



Department of Energy & Environmental Protection
Bureau of Materials Management & Compliance Assurance
 79 Elm Street - 4th Floor
 Hartford, Connecticut 06106-5127

Annual Municipal Recycling Report

This report regarding municipal recycling activity for the previous fiscal year is **required** to be submitted by September 30th of each year to the Connecticut Department of Energy & Environmental Protection (DEEP) -CGS Sec 22a-220(h).

Parts 1 through 5 can be completed and submitted to the CT Department of Energy & Environmental Protection via any **one** of the following methods

- Fax (860) 424-4059 Attn: Solid Waste Facility Reporting- Paula Guerrero; **Or**
- Scanned & E-Mailed To DEEP.Solid&HazWasteReports@ct.gov (Do not send hard copy if sending electronically); **Or**
- Land-Mailed to CT DEEP; Bureau of MM&CA – Recycling Office; 79 Elm Street - 4th Floor; -Hartford, CT 06106-5127; Attn: Solid Waste Facility Reporting- Paula Guerrero.
 - Must be double-sided and preferably on paper with a minimum 30% post-consumer content.
 - PLEASE CONSERVE PAPER – Do not send unused pages or sections. Indicate (at bottom of this page) the total number of pages in your report.

Call Paula Guerrero (860 424-3334) to confirm receipt of your report.

Part 6 needs to be completed electronically on SurveyMonkey and will provide a snapshot of municipal compliance with basic statutory recycling requirements and help identify areas that need improvement. **The link to Part 6 will be e-mailed to municipal recycling contacts sometime in August.**

Questions? Visit the CT DEEP Website or contact Paula Guerrero (see above) or Judy Belaval (860) 424-3237.

1.	Name of City/Town	Bristol		
	Mailing Address:	Dept. of Public Works, 111 North Main Street	Zip Code	06010
2.	Recycling Contact: Name:	Mark Mehall		
	Title:	Supt., Solid Waste Operations		
	Fax #:	(860) 584-3838	Email:	MarkMehall@bristolct.gov
			Phone #:	(860) 584-7792 x 4105
3.	Reporting Period:	July 1, 20 16 through June 30, 20 17		
	Number of Pages in This Report:	9		

OFFICE USE ONLY: ✓ = Complete M = Missing I = Incomplete C = Called						
Part 1a	Part 1b	Part 2	Part 3	Part 4	Part 5	Part 6
COMMENTS						



PART 1: Items Recycled (Please report disaster debris as a separate material type)

Materials Recycled from Residential Sources

(A) Recyclable Item	(B) Name/Address - First Destination for Residential Recyclables <small>(after the municipal transfer station or municipal compost site, if applicable)</small>	(C) Amount Recycled	(D) Units of Measure
<p>Bottles/Cans/Cartons/Paper (BCP)</p> <p><i>First Destination Is a CT Permitted SW Facility</i></p> <p><input checked="" type="checkbox"/> Includes Res & NonRes</p>	<p>Destination: <u>Automated Materials Handling</u> Address: <u>633 Christian Lane, Berlin, CT 06037</u> Check all that apply: <input checked="" type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately</p>	NA	NA
	<p>Destination: <u>At</u> Address: <u></u> Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately</p>	NA	NA
	<p>Destination: <u></u> Address: <u></u> Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately</p>	NA	NA
<p>Bottles/Cans/Cartons/Paper</p> <p><i>First Destination Is Not a CT Permitted SW Facility</i></p> <p><input checked="" type="checkbox"/> Tonnage Includes Res & NonRes</p>	<p>Destination: <u></u> Address: <u></u> Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately <i>If unable to report tonnage – then please provide Hauler Name and Contact Info: <u></u></i></p>		
	<p>Destination: <u></u> Address: <u></u> Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately <i>If unable to report tonnage – then please provide Hauler Name and Contact Info: <u></u></i></p>		
<p>Storage Batteries (vehicle batteries) Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program</p> <p><input checked="" type="checkbox"/> Tonnage Includes Res & NonRes</p>	<p>Destination: <u>Liberty Recycling</u> Address: <u>551 Broad Street, Bristol, CT 06010</u></p>	264	6464
	<p>Destination: <u></u> Address: <u></u></p>		
<p>Scrap Metal - Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program</p> <p><input checked="" type="checkbox"/> Tonnage Includes Res & NonRes</p>	<p>Destination: <u>Liberty Recycling</u> Address: <u>551 Broad Street, Bristol, CT 06010</u></p>	552.88	Tons
	<p>Destination: <u></u> Address: <u></u></p>		
<p>Waste Oil (gallons) Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program</p> <p><input checked="" type="checkbox"/> Includes Res & NonRes</p>	<p>Destination: <u>Western Oil</u> Address: <u>P.O. Box 518, Lincoln, RI 02865</u></p>	1235	Gallons
<p>Used Textiles (clothing, shoes, linens etc.) Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program</p> <p><input checked="" type="checkbox"/> Tonnage Includes Res & NonRes</p>	<p>Destination: <u>ARAB Recycling LLC</u> Address: <u>237 East Aurora Street, Waterbury, CT 06708-2044</u></p>	1.02	Tons
<p>Electronics Generated in the municipality and recycled thru a program operated on municipally</p>	<p>Destination: <u>Ecovanta</u> Address: <u>13 Myrtle Street, Bristol, CT 06010</u></p>	112.61	Tons

Materials Recycled from Residential Sources

(A) Recyclable Item	(B) Name/Address - First Destination for Residential Recyclables <small>(after the municipal transfer station or municipal compost site, if applicable)</small>	(C) Amount Recycled	(D) Units of Measure
owned property or thru a municipally owned or contracted program Check Types included: <input type="checkbox"/> CEDs (CT e-Waste Recycling Program) <input type="checkbox"/> Non-CEDs <input type="checkbox"/> Other- Specify: _____ <input type="checkbox"/> Other- Specify: _____ <input type="checkbox"/> Tonnage Includes Res & NonRes	Destination: _____ Address: _____	_____	_____
<input type="checkbox"/> Cd Batteries Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally owned or contracted program <input type="checkbox"/> Includes Res & NonRes	Destination: Liberty Recycling Address: 551 Broad Street, Bristol, CT 06010	189	lbs
<input type="checkbox"/> &D Waste Recycled Specify type: _____	Destination: _____ Address: _____	_____	_____
For the following questions regarding source separated organics: - If source separated organics or any products (compost, mulch, etc.) made from those organics by the municipality are sent to a CT permitted composting or recycling facility, please include information re the receiving facility so that the tonnage is not 2x counted. Any organic material burned (with or without energy production) cannot be counted as recycled!!!!			
<input type="checkbox"/> Incoming Leaves Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally owned or contracted program. CY=0.25 tons <input type="checkbox"/> Tonnage Includes Res & NonRes	How are leaves managed? <input type="checkbox"/> Leaves are composted at municipal compost site <input type="checkbox"/> Finished compost is used on municipal sites <input type="checkbox"/> Finished compost is given or sold to residents <input checked="" type="checkbox"/> Finished compost is sold or sent to a permitted composting or recycling facility Destination: Supreme Forest Products Address: 49 DePaolo Drive, Southington, CT 06489	1,239.61	Tons
	<input checked="" type="checkbox"/> Leaves are sent to a permitted composting or recycling facility Destination: Supreme Forest Products Address: 49 DePaolo Drive, Southington, CT 06489	2,202.83	Tons
	<input type="checkbox"/> Other - Describe _____ Destination: _____ Address: _____	_____	_____
<input type="checkbox"/> Brush (from yard waste) Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally owned or contracted program CY(loose) = 0.15 tons <input type="checkbox"/> Tonnage Includes Res & NonRes	How is the brush managed? <input type="checkbox"/> chipped and used as mulch on municipal sites <input type="checkbox"/> chipped and given to residents <input type="checkbox"/> chipped and used as bulking agent in municipal compost site <input checked="" type="checkbox"/> sent to a permitted composting or recycling facility Destination: Supreme Forest Products Address: 49 DePaolo Drive, Southington, CT 06489	783.61	Tons
	<input type="checkbox"/> Other - Describe _____	_____	_____
<input type="checkbox"/> Grass Clippings Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally owned or contracted program <input type="checkbox"/> Tonnage Includes Res & NonRes	How are grass clippings managed? <input type="checkbox"/> Grass clippings are composted at municipal compost site <input type="checkbox"/> Grass clippings are sent to a permitted composting or recycling facility Destination: _____ Address: _____	_____	_____
<input type="checkbox"/> Yard Waste Mix Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally owned or contracted program Check Types included:	How is mixed yard waste managed? <input type="checkbox"/> Mixed yard waste is composted at municipal compost site <input type="checkbox"/> Finished compost is used on municipal sites <input type="checkbox"/> Finished compost is given or sold to residents <input type="checkbox"/> Finished compost is sold or sent to a permitted composting or recycling facility Destination: City of Bristol Solid Waste Transfer Station Address: 685 Lake Avenue, Bristol, CT 06010	134.99	Tons

Materials Recycled from Residential Sources

(A) Recyclable Item	(B) Name/Address - First Destination for Residential Recyclables <small>(after the municipal transfer station or municipal compost site, if applicable)</small>	(C) Amount Recycled	(D) Units of Measure
<input checked="" type="checkbox"/> Grass; <input checked="" type="checkbox"/> Brush; <input checked="" type="checkbox"/> Leaves <input type="checkbox"/> Tonnage Includes Res. & NonRes	<input checked="" type="checkbox"/> Mixed yard waste is sent to a permitted composting or recycling facility Destination: <u>Supreme Forest Products</u> Address: <u>49 DePaolo Drive, Southington, CT 06489</u>	2,391.97	Tons
	<input type="checkbox"/> Mixed yard waste - Other - Describe _____ Destination: _____ Address: _____		
Food Scraps Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program <input type="checkbox"/> Tonnage Includes Res. & NonRes	Destination: _____ Address: _____		
	Destination: _____ Address: _____		
Disaster Debris Clean Wood Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program <input type="checkbox"/> Tonnage Includes Res. & NonRes	Destination: _____ Address: _____		
	Destination: _____ Address: _____		
Paint Generated in the municipality and recycled through the CT EPR program or other program on municipally owned property or thru a municipally run or contracted program <input type="checkbox"/> Tonnage Includes Res. & NonRes	Destination: <u>PaintCare/Clean Harbors</u> Address: <u>12 Farmers Park Road, East Hartford, CT</u>	10.41	Tons
	Destination: <u>Willamantic Waste</u> Address: <u>1590 Main St., Willamantic, CT 06226</u>	61.44	Tons
Other - Specify: Hard Cover Books Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program <input type="checkbox"/> Tonnage Includes Res. & NonRes	Destination: <u>Better World Books</u> Address: <u>11680 Great Oakes Way, Suite 250, Alpharetta, GA 30022</u>	2.99	Tons
	Destination: <u>Paraco Gas</u> Address: <u>810 Access Road, Stratford, CT 06615</u>	1.80	Tons

OTHER RECYCLABLES (i.e. Recyclables Not Listed Above and/or Material Recycled Only from Non-Residential Sources)

(A) Recyclable Item	(B) Name/Address - First Destination for Other Recyclables <small>(after the municipal transfer station or municipal compost site, if applicable)</small>	(C) Amount Recycled	(D) Units of Measure
Non-Residential Bottles/Cans/Paper (BCP) First Destination Is a CT Permitted SW Facility	Destination: _____ Address: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately	NA	NA
	Destination: _____ Address: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately	NA	NA
	Destination: _____ Address: _____	NA	NA

OTHER RECYCLABLES (i.e. Recyclables Not Listed Above and/or Material Recycled Only from Non-Residential Sources)

(A) Recyclable Item	(B) Name/Address - First Destination for Other Recyclables (after the municipal transfer station or municipal compost site, if applicable)	(C) Amount Recycled	(D) Units of Measure
	Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately		
Non-Residential Bottles/Cans/Paper First Destination Is Not a CT Permitted SW Facility	Destination: _____ Address: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately If unable to report tonnage – then please provide Hauler Name and Contact Info: _____		
	Destination: _____ Address: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately If unable to report tonnage – then please provide Hauler Name and Contact Info: _____		
Other Specify Type of Recyclable:: <input type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential Includes Res & NonRes	Destination: _____ Address: _____		
Other Specify Type of Recyclable Antifreeze <input type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential Includes Res & NonRes	Destination: <u>Western Oil</u> Address: <u>P.O. Box 513, Lincoln, RI 02865</u>	<u>1.86</u>	<u>Tons</u>
Other Specify Type of Recyclable <input type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential Includes Res & NonRes	Destination: _____ Address: _____		

PART 2: Grasscycling & Home Composting If your municipality has active, ongoing grasscycling (leaving grass clippings on the lawn) and/or home composting programs, please check the appropriate boxes below. An estimate of the amount home composted/grasscycled will be added to your municipality's waste diversion tonnages. If you have determined (through measurement or survey) the actual amount home composted and/or grasscycled, please report that annual tonnage on Part #1 (pages 2 thru 5) of this form and specify "grasscycling" and/or "home composting" in the row(s) labeled "other", and attach a brief description of how those tonnages were calculated. Want more information re home composting or grasscycling? Visit the DEEP [composting webpage](#) or call the DEEP Recycling Office at (860) 424-3366

Program or Activity Type	Home Composting of Yard Trimmings & Food Scraps	Grasscycling (Leaving grass clippings on the lawn)
Land Mailings of Educational Material	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Frequency of Mailings this FY: _____	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Frequency of Mailings this FY: _____
Distribution (other than mailing) of Brochures and Other Educational Material (including information on the municipal web site)	This FY: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No How Distributed: <u>Available City Hall Front Desk & City Web Site</u>	This FY: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No How Distributed: <u>Available City Hall Front Desk & City Web Site</u>
Showing of Home Composting and/or Grasscycling Video(s) either on Local Cable Access or Other Public Media	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Frequency of Showing this FY: _____ Where Shown: _____	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Frequency of Showing this FY: _____ Where Shown: _____
Master Composting Program	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Workshops, Demonstrations, etc.	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description: _____	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description: _____
Distribution or Subsidizing of Home Composting Bins, and/or Mulching Blades or Mulching Mowers for Residents	This FY: <input type="checkbox"/> Yes <input type="checkbox"/> No Number of Bins Distributed or Subsidized in this Reporting Fiscal Year: _____ Month(s)/Year of Distribution: _____	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Number of Mulching Blades or Mulching Mowers Distributed or Subsidized this Reporting Fiscal Year : _____
Other Programs or Activities Promoting Grasscycling or Home Composting	This FY: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Description: <u>The City of Bristol offers curbside yard waste collection by subscription</u>	This FY: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Description: <u>The City of Bristol offers curbside yard waste collection by subscription</u>

PART 3: Information Regarding Collectors (haulers) of solid waste (SW) and recyclables operating within the borders of the municipality.

Please list below the haulers or collectors operating in your municipality and provide their contact information, including their e-mail address. (Please duplicate this page if additional space is needed.)

Name of Hauling Company	Owner of Hauling Company	Mailing Address & E-mail Address	Contact Name	Phone Number	Did Hauler Register in Your Municipality in FY2017?	Did Hauler Submit FY2017 Annual Report to Your Municipality?	Other CT Municipalities in which the Collector Hauls SW &/or RECY (if more than three towns, list CT regions - e.g. NW-CT, SE-CT, etc.)	Types of SW &/or RECY Hauled by the Collector (e.g. MSW, C&D, Special Landclearing, Yard Waste, Food Scraps, Recyclables, etc.) Check all that apply.	Source of SW & RECY Hauled (e.g. Residential, Non-Residential) Check all that apply.
New England Waste Management Authority 1000 Main Street Providence, RI 02903 Phone: (401) 863-1000	New England Waste Management Authority 1000 Main Street Providence, RI 02903 Phone: (401) 863-1000	Mailing: (401) 863-1000 E-mail: newengland@newenglandwaste.com	Contact Name: [REDACTED]	Phone Number: [REDACTED]	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	[REDACTED]	MSW; C&D; Yard Waste Landclearing; Food Scraps Recyclables; Special Waste Other - Specify: [REDACTED]	MSW - Residential MSW - Non Residential Recyclables - Residential Recyclables - Non-Residential
[REDACTED]	[REDACTED]	Mailing: [REDACTED] E-mail: [REDACTED]	[REDACTED]	[REDACTED]	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	[REDACTED]	MSW; C&D; Yard Waste Landclearing; Food Scraps Recyclables; Special Waste Other - Specify: [REDACTED]	Residential Non-Residential
[REDACTED]	[REDACTED]	Mailing: [REDACTED] E-mail: [REDACTED]	[REDACTED]	[REDACTED]	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	[REDACTED]	MSW; C&D; Yard Waste Landclearing; Food Scraps Recyclables; Special Waste Other - Specify: [REDACTED]	Residential Non-Residential
[REDACTED]	[REDACTED]	Mailing: [REDACTED] E-mail: [REDACTED]	[REDACTED]	[REDACTED]	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	[REDACTED]	MSW; C&D; Yard Waste Landclearing; Food Scraps Recyclables; Special Waste Other - Specify: [REDACTED]	Residential Non-Residential
[REDACTED]	[REDACTED]	Mailing: [REDACTED] E-mail: [REDACTED]	[REDACTED]	[REDACTED]	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	[REDACTED]	MSW; C&D; Yard Waste Landclearing; Food Scraps Recyclables; Special Waste Other - Specify: [REDACTED]	Residential Non-Residential
[REDACTED]	[REDACTED]	Mailing: [REDACTED] E-mail: [REDACTED]	[REDACTED]	[REDACTED]	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	[REDACTED]	MSW; C&D; Yard Waste Landclearing; Food Scraps Recyclables; Special Waste Other - Specify: [REDACTED]	Residential Non-Residential

Part 4: Solid Waste Disposed (Please Report Disaster Debris Separately From Other Material)

Please indicate the first destination(s) (landfill, resource recovery facility, or regional multi-town transfer station) where solid waste generated in your town is received for disposal.

- If first destination is your municipal transfer station – report the first destination of waste sent out from your transfer station.
- If first destination is out-of-state, report (in Column C) the tonnage delivered to that facility.
 - If you are unable to get information regarding tonnage sent to that out-of-state facility, report information regarding the hauler who transported that waste out-of-state.

(A) Type of Solid Waste Disposed	(B) Name and Address of First Destination (i.e. Receiving Facility) <small>(after the municipal transfer station, if applicable)</small>	(C) Tons this FY
MSW! • First Destination (after the municipal transfer station, if applicable) Is a CT Permitted SW Facility	Facility: <u>Covanta Waste</u> Address: <u>170 Enterprise Drive, Bristol, CT 06010</u>	NA
	Facility: <input type="text"/> Address: <input type="text"/>	NA
Oversized MSW! - (furniture, mattresses, carpets, etc) • First Destination (after the municipal transfer station, if applicable) Is a CT Permitted SW Facility	Facility: <input type="text"/> Address: <input type="text"/>	NA
	Facility: <input type="text"/> Address: <input type="text"/>	NA
MSW! • First Destination (after the municipal transfer station, if applicable) Is Not a CT Permitted SW Facility	Facility: <input type="text"/> Address: <input type="text"/> If unable to report tonnage to this first destination (located out-of-state) – please provide Hauler Name and Contact Info: <input type="text"/>	Tons: <input type="text"/>
	Facility: <input type="text"/> Address: <input type="text"/> If unable to report tonnage to this first destination (located out-of-state) – please provide Hauler Name and Contact Info: <input type="text"/>	Tons: <input type="text"/>
Oversized MSW! - (furniture, mattresses, carpets, etc) • First Destination (after the municipal transfer station, if applicable) Is Not a CT Permitted SW Facility	Facility: <input type="text"/> Address: <input type="text"/> If unable to report tonnage to this first destination (located out-of-state) – please provide Hauler Name and Contact Info: <input type="text"/>	Tons: <input type="text"/>
	Facility: <input type="text"/> Address: <input type="text"/> If unable to report tonnage to this first destination (located out-of-state) – please provide Hauler Name and Contact Info: <input type="text"/>	Tons: <input type="text"/>
CONSTRUCTION & DEMOLITION WASTE (after the municipal transfer station, if applicable)	Facility: <u>CWPM</u> Address: <u>415 Christian Lane, Berlin, CT</u>	Tons: <u>178.15</u>
	Facility: <input type="text"/> Address: <input type="text"/>	Tons: <input type="text"/>
DISASTER DEBRIS (after the municipal transfer station, if applicable)	Facility: <input type="text"/> Address: <input type="text"/>	Tons: <input type="text"/>
LANDCLEARING DEBRIS (logs and stumps) (after the municipal transfer station, if applicable)	Facility: <input type="text"/> Address: <input type="text"/>	Tons: <input type="text"/>

(A) Type of Solid Waste Disposed	(B) Name and Address of First Destination (i.e. Receiving Facility) (after the municipal transfer station, if applicable)	(C) Tons this FY
SPECIAL WASTE ²	Facility: <input type="text"/> Address: <input type="text"/>	Tons: <input type="text"/>

¹ MSW is solid waste from residential, commercial and industrial sources; **excluding** hazardous, biomedical, sludge; etc.

² SPECIAL WASTE is any waste other than hazardous or radioactive waste which requires special handling for safe disposal such as sewage treatment, water treatment, and industrial sludges; fly ash and casting sands or slag; contaminated dredge spoils, etc.



Part 5: Certification of Data Reported

Municipality: City of Bristol, CT
20 17

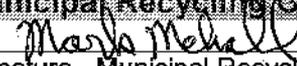
Reporting Period: July 1 2016

June 30,

Certification of document. This document, which is required to be submitted to the Commissioner of Energy and Environmental Protection, shall be signed by the municipal CEO or a duly authorized representative of such CEO, 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."

Municipal Recycling Contact Signature:

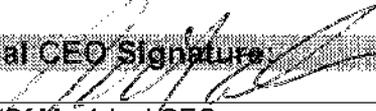

Signature - Municipal Recycling Contact

9/26/17
Date

Mark Mehall, Solid Waste Superintendent
Printed Name - Municipal Recycling Contact

MarkMehall@bristolct.gov
E-mail Address

Municipal CEO Signature:


Signature Of Municipal CEO

9/26/17
Date

Kenneth B. Cockayne, Mayor
Printed Name - Municipal CEO

kencockayne@bristolct.gov
E-mail Address

Part 6: Qualitative Survey Questions re Municipal Recycling Program

- Part 6 survey questions need to be answered electronically on SurveyMonkey. Check your e-mail in August for the link.
- No Internet Access? Contact Paula Guerrero (860) 424- 3334 for a paper version of Part 6.