**

**Part 1 – Connecticut Generated Source Separated Recyclable Items Collected<sup>1</sup>**

(A) TYPE of RECYCLABLE ITEM <sup>2</sup>	(B) SOURCE OF RECYCLABLE ITEM			(C) NAME and ADDRESS of FIRST DESTINATION	(D) TONS
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**Part 2 – Other CT Generated Solid Waste (other than source separated recyclable items) Collected<sup>4</sup>**

The information you provide below should reflect Connecticut generated solid waste which (1) you collected/hailed and (2) which did not go to or through a CT permitted or registered solid waste facility

(A) TYPE OF SOLID WASTE COLLECTED	(B) CT CITY OR CT TOWN WITHIN WHICH THE <i>MSW</i> WAS GENERATED (i.e. only for <i>MSW and Oversized MSW</i> )	(C) NAME and ADDRESS of FIRST DESTINATION	(D) TONS

<sup>4</sup> It is mandatory to report information regarding other solid waste (other than source separated recyclables) (1) collected and hauled from a CT entity other than a Connecticut permitted or registered solid waste facility and (2) delivered to a destination other than a Connecticut permitted or registered solid waste facility i.e. CT recyclable items which did not pass through or go to a CT permitted solid waste facility.

**Part 2 – Other CT Generated Solid Waste (other than source separated recyclable items) Collected<sup>4</sup>**

The information you provide below should reflect Connecticut generated solid waste which (1) you collected/hailed and (2) which did not go to or through a CT permitted or registered solid waste facility

MSW MSW			
OVERSIZED MSW – i.e. furniture, carpets, mattresses, etc			
CONSTRUCTION & DEMOLITION Waste			
LANDCLEARING – Logs & stumps			
Other – Specify:			
Other – Specify:			

(Use back of form or additional pages if more space is needed)

**Part 3 - Certification and Signature**

**Certification of document:** This document, which is required to be submitted to the Commissioner of Environmental Protection, shall be signed by the chief executive officer or a duly authorized representative of such officer, and by the individual(s) responsible for actually preparing such document, and each such individual shall certify in writing as follows:

“I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify, based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, that the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that any false statement made in the submitted information may be punishable as a criminal offense under §53a-157b of the Connecticut General Statutes and any other applicable law.”

**Signatures:**

**Collector/Hauler- Chief Executive Officer**

Signature of Chief Executive Officer  
or Authorized Representative:

Date:

Printed Name of Chief Executive Officer or  
Authorized Representative:

**Person Responsible for Preparing this Report**

Signature of Person Preparing this  
Report

Date:

Printed Name of Person Preparing this  
Report:

Title: