



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](http://surveymonkey.com). The Part 6 FY2016 questions will provide a baseline snapshot of municipal compliance with basic statutory recycling requirements and will help identify areas that need improvement. The Part 6 survey can be accessed at: <https://www.surveymonkey.com/r/AMRR2016>

Questions? Visit the [CT DEEP Website](http://www.ctdeep.com) 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 St, Bristol, CT	Zip Code 06010
2.	Recycling Contact Name:	David Clark	
	Title:	Supt. Solid Waste Operations DPW	
	Fax #:	(860) 584-3838	Email: davidclark@bristolct.gov Phone #: (860) 584-7792 X105
3.	Reporting Period:	July 1, 20 15 through June 30, 20 16	
	Number of Pages in This Report:	8	

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 (after the municipal transfer station or municipal compost site, if applicable)	(C) Amount Recycled	(D) Units of Measure
Bottles/Cans/Paper (BCP) • First Destination Is a CT Permitted SW Facility <input type="checkbox"/> Includes Res & NonRes	Destination: Automated Materials Handling Address: 633 Christian Lane, Berlin, CT 06037 Check all that apply: <input checked="" type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input checked="" type="checkbox"/> Material Collected Separately	4,961	Tons
	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
Bottles/Cans/Paper • First Destination Is Not a CT Permitted SW Facility <input type="checkbox"/> Tonnage includes Res & NonRes	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: _____		
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 <input type="checkbox"/> Tonnage includes Res & NonRes	Destination: Liberty Recycling Address: 551 Broad Street, Bristol, CT 06010	6.17	Tons
Scrap Metal - 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: Liberty Recycling Address: 551 Broad Street, Bristol, CT 06010	603.96	Tons
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 <input type="checkbox"/> Includes Res & NonRes	Destination: Envirowaste Address: 279 Route 6, Mahopac, NY 10541	1,849.66	Gallons
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 <input type="checkbox"/> Tonnage includes Res & NonRes	Destination: AFAB Recycling LLC Address: 237 East Aurora Street, Waterbury, CT 06708-2044	1.25	Tons
Electronics Generated in the municipality and recycled thru a program operated on municipally	Destination: ECOvanta Address: 13 Myrtle Street, Bristol, CT 06010	136.89	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
<p><i>owned property or thru a municipally run or contracted program</i> Check Types Included:</p> <input checked="" type="checkbox"/> CEDs (CT e-Waste Recycling Program) <input checked="" type="checkbox"/> Non-CEDs <input checked="" type="checkbox"/> Other- Specify: Cord/Battery Powered Devices <input type="checkbox"/> Other- Specify: _____	Destination: _____ Address: _____		
<input type="checkbox"/> Tonnage Includes Res. & NonRes NiCd Batteries <i>Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program</i> <input type="checkbox"/> Includes Res. & NonRes	Destination: Call2Recycle RBRC Address: 1000 Parkwood Circle, Suite 200, Atlanta, GA 30339	100	Lbs
C&D Waste Recycled Specify Type: _____	Destination: _____ Address: _____		
<p>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!!!!</p>			
Incoming Leaves <i>Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program.</i> 1CY=0.25 tons <input checked="" type="checkbox"/> Tonnage Includes Res. & NonRes	How are leaves managed? <input checked="" type="checkbox"/> Leaves are composted at municipal compost site <input checked="" type="checkbox"/> Finished compost is used on municipal sites <input checked="" type="checkbox"/> Finished compost is given or sold to residents	1,217.88	Tons
	<input checked="" type="checkbox"/> Finished compost is sold or sent to a permitted composting or recycling facility Destination: _____ Address: _____		
	<input checked="" type="checkbox"/> Leaves are sent to a permitted composting or recycling facility Destination: City of Bristol Solid Waste Transfer Station Address: 685 Lake Avenue, Bristol, CT 06010		
	<input type="checkbox"/> Other - Describe _____ Destination: _____ Address: _____		
Brush (from yard waste) <i>Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program</i> 1CY(loose) = 0.15 tons <input checked="" type="checkbox"/> Tonnage Includes Res. & NonRes	How is the brush managed? <input checked="" type="checkbox"/> chipped and used as mulch on municipal sites <input checked="" 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 DePalo Drive, Southington, CT 06489	712.26	Tons
	<input type="checkbox"/> Other - Describe _____		
Grass Clippings <i>Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program</i> <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: _____		
Yard Waste Mix <i>Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program</i> Check Types Included:	How is mixed yard waste managed? <input checked="" type="checkbox"/> Mixed yard waste is composted at municipal compost site <input checked="" type="checkbox"/> Finished compost is used on municipal sites <input checked="" 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: City of Bristol Solid Waste Transfer Station Address: 685 Lake Avenue, Bristol, CT 06010	1,979.15	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 checked="" type="checkbox"/> Tonnage includes Res & NonRes	<input type="checkbox"/> Mixed yard waste is sent to a permitted composting or recycling facility Destination: _____ Address: _____	NA	NA
	<input type="checkbox"/> Mixed yard waste - Other - Describe _____ Destination: _____ Address: _____	NA	NA
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: _____	NA	NA
	Address: _____	NA	NA
	Destination: _____	NA	NA
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	Address: _____	NA	NA
	Destination: _____	NA	NA
	Address: _____	NA	NA
Paint 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>PaintCare/Clean Harbors</u>	11.19	Tons
	Address: <u>761 Middle Street, Bristol, CT 06010</u>	NA	NA
Mattresses 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>Mattress Recycling Council/Recyc Mattresses</u>	142.03	Tons
	Address: <u>12 Eastern Park Road, East Hartford, CT</u>	NA	NA
Other - Specify: <u>Hard Cover Books</u> Generated in the municipality and recycled thru a program operated on municipally owned property or thru a municipally run or contracted program <input checked="" type="checkbox"/> Tonnage includes Res & NonRes	Destination: <u>Better World Books</u>	5.49	Tons
	Address: <u>11680 Great Oaks Way, Suite 250, Alpharetta, GA 30022</u>	NA	NA
Other - Specify: <u>Propane Tanks</u> 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>Paraco Gas</u>	3.65	Tons
	Address: <u>810 Access Road, Stratford, CT 06615</u>	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 <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: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately	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
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: Antifreeze <input checked="" type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> Includes Res & NonRes	Destination: Envirowaste Address: 279 Route 6, Mahopac, NY 10541	3.32	Tons
Other Specify Type: _____ <input type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> Includes Res & NonRes	Destination: _____ Address: _____		
Other Specify Type: _____ <input type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> 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.

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: Available City Hall Front Desk & City Web Site	This FY: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No How Distributed: Available City Hall Front Desk & City Web Site
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 checked="" 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: _____ Month(s)/Year of Distribution: _____
Other Programs or Activities Promoting Grasscycling or Home Composting	This FY: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Description: The City of Bristol offers curbside yard waste collection by subscription.	This FY: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Description: The City of Bristol offers curbside yard waste collection by subscription.

If you would like additional information or have questions about home composting or grasscycling, visit the DEEP composting webpage or call the DEEP Recycling Office at (860) 424-3366

PART 3: Information Regarding Collectors (Haulers) of Solid Waste (SW) and Recyclables Operating Within the Borders of the M

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

Name of Hauling Company	Owner of Hauling Company	Mailing Address & E-mail Address	Contact Name	Phone Number	Did Hauler Register in Your Municipality in FY2016?	Did Hauler Submit FY2016 Annual Report To Your Municipality?	Other CT Municipalities in which the Collector Hauls SW &/or RECY (if more than three towns just list CT regions - e.g. NW CT, SECT, etc.)	Type of Hauler La Re O
NOTE: The City of Bristol no longer maintains a list of registered haulers. Haulers register directly with Covanta Bristol and Automated Materials Handling, Inc.		Mailing: [redacted] E-mail: [redacted]	[redacted]	[redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[redacted]	<input type="checkbox"/> M <input type="checkbox"/> La <input type="checkbox"/> Re <input type="checkbox"/> O
[redacted]	[redacted]	Mailing: [redacted] E-mail: [redacted]	[redacted]	[redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[redacted]	<input type="checkbox"/> M <input type="checkbox"/> La <input type="checkbox"/> Re <input type="checkbox"/> O
[redacted]	[redacted]	Mailing: [redacted] E-mail: [redacted]	[redacted]	[redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[redacted]	<input type="checkbox"/> M <input type="checkbox"/> La <input type="checkbox"/> Re <input type="checkbox"/> O
[redacted]	[redacted]	Mailing: [redacted] E-mail: [redacted]	[redacted]	[redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[redacted]	<input type="checkbox"/> M <input type="checkbox"/> La <input type="checkbox"/> Re <input type="checkbox"/> O
[redacted]	[redacted]	Mailing: [redacted] E-mail: [redacted]	[redacted]	[redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[redacted]	<input type="checkbox"/> M <input type="checkbox"/> La <input type="checkbox"/> Re <input type="checkbox"/> O
[redacted]	[redacted]	Mailing: [redacted] E-mail: [redacted]	[redacted]	[redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[redacted]	<input type="checkbox"/> M <input type="checkbox"/> La <input type="checkbox"/> Re <input type="checkbox"/> O
[redacted]	[redacted]	Mailing: [redacted] E-mail: [redacted]	[redacted]	[redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	[redacted]	<input type="checkbox"/> M <input type="checkbox"/> La <input type="checkbox"/> Re <input type="checkbox"/> O

Part 4: Solid Waste Disposed (Please Report Disaster Debris Separately From Other Material)
 Please indicate 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 - list first destination after waste leaves your transfer station.
- If first destination is out-of-state, report in Column (C) 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) (after the municipal transfer station, if applicable)	(C) Tons
MSW¹ • First Destination (after the municipal transfer station, if applicable) is a CT Permitted SW Facility	Facility : <u>Covanta Bristol</u> Address: <u>170 Enterprise Drive, Bristol, CT 06010</u>	18,751
Oversized MSW¹ - (furniture, mattresses, carpets, etc) • First Destination (after the municipal transfer station, if applicable) is a CT Permitted SW Facility	Facility : Address:	NA
MSW¹ • First Destination (after the municipal transfer station, if applicable) is Not a CT Permitted SW Facility	Facility : Address: if unable to report tonnage to this first destination (located out-of-state) – please provide Hauler Name and Contact Info:	Tons:
Oversized MSW¹ - (furniture, mattresses, carpets, etc) • First Destination (after the municipal transfer station, if applicable) is Not a CT Permitted SW Facility	Facility : Address: if unable to report tonnage to this first destination (located out-of-state) – please provide Hauler Name and Contact Info:	Tons:
CONSTRUCTION & DEMOLITION WASTE (after the municipal transfer station, if applicable)	Facility: <u>CWPM</u> Address: <u>415 Christian Lane, Berlin, CT</u>	Tons: 200.52
DISASTER DEBRIS (after the municipal transfer station, if applicable)	Facility: Address:	Tons:
LANDCLEARING DEBRIS (after the municipal transfer station, if applicable) (Logs & Stumps)	Facility: Address:	Tons:

(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
SPECIAL WASTE?	Facility: Don Stevens Tire Co. Address: 60 Curtiss Street, Southington, CT 06489	Tons: 48.89

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: Bristol

Reporting Period: July 1 2015

June 30, 20 16

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

Date

8/5/16

Printed Name - Municipal Recycling Contact

David Clark - Supt. Solid Waste Operations DPW

davidclark@bristolct.gov

Municipal CEO Signature:

Signature Of Municipal CEO

Date

8-5-16

Printed Name - Municipal CEO

Ken Cockayne - Mayor

kencockayne@bristolct.gov

Part 6: Qualitative Survey Questions re Municipal Recycling Program

- **Part 6 survey questions need to be answered electronically on [surveymonkey](https://www.surveymonkey.com/r/AMRR2016)** The Part 6 survey can be accessed at: <https://www.surveymonkey.com/r/AMRR2016>.
- **No Internet Access? Contact Paula Guerrero (860) 424- 3334 for a paper version of Part 6.**