Annual Business Recycling Reporting Survey
JANUARY 1st – DECEMBER 31st 2021

Questions and comments **should be directed to the County Recycling Coordinator** (not the Maryland Department of the Environment) from which this survey was received.

Completed Business Recycling Reports **should be returned to the County Recycling Coordinator** (not the Maryland Department of the Environment) where the facility is located by **April 5, 2022** by mail or email. The County Contact Information is:

Baltimore City Bureau of Solid Waste
200 Holliday Street- Room 1000
Baltimore, MD 21202
Phone: 410-396-4511
Email: Recycling@baltimorecity.gov

Thank you very much for your cooperation!

Date: _____

Company/Facility Name: _____

Address of Company/Facility: _____
                                        (STREET)
                            _____
                                (CITY, STATE, ZIP CODE)
                            _____
                                        (COUNTY)

Company/Facility Contact Information: _____

Contact Address: _____
(if different from facility address)
                            _____

Job Title: _____ Phone #: _____

E-mail: _____ Fax #: _____

Office/Facility Name: _____

Annual Business Recycling Reporting Survey
JANUARY 1st – DECEMBER 31st

A1. Solid Waste Contractors

These are the entities that remove the <u>disposed</u> waste materials from the company/facility – <u>not</u> who collects the material throughout the company/facility such as housekeeping or custodial staff.

<u>Solid Waste</u> (*i.e.*, trash) **Contractor/Hauler(s):** _____

_____

_____

_____

A1a. To which Maryland Permitted Solid Waste Acceptance Facility (MPSWAF) was the waste disposed (see "Maryland Permitted Solid Waste Acceptance Facilities" list available in the "County Coordinator Resources" section on MDE's waste diversion web page at www.mde.maryland.gov/recycling) by each of the company/facility solid waste contractor(s)? If the waste was not captured by any MPSWAF, please report as such.

NOTE: There is no need to track the waste disposed to the end market. Only the 1st MPSWAF needs to be listed. For example if Acme Inc., sent their waste to MPSWAF 1 who sent it to MPSWAF 2 who sent it to Virginia Landfill 1, the waste only needs to be tracked to MPSWAF 1 (*e.g.*, Acme Inc. – MPSWAF 1). If, however, Acme Inc., sent their waste directly to Virginia Landfill 1, then they need to report that the waste for Acme was not captured by a MPSWAF (*e.g.*, Acme Inc. – no MPSWAF).

_____

_____

_____

_____

_____

A2. Option 1 – Waste Disposed (Complete Section A2 **ONLY** if waste <u>disposed</u> by a solid waste contractor is NOT captured by a MPSWAF. See Section A1a, above.). Waste disposed totals reported in this section must also be reported in "Table A1 – Waste Disposed" of the "MRA Tonnage Reporting Survey".

Waste Hauler	City/State Waste Disposed Sent	Type of Facility *	Waste Type **	Total Waste Disposed (tons)

Printed on Recycled Paper

Office/Facility Name: _____

Annual Business Recycling Reporting Survey
JANUARY 1st – DECEMBER 31st

Waste Hauler	City/State Waste Disposed Sent	Type of Facility *	Waste Type **	Total Waste Disposed (tons)
TOTAL				

*   Categories include landfill, incinerator, processing facility, transfer station.

**   Categories include but not limited to: mixed trash, appliances, asbestos, asphalt, construction & demolition, food, incinerator ash, landclearing debris, landscaping debris, medical waste, metal, sewage sludge, soil, textiles (*e.g.*, clothes, mattresses, etc.), tires, and other (please detail).

Option 2 – Waste Disposed (Use **ONLY** if A2, Option 1 is not available.)

Calculate approximate tons of waste <u>disposed</u>. The next chart and table will help you determine the amount of solid waste **disposed** by your facility. Number of solid waste dumpsters used by your facility:

_____ 2 yd^3 dumpster(s)	_____ 30 yd^3 open top(s)
_____ 4 yd^3 dumpster(s)	_____ 20 yd^3 compactor(s)
_____ 6 yd^3 dumpster(s)	_____ 30 yd^3 compactor(s)
_____ 8 yd^3 dumpster(s)	
_____ 20 yd^3 open top(s)	_____ _____
	_____ _____

Use the information above to complete the following table. (Note: Compactor totals need to be calculated in the rows indicated with "Compactor" in the "Size of dumpster (yd^3)" column at the end of the table.)

Size of dumpster (yd^{3}s)	X	No. of this Type of dumpster	X	Frequency of pick-up/week	X	Yd^{3}s to tons (0.1) ratio	=	Tons/week	X	No. of weeks /year operating between Jan-Dec	=	Total tons of waste disposed between Jan-Dec
Ex.: 8	x	2	x	2	x	0.1	=	3.2	x	52	=	166.4

Printed on Recycled Paper

Office/Facility Name: _____

Annual Business Recycling Reporting Survey
JANUARY 1st – DECEMBER 31st

Size of dumpster (yd³s)	X	No. of this Type of dumpster	X	Frequency of pick-up/week	X	Yd³s to tons (0.1) ratio	=	Tons/week	X	No. of weeks /year operating between Jan-Dec	=	Total tons of waste disposed between Jan-Dec
	x		x		x		=		x		=	
	x		x		x		=		x		=	
	x		x		x		=		x		=	
	x		x		x		=		x		=	
Total Solid Waste Disposed from Your Agency Location												**tons**

B1a. Recycling Materials

CATEGORY	MATERIALS	TONS RECYCLED *	CONTRACTOR/MARKET for MATERIAL
COMMINGLED CONTAINERS	Commingled Containers		
COMPOSTED/ MULCHED [1]	Food Waste (composted/mulched only – also see "Food Waste" in "Other Materials")		
	Landclearing Debris		
	Landscaping Debris — Brush and Branches		
	Landscaping Debris — Grass		
	Landscaping Debris — Leaves		
	Landscaping Debris — Mixed Yard Waste		
	MSW Composted [2]		
	Wood Materials [3]		
	Other [5]:		
GLASS	Brown Glass		
	Clear Glass		
	Green Glass		
	Mixed Glass		
	Fluorescent Lights		
	Other [5]:		
METALS	Aluminum Cans		

Printed on Recycled Paper

CppwcrlDwukpguu'Tge{erkpi 'Tgrqtvkpi 'Uwtxg{ "
LCPWCT['3ᵁᵂ'ő'FGEGODGT'53ᵁᵂ'

ECVGIQT["	OCVGTKCNU'	**FCBG** TGE[ENGF'; "	EQPVTCEVQT10CTMGV" hqt 'OCVGTKCN"
	Ngcf /Cekf "*Cwvq+'Dcwgtkgu"		
	Nkvj q 'Rncvgu"		
	O kzgf "Ecpu"*Cnwo kpwo "("Vkp'Uvggn+"		
	Qkn'Hkngtu"		
	Uetcr 'Cwvqo qdkngu"		
	Uetcr 'O gvcn'		
	Vkp'Uvggn'Ecpu"		
	Y j kvg'I qqfu"		
	Qvj gt '⁷<'		
RCRGT"	Eqttwicvgf "Ectfdqctf "		
	O ci c|kpgu"		
	O kzgf "Rcr gt"		
	P gy ur cr gt"		
	Qhhkeg'Eqo r wvgt'Y j kvg'Rcr gt"		
	Vgngr j qpg'F ktgevqtkgu"		
	Qvj gt '⁷<'		
RNCUVKE"	Hko "Rncuvke"		
	O kzgf "Rncuvke"dqvngu"		
	Uj tkpm'Y tcr "		
	Qvj gt '⁷<'		
QVJ GT" **O CVGTKCNU'**	Cpvktgg| g"		
	Cpko cr'Rtqvgkp'Uqprf "Hcv"		
	Curj cnv"		
	Eqcr'Cuj "*Hn('Cuj .'Rq||qmcp+"		
	Eqpetgvg"		
	Eqpuvtwevkqp"("F go qrkvkqp'F gdtku"		

CppwcnlDwukpguu'Tge{erkpi 'Tgr qtvkpi 'Uwtxg{
LCP WCT['3uu'ö'FGEGO DGT'53uu'

ECVGI QT[	O CVGTKCNU	**HDBG** TGE[ENGF,	EQPVTCEVQT1O CTMGV hqt 'O CVGTKCN
	GngevtqpkeulEqo rwvgt'Gs wkro gpv		
	Hqqf "Y cuvg"*pqp- eqo r quvgf 1o wej gf +"		
	Kpf wuvtkcnlHnwkf u"*e.g.."engcpkpi "r guvkekf gu."gve+"		
	O UY /vq-Gpgti {'Cuj		
	Rcmgvu"*Tghwtdkuj gf +"		
	Ugy ci g"Unwf i g		
	Uqkn		
	Vgzvkrgu		
	Vqpgt'Ectvtkf i gu		
	Vktgu"*Tge{ engf +**6**		
	Vktgu"*Tgvtgcf +"		
	Vktgu"*Ego gpv'Mkrp"ö'34 ' 'qh'vqvcn+"		
	Y cuvg'Qkn		
	Qvj gt'**7**<		
	Qvj gt'**7**<		
	Qvj gt'**7**<		
TOTAL (Report in "Total from Table B1a")		vqpu'	

, Qpg 'vqp"? '4.222 'r qwpf u0"Ugg 'xqnwo g'vq 'y gki j v'eqpxgtukqp 'vcdng 'qp 'r ci g": 'vq 'j gnr 'f gvgto kpg 'vqppci gu0

3 Vj g 'o cvgtkcn'o wuv'dg 'eqo r quvgf 'qt 'o wej gf 'cpf 'o ctmgvgf #"**Uko r r 'urtgcf kpi 'c 'o cvgtkcrllp 'c 'hkgrf 'FQGU'PQV'eqpuvkwwg c 'eqo r quvgf 'o cvgtkcrll'cpf 'f qgu'pqv'eqwpv'cu'c 'tge{encdrg 'o cvgtkcn0"** Eqo r quvgf 'o wej gf 'o cvgtkcn'vj cv'gpf u'wr "
dgkpi 'f kur qugf 'kp 'c 'ncpf hkrrf qgu'pqv'eqwpv'cu'c 'tge{encdrg 'o cvgtkcn0

4 Eqpukuv'qh'pqp-uqwteg/ugr ctcvgf 'O UY 'o cvgtkcn'*i.e.."vtcuj +0

5 Kpenwf gu'tge{erkpi 'qh'y qqf 'r tqf wevu'*e.g.."r cmgvu."etcvgu."dcttgnu."y qqf 'hwtpkwtg."ecpgu."etwej gu."gve0+0"**O cvgtkcnl'o wuv'dg ""o wej gf 'qt 'eqo r quvgf 'QPN[0"**Qvj gty kug."kpenwf g'kp 'õQvj gt 'O cvgtkcnö'ecvgi qt{0

6 Vktgu'vj cv'ctg 'tge{engf 'kpvq 'pgy 'r tqf wevu'eqpvckpkpi 'twddgt"*e.g.."vtcuj 'ecpu."uqtcgi g'eqpvckpgtu."twddgtk{gf 'curj cnv'gve0+. 'cpf '
wug'qh'y j qng 'Vktgu'hqt 'r rc{i tqwpf 'cpf 'tggh'eqpuvtwevkqp0"**Vktgu'ugpv'vq 'cp 'kpekpgtcvqt 'FQ'PQV'eqwpv'cu'tge{erkpi 0**

7 Nkuv'vj g 'o cvgtkcn0"Ki'ur ceg 'ku'pggf gf 'hqt 'cf f kvkqpcnlo cvgtkcnu.'r rgcug 'wug 'Vcdng 'D3d0

D3d0'Qvj gt 'Tge{erkpi 'O cvgtkcnu

Office/Facility Name: _____

Annual Business Recycling Reporting Survey
JANUARY 1st – DECEMBER 31st

CATEGORY / RECYCLABLE (*e.g.*, Metals/Litho Plates)	TONS RECYCLED*	CONTRACTOR/MARKET for MATERIAL
TOTAL (Report in "Total from Table B1b")	tons	

• •

I certify, to the best of my knowledge, that the totals claimed on this form are accurate and based upon actual records. These tonnage records will be made available to MDE for auditing purposes, if requested.

FACILITY CONTACT (or County Contact if completing for the business)

_____   _____
Print Name and Title   Date

Printed on Recycled Paper