

EMP 4.4.6.7
C and D Waste Generation and Recycling Report Form

Section 1 - Follow The Instructions on the Instructions Tab Below - This Form Must Be Typed (No Hand Written Forms Will Be Accepted)

1. Project Number & Title: _____

2. Project Location: _____

3. Contractor's Name: _____

4. Contractor's Phone #: _____

5. Contractor's Mailing Address: _____

6. Page 1 of: _____

7. Date: _____

Section 2 - Construction/Demolition Debris Recycling Information

Description		Quantity Tons	Recycled	NOT RECYCLED				Company Information Contacted	DISPOSAL			
				No Market	No Local Vendors	Not economically feasible	Other Specify/Comments		Landfill Tons	Incinerati on Tons	Waste to Energy Tons	Facility Name and Contact Information
Add Additional Lines or Use the Continuation Page as Needed												
Concrete without rebar												
Concrete with rebar												
Scrap Metals												
Brick												
Wood												
Glass												
Roofing Materials												
Asphalt												

Section 3 - Certification: By Signing Below, I certify that the information above is true and accurate; will be used as stated above; and funding is available.

8. Contractor Representative's Name _____ 9. Phone Number _____ 10. Contractor Representative's Signature _____ 11. Date _____

12. Contractor Representative's Name: _____

13. Contracting Officer's/COR's/AEC/UEC/HWC Name _____ 14. Phone Number _____ 15. Contracting Officer's/COR's/AEC/UEC/HWC Signature _____ 16. Date _____

17. Contracting Officer's/COR's/AEC/UEC/HWC Email Address: _____

EMP 4.4.6.7 C and D Waste Generation and Recycling Report Form Continuation Page

[illegible]

To Complete This Form - All Instructions Must Be Followed

This Form is to be Used By All Contractors

All Forms Will Be Automatically Rejected for Any of the Following Reasons:

All Forms must be typed

All Forms must be certified by the Contracting Officer/COR or AEC/UEC/HWC

All Required Items must be completed: Make Sure you Read Carefully to fill-in only the Blocks required.

Item Name	Required	Item Instructions
Section 1 - Follow The Instructions on the Instructions Tab - This Form Must Be Typed (No Hand Written Forms Will Be Accepted)		
1. Project Number & Title:	REQ	Self-explanatory
2. Project Location:	REQ	Self-explanatory
3. Contractor's Name:	REQ	Self-explanatory
4. Contractor's Phone #:	REQ	Self-explanatory
5. Contractor's Mailing Address:	REQ	Self-explanatory
6. Page #s	REQ	Please Ensure the Total Number of Page are numbered correctly
7. Date	REQ	Self-explanatory

Section 2 - Continued: Waste Disposal IAW EMP 4.4.6.8

Recycled Items

Provide list of items and weight of items recycled.

Not Recycled Items

Provide list of items and weight of items not recycled.

Select one of the following:

No Market

No Local Vendors

Not economically feasible

Other Specify/Comments

Provide the Company Contacted Information

Disposal

Provide list of items and weight of items not recycled.

Select one of the following:

Landfill Tons

Incineration Tons

Waste to Energy Tons

Provide the Disposal Company Contact Information

Section 3 - Certification

8. Contractor Representative's Name	REQ	Self-explanatory
9. Phone Number	REQ	Self-explanatory
10. Contractor Representative's Signature	REQ	Self-explanatory
11. Date	REQ	Self-explanatory
12. Contractor Representative's Name:	REQ	Self-explanatory
13. Contracting Officer's/COR's/AEC/UEC/HWC Name	REQ	Self-explanatory
14. Phone Number	REQ	Self-explanatory
15. Contracting Officer's/COR's/AEC/UEC/HWC Signature	REQ	Self-explanatory
16. Date	REQ	Self-explanatory
17. Contracting Officer's/COR's/AEC/UEC/HWC Email Address:	REQ	Self-explanatory

