



GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF PUBLIC WORKS
OFFICE OF RECYCLING

3220 Pennsylvania Ave., S.E. Washington, D.C. 20020 (202) 645-8245



INSTRUCTIONS FOR SUBMITTING COMMERCIAL RECYCLING PLAN

GENERAL INSTRUCTIONS:

Please fill in items 1 through 18 on the Commercial Recycling Plan and return to Office of Recycling, 3220 Pennsylvania Ave., S.E., Washington, D.C. 20020. If a section is not applicable, put N/A.

1. Company Name: Exact name of corporation, partnership or sole proprietor doing business in the District of Columbia and registered with the Department of Consumer and Regulatory Affairs as required.
2. Ward: Ward number where building is located.
3. Building Name: Indicate the name of the building in which the company is located.
4. Address: Where the company listed above is located.
5. Recycling Coordinator & Telephone #: The on-site person who is responsible for planning and monitoring of recycling.
6. Building Manager & Telephone #: The person responsible for day-to-day operations of the building.
7. Type of Commercial Establishment: Please check the type of business.
8. Total Square Footage of Building & Number of Units: Enter the total from occupancy permit.
9. Number of Employees in the building: Total number of employees full and part time.
10. Number of Current Solid Waste Hauler: The Company responsible for hauling your solid waste.
11. Materials Recycled and how frequently collected: Check all that apply and enter how frequently collected, i.e. two times per week.
12. Check how your employees are notified.
13. Describe how recyclables will be collected in this facility.
14. Indicate where centralized containers will be placed inside and/ or outside building. Attach a site plan.
15. Name of Recycling Hauler and Registration Number: By law your recycling hauler must have a registration number from the D.C. Office of Recycling.
16. Contract Agreement Period: Enter the start and expiration dates of your recycling contract.
17. Name(s) and Address of Buildings sharing the Recycling Plan: Each business has to submit a recycling plan also.
18. Do you require additional information in developing your recycling program?
If yes a Commercial Recycling Investigator will contact you.



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Washington, DC 20020**



COMMERCIAL RECYCLING PLAN

1. Company Name: _____ 2. Ward: _____

3. Building Name: _____

4. Address: _____

5. Recycling Coordinator: _____ Telephone: _____

6. Building Manager: _____ Telephone: _____

7. Type of Commercial Establishment (Please check only one of the following):

- | | | |
|----------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Office | <input type="checkbox"/> Bar/Restaurant | <input type="checkbox"/> Wholesale |
| <input type="checkbox"/> Hotel | <input type="checkbox"/> Manufacture/Industrial Services | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Health Services/Social Services | <input type="checkbox"/> Grocery | <input type="checkbox"/> Residential Apartments |
| <input type="checkbox"/> Condominium/Co-Ops | <input type="checkbox"/> Education | |

8. Total Square Footage of Building: _____ Number of Units: _____

9. Number of Employees in the Building (Full and Part-time): _____

10. Name of Current Solid Waste Hauler: _____

11. Materials Recycled (Check and enter frequency for all that apply) : _____ time(s) per _____

- | | | |
|------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> Computer paper, white ledger | <input type="checkbox"/> Glass (clear/brown/ green) | <input type="checkbox"/> Used Fat/Cooking Grease/Oil |
| <input type="checkbox"/> Corrugated Cardboard | <input type="checkbox"/> Plastics (#1 or #2) | <input type="checkbox"/> Auto Batteries |
| <input type="checkbox"/> Newspaper/ Magazines | <input type="checkbox"/> Aluminum & Tin (cans/steel) | <input type="checkbox"/> Textiles |
| <input type="checkbox"/> Mixed Paper (colored ledger, envelopes) | <input type="checkbox"/> Scrap Metals | <input type="checkbox"/> Used Motor Oil |
| <input type="checkbox"/> Other (specify): _____ | | <input type="checkbox"/> White Goods (stoves, refrigerators, etc) |

12. How will employees and each tenant or occupant, be notified of the recycling program in this facility?

- | | | | |
|---------------------------------------------|-----------------------------------|---------------------------------|--------------------------------------|
| <input type="checkbox"/> Letters/memorandum | <input type="checkbox"/> Meetings | <input type="checkbox"/> Flyers | <input type="checkbox"/> Newsletters |
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