

This is the Annual Recycling Report for Waste/Recycling HAULERS only!

If your town contracts your recycling out to a private hauler to pick up your recycling, (be it curbside or a drop off location), this is the form that you must give them in order to get the tonnage they collected from your residents.

Private Haulers include: J.P. Mascaro, Waste Management, County Waste, etc.

Please make sure they know that if the box for SINGLE STREAM is selected and a weight is put in, the company must select what items it collects for single stream below. It is important that this step is followed as we are trying keep track of exactly who is collecting glass, plastic, aluminum, steel-bi-metallic, newspaper, cardboard, etc.

**This report is covering the period
January 1 to December 31 of the preceding year.**

Report only post-consumer materials on this form. Post-consumer material is material that has been used as a consumer item and then diverted from municipal solid waste for the purpose of collection and recycling. The term excludes material generated in manufacturing and converting processes such as manufacturing scrap and trimmings/cuttings. Also, print overruns, over-issue publications, and obsolete inventories that did not leave the generating facility would be classified as pre-consumer materials and should **not** be reported on this form.

If you collect materials commingled or single stream, please check the appropriate boxes to note the recyclable materials in the mix, but **only enter the tonnage beside commingled or single stream. Do not estimate tonnages of each individual recyclable material in the commingled or single stream mix.**

- Source separated - all recyclables are kept separated from each other.
- Commingled - two or more recyclables are collected together but fiber (paper & cardboard) is kept separate.
- Single stream - all recyclables, including fiber, are collected together.

- Enter the name of the processing facility or market where the recyclable materials were delivered.
- Complete the tonnages for the materials on page 2.
- Use the conversion chart below as necessary.
- ENTER the GROSS WEIGHT** of material recycled in the correct column. DO NOT subtract any processing residue.
- Enter the total tons of solid waste collected within this municipality, if required by the municipality. This information is usually required of haulers who have a municipal waste collection services contract. If you do not have a municipal contract, this information may not be required.
- Sign and date the form.
- Submit to the municipality where you provided recycling collection services by February 1st.

Conversion Chart	
Antifreeze:	7.2 lbs per gallon
Battery – Lead Acid:	Car = 17.8 lbs Truck = 48.7 lbs Motorcycle = 8.7 lbs
Rubber Tires:	Car = 21 lbs Truck = 70 lbs
Used Oil:	7.2 lbs per gallon
Oil Filters:	1.2 lbs each
Glass – Whole Bottle:	1 ton = 2 yds ³
Newsprint – Loose:	1 ton = 3 yds ³
Corrugated Cardboard:	2.5' x 4' x 5' bale = 1100 lbs
Plastic Soda Bottles	
Whole, Loose:	30 lbs = 1 yd ³
Plastic Film:	2.5' x 4' x 5' bale = 1500 lbs
Solid & Liquid Fats:	55 gallon drum = 412 lbs
White Goods	
Freezers:	1 = 250 lbs
Refrigerators:	1 = 250 lbs
Other Appliances:	1 = 150 lbs
Yard Waste	
Leaves:	4 yd ³ = 1 ton
Grass Clippings:	2 yd ³ = 1 ton
Wood Chips:	1 yd ³ = 500 lbs

ANNUAL RECYCLING REPORT

For Waste/Recycling HAULER, Document Destruction Company,
or Other Company Transporting Recyclables Generated in PA

Collector Name:		
Address:	City:	Zip Code:
Email:	Telephone:	Fax:

Please **complete one form for each municipality** where you collected recyclables.

Municipality: _____ County: LUZERNE

1. CHECK the box in front of each post-consumer* material that you collected for recycling from the municipality above.
2. ENTER the **GROSS WEIGHT**** of material recycled in the correct column. **DO NOT** subtract any **processing residue**.

ACT 101 Recyclable Material Type (see page 2 for Other Recyclables)	[SS1]	Resi- dential Tons***	Res. Drop-Off Tons ***	Commercial/ Institutional Tons	Com. Drop-Off Tons	Name of Processing Facility or Market
Single Stream:	[SS1]					
Commingled:	[XXX]					
Note: If commingled or single stream collection system, check the boxes below for each material in the mix.						
GLASS BOTTLES & JARS:						
<input type="checkbox"/> Glass: Clear	[GL1]					
<input type="checkbox"/> Glass: Mixed	[GL2]					
<input type="checkbox"/> Glass: Green	[GL3]					
<input type="checkbox"/> Glass: Brown	[GL4]					
PAPER:						
<input type="checkbox"/> Paper: Cardboard	[C01]					
<input type="checkbox"/> Paper: Brown bags & sacks	[C02]					
<input type="checkbox"/> Paper: Gabled/Aseptic Cartons	[C03]					
<input type="checkbox"/> Paper: Magazines/Catalogs	[PA1]					
<input type="checkbox"/> Paper: Newsprint/Newspaper	[PA2]					
<input type="checkbox"/> Paper: Mixed/Other Paper Grades (junk mail, chipboard, etc.)	[PA3]					
<input type="checkbox"/> Paper: Office Paper (all high grades)	[PA4]					
<input type="checkbox"/> Paper: Phone Books	[PA6]					
PLASTICS:						
<input type="checkbox"/> Plastic: PET	[PL1]					
<input type="checkbox"/> Plastic: HDPE	[PL2]					
<input type="checkbox"/> Plastic: PVC	[PL3]					
<input type="checkbox"/> Plastic: LDPE	[PL4]					
<input type="checkbox"/> Plastic: PP	[PL5]					
<input type="checkbox"/> Plastic: PS	[PL6]					
<input type="checkbox"/> Plastic: MIXED / OTHER	[PL7]					
<input type="checkbox"/> Plastic: FILM	[PL8]					
METAL CANS & BOTTLES:						
<input type="checkbox"/> Aluminum Cans	[AA1]					
<input type="checkbox"/> Steel & Bimetallic (Tin) Cans	[F02]					
<input type="checkbox"/> Mixed Cans	[MX2]					
ORGANICS:						
<input type="checkbox"/> Source Separated Food	[SSF]					
<input type="checkbox"/> Wood Waste	[WW1]					
<input type="checkbox"/> Yard and Leaf Waste	[Y01]					

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****Enter GROSS WEIGHT of all material. DO NOT subtract any processing residue as PA DEP has a formula it will apply.**

*****Residential tons:** Residential tons include recyclables from condominiums, apartment complexes and townhouses.

3. CHECK the box in front of each post-consumer material collected for recycling from the municipality you indicated on page 1.
 4. ENTER the **GROSS WEIGHT**** of material recycled in the correct column. **DO NOT** subtract any **processing residue**.

NON ACT 101 Other Materials Recycled		Resi- dential Tons***	Res. Drop-Off Tons ***	Commercial/ Institutional Tons	Com. Drop-Off Tons	Name of Processing Facility or Market
OTHER GLASS						
<input type="checkbox"/> Glass: Plate	[GL5]					
<input type="checkbox"/> Glass: Other	[GL6]					
OTHER PAPER:						
<input type="checkbox"/> Drum: Fiber	[DR3]					
OTHER PLASTICS:						
<input type="checkbox"/> Plastic: Drum (high molecular weight HDPE)	[DR1]					
<input type="checkbox"/> Plastic: Drum (mixed bulky rigid)	[DR4]					
OTHER METALS:						
<input type="checkbox"/> Aluminum Scrap	[AA2]					
<input type="checkbox"/> Mixed Metals	[MM1]					
<input type="checkbox"/> Non-Ferrous Metals	[N01]					
<input type="checkbox"/> Copper	[N02]					
<input type="checkbox"/> Brass	[N03]					
<input type="checkbox"/> Lead	[N04]					
<input type="checkbox"/> Stainless Steel	[N05]					
<input type="checkbox"/> Nickel	[N10]					
<input type="checkbox"/> Wire / Cable	[W01]					
<input type="checkbox"/> Ferrous Metals	[F01]					
<input type="checkbox"/> White Goods	[F03]					
HOUSEHOLD/HAZARDOUS WASTE:						
<input type="checkbox"/> Antifreeze	[O02]					
<input type="checkbox"/> Batteries: Lead Acid	[B01]					
<input type="checkbox"/> Batteries: Other	[B02]					
<input type="checkbox"/> E-Waste (includes TV)	[CR1]					
<input type="checkbox"/> Fluorescent Tubes/CFLs	[FL1]					
<input type="checkbox"/> Used Oil	[OL2]					
<input type="checkbox"/> Oil Filters	[OL3]					
<input type="checkbox"/> Other Commercial HW (paints, varnish, pesticides, etc.)	[CHW]					
<input type="checkbox"/> Other Household HW (paints, varnish, pesticides, etc.)	[HHW]					
OTHER RECYCLABLES:						
<input type="checkbox"/> Asphalt	[ASP]					
<input type="checkbox"/> Rubber Tires	[M01]					
<input type="checkbox"/> Construction & Demolition	[M02]					
<input type="checkbox"/> Clothing / Textiles	[M03]					
<input type="checkbox"/> Furniture & Furnishings	[M04]					
<input type="checkbox"/> Mattresses	[MT1]					
<input type="checkbox"/> Misc. Other Consumer Items	[MIS]					

COMPLETE AND SUBMIT A REPORT TO EACH INDIVIDUAL MUNICIPALITY BY FEB 1st!

****Enter GROSS WEIGHT of all material. DO NOT subtract any processing residue as PA DEP has a formula it will apply.**

I certify, to the best of my knowledge, that the information on this form is complete and accurate. I further authorize the Municipality to aggregate this report for DEP reporting and grant purposes.

Authorized Representative

Title

Signature

Date