



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).

- **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: Paula Guerrero **or**
 - 📧 Scanned and e-mailed to paula.guerrera@ct.gov (Do not send hard copy if sending electronically); **or**
 - ✉ Land-mailed (DEEP-MMCA – Recycling Office-79 Elm Street - 4th Floor-Hartford, CT 06106-5127 Attn: Paula Guerrero or Judy Belaval) (Must be double sided and preferably on paper with a minimum 30% post-consumer content).
 - **PLEASE CONSERVE PAPER – Please delete unused pages.** Indicate (at bottom of this page) the total number of pages in your report.
 - **Call Paula Guerrero (860 424-3334) to confirm receipt of report by DEEP**
- **Part 6** needs to be completed electronically – Click [here](#) to access FY2015 **Part 6** electronically

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:	111 North Main Street
	State:	CT Zip Code 06010
2.	Recycling Contact:	
	Name:	David Clark
	Title:	Supt. Solid Waste Operations
	Fax #:	(860) 584-3838
	Email:	davidclark@ci.bristol.ct.us
3.	Reporting Period:	July 1, 2014 through June 30, 2015
	Number of Pages in This Report:	12

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) 1a:

Materials Recycled from Residential Sources

(A) Recyclable Item	(B) Name/Address - <i>First Destination for Residential Recyclables</i> (after the municipal transfer station or municipal compost site, if applicable)	(C) Amount Recycled	(D) Units of Measure (Use drop down)
<p>Bottles/Cans/Paper (BCP)</p> <p><input checked="" type="checkbox"/> First Destination Is a CT Permitted SW Facility</p> <p>Please check types of Residential BCP collected for recycling:</p> <p><input type="checkbox"/> X Glass & Metal Containers</p> <p><input type="checkbox"/> X Plastic #1 Containers</p> <p><input type="checkbox"/> X Plastic #2 Containers</p> <p><input type="checkbox"/> X Plastics #s 1-7</p> <p><input type="checkbox"/> X Paper Beverage Cartons</p> <p><input type="checkbox"/> X Newspaper</p> <p><input type="checkbox"/> X Cardboard</p> <p><input type="checkbox"/> X Discarded Mail</p> <p><input type="checkbox"/> X Grey boxboard (e.g. cereal boxes)</p> <p><input type="checkbox"/> X Magazines</p> <p><input type="checkbox"/> X Phone Books</p> <p><input type="checkbox"/> X Office Paper</p> <p><input type="checkbox"/> X Other: Telephone books</p> <p>Other:</p> <p><input type="checkbox"/> <i>Includes Res & NonRes</i></p>	<p>Destination: Murphy Road LLC</p> <p>Address: 633 Christian Lane – Berlin, CT</p> <p>Check all that apply:</p> <p><input checked="" type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input checked="" type="checkbox"/> Material Collected Separately</p> <hr/> <p>Destination:</p> <p>Address:</p> <p>Check all that apply:</p> <p><input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately</p> <hr/> <p>Destination:</p> <p>Address:</p> <p>Check all that apply:</p> <p><input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately</p>	<p>4,618</p> <p>NA</p> <p>NA</p>	<p>Tons</p> <p>NA</p> <p>NA</p>
<p>Bottles/Cans/Paper</p> <p><input type="checkbox"/> First Destination Is Not a CT Permitted SW Facility</p> <p>Select from Dropdown Menu <input type="checkbox"/></p> <p>If other –specify:</p> <p><input type="checkbox"/> <i>Tonnage Includes Res & NonRes</i></p>	<p>Destination:</p> <p>Address:</p> <p>If unable to report tonnage – then please provide Hauler Name and Contact Info:</p>		

Bottles/Cans/Paper <input type="checkbox"/> First Destination Is Not a CT Permitted SW Facility Select from Dropdown Menu <input type="checkbox"/> If other -specify: <input type="checkbox"/> <i>Tonnage Includes Res & NonRes</i>	Destination: Address: If unable to report tonnage – then please provide Hauler Name and Contact Info:		
Storage Batteries (vehicle batteries) <i>thru a program operated on municipal property or thru a municipally run or contracted program</i> <input type="checkbox"/> <i>Tonnage Includes Res & NonRes</i>	Destination: Liberty Recycling Address: 551 Broad Street, Bristol, CT 06010	3.88	Tons
Scrap Metal - thru a program operated on municipal property or thru a municipally run or contracted program <input type="checkbox"/> <i>Tonnage Includes Res & NonRes</i>	Destination: Liberty Recycling 551 Broad Street, Bristol, CT 06010 (Includes Iron, Aluminum & Copper/Brass) Address:	385.93	Tons
Waste Oil (gallons) <i>thru a program operated on municipal</i>	Destination: EnviroWaste 279 Route 6, Mahopac, NY 10541 Address:	3,170	Gallons

(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 <small>(Use drop down)</small>
<i>property or thru a municipally run or contracted program</i> <input type="checkbox"/> <i>Includes Res & NonRes</i>			
Used Textiles (clothing, shoes, linens etc.) <i>thru a program operated on municipal property or thru a municipally run or contracted program</i> <input type="checkbox"/> <i>Tonnage Includes Res & NonRes</i>	Destination: AFAB Recycling LLC 237 East Aurora Street, Waterbury, CT 06708-2044 Address:	1.8	Tons
Electronics thru a program operated on municipal property or thru a municipally run or contracted program Check Types Included: <input type="checkbox"/> X Computer Monitors <input type="checkbox"/> X TVs <input type="checkbox"/> X Computers <input type="checkbox"/> X Printers <input checked="" type="checkbox"/> X Other- Specify: Non-covered electronics Other- Specify:	Destination: ECOVanta 13 Myrtle Street, Bristol, CT 06010 Address: Destination: Address:	152.39	Tons

<input type="checkbox"/> Tonnage Includes Res & NonRes			
NiCd Batteries thru a program operated on municipal property or thru a municipally run or contracted program	Destination: Liberty Recycling 551 Broad Street, Bristol, CT 06010 Address:	0.30	Tons
<input type="checkbox"/> Includes Res & NonRes			
C&D Waste Recycled Specify Type: *NOTE: 207.4 Tons Landfilled by CWPM in Ohio	Destination: CWPM 415 Christian Lane, Berlin, CT 06037 Address:	0	Tons
<input type="checkbox"/> Tonnage Includes Res & NonRes			
Incoming Leaves thru a program operated on municipal property or thru a municipally run or contracted program 1CY=0.25 tons	Destination: City of Bristol Solid Waste Transfer Station Compost Facility – 685 Lake Avenue, Bristol, CT 06010 Address:	2,807	Tons
<input type="checkbox"/> Tonnage Includes Res & NonRes	Destination: Address:		
Brush (from yard waste) thru a program operated on municipal property or thru a municipally run or contracted program 1CY(loose) = 0.15 tons	Destination: City of Bristol Solid Waste Transfer Station – 685 Lake Avenue, Bristol, CT 06010 Address: Brush is ground into chips then hauled to Supreme Forest Products 49 DePaolo Drive, Southington, CT 06489	1,553	Tons
<input type="checkbox"/> Tonnage Includes Res & NonRes			
Grass Clippings thru a program operated on municipal property or thru a municipally run or contracted program	Destination: City of Bristol Solid Waste Transfer Station Compost Facility – 685 Lake Avenue, Bristol, CT 06010 (Grass is combined in Yard Waste Mix below) Address:		
<input type="checkbox"/> Tonnage Includes Res & NonRes			
Yard Waste Mix thru a program operated on municipal property or thru a municipally run or contracted program Check Types Included: Curbside Collection & TS Drop Off (Separate from Leaves & Brush)	Destination: City of Bristol Solid Waste Transfer Station Compost Facility – 685 Lake Avenue, Bristol, CT 06010 Address:	1,835	Tons
<input checked="" type="checkbox"/> Grass; <input type="checkbox"/> Twigs <input checked="" type="checkbox"/> Leaves	Destination: Address:		
<input type="checkbox"/> Tonnage Includes Res & NonRes			
(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 (Use drop down)
Food Scraps thru a program operated on municipal property or thru a municipally run or contracted program	Destination: Address: Destination: Address:		
<input type="checkbox"/> Tonnage Includes Res & NonRes	Destination:		

Disaster Debris Clean Wood thru a program operated on municipal property or thru a municipally run or contracted program <input type="checkbox"/> Tonnage Includes Res & NonRes	Address: Destination: Address:		
Paint thru a program operated on municipal property or thru a municipally run or contracted program PaintCare <input type="checkbox"/> Tonnage Includes Res & NonRes	Destination: Clean Harbors, 761 Middle Street, Bristol, CT 06010 Address:	11.43	Tons
Mattresses thru a program operated on municipal property or thru a municipally run or contracted program <input type="checkbox"/> Tonnage Includes Res & NonRes	Destination: Address:		
Other Please Specify: Books <input checked="" type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> Includes Res & NonRes	Destination: Better World Books 11680 Great Oaks Way, Suite 250, Alpharetta, GA 30022 Address:	3.68	Tons
Other Please Specify: Loam (40% Leaf/YW Compost 50% Subsoil 10% Fines) *NOTE: 40% already reported as leaves/YW recycled. <input checked="" type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> Includes Res & NonRes	Destination: Martin Laviero Contractors, 611 North Main Street, Bristol, CT 06010 Address:	5,263*	Tons
Other Please Specify: Propane Tanks <input checked="" type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> Includes Res & NonRes	Destination: Paraco 810 Access Road, Stratford, CT 06615 Address:	1.42	Tons
Other Please Specify: Tires <input checked="" type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> Includes Res & NonRes	Destination: Don Stevens Tire Inc 60 Curtiss St Southington, CT 06489 Address:	26.49	Tons
Other Please Specify: Freon <input checked="" type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> Includes Res & NonRes	Destination: VF Environmental 46 Dix Avenue New Britain CT 06051 Address:	0.006	Tons
Other Please Specify: Fluorescent Bulbs <input checked="" type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential	Destination: NLR 250 Main Street East Windsor CT 06088 Address:	1.19	Tons

<input type="checkbox"/> Includes Res & NonRes			
Other Please Specify:	Destination:		
<input type="checkbox"/> Only Residential	Address:		
<input type="checkbox"/> Only Non-Residential			
<input type="checkbox"/> Includes Res & NonRes			

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 #1a and/or Part #1b (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"/> X No Frequency of Mailings this FY:	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> X 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"/> X Yes <input type="checkbox"/> No How Distributed: Available from City Hall kiosk	This FY: <input checked="" type="checkbox"/> X Yes <input type="checkbox"/> No How Distributed: Available from City Hall kiosk
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"/> X No Frequency of Showing this FY: Where Shown:	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No Frequency of Showing this FY: Where Shown:
Master Composting Program	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No	
Workshops, Demonstrations, etc.	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No Description:	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> X 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 Year: or Fiscal 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	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No Description:	This FY: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No Description:

Composting

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 Municipality
 Please list below the haulers or collectors registered 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 Report To Submit FY2015 Annual 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; SE CT; etc.)
<p>NOTE: No haulers registered or reported</p>		<p>Mailing: E-mail:</p>			<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
		<p>Mailing: E-mail:</p>			<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
		<p>Mailing: E-mail:</p>			<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
		<p>Mailing: E-mail:</p>				

		E-mail:								
		Mailing: E-mail:						<input type="checkbox"/> Yes <input type="checkbox"/> No		
		Mailing: E-mail:						<input type="checkbox"/> Yes <input type="checkbox"/> No		
		Mailing: E-mail:						<input type="checkbox"/> Yes <input type="checkbox"/> No		

Attach additional sheets if needed

Please note: All collectors hauling solid waste (including recyclables) generated within the borders of your municipality are required to: (1) register annually to your municipality – CGS Sec 22a-220a(d). A link to the collector/hauler reporting form can be found at: www.ct.gov/DEEP/solidwasterepor

Annual Collector/Hauler Reporting Form to be submitted to the municipalities in which the collector/hauler operates Word pdf Instructions



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. o 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
<p>MSW¹ <input type="checkbox"/> First Destination (after the municipal transfer station, if applicable) Is a CT Permitted SW Facility *Note: <i>Includes both curbside and transfer station MSW.</i></p>	<p>Facility : Covanta Bristol Facility Address: 43 Enterprise Drive, Bristol, CT 06010</p>	<p>38,176</p>
	<p>Facility : Address:</p>	<p>NA</p>
<p>Oversized MSW¹- (furniture, mattresses, carpets, etc) <input type="checkbox"/> First Destination (after the municipal transfer station, if applicable) Is a CT Permitted SW Facility *NOTE: <i>493 Tons included in MSW above.</i></p>	<p>Facility : Covanta Bristol Facility Address: 43 Enterprise Drive, Bristol, CT 06010</p>	<p>See left *Note</p>
	<p>Facility : Address:</p>	
<p>MSW¹ <input type="checkbox"/> First Destination (after the municipal transfer station, if applicable) Is Not a CT Permitted SW Facility</p>	<p>Facility : Address: If unable to report tonnage to this first destination (located out-of-state) -- please provide Hauler Name and Contact Info:</p>	<p>Tons:</p>
	<p>Facility : Address: If unable to report tonnage to this first destination (located out-of-state) -- please provide Hauler Name and Contact Info:</p>	<p>Tons:</p>
<p>Oversized MSW¹- (furniture, mattresses, carpets, etc)</p>	<p>Facility: Address: If unable to report tonnage to this first destination (located out-of-state) --</p>	<p>Tons:</p>

<input type="checkbox"/> First Destination (after the municipal transfer station, if applicable) Is Not a CT Permitted SW Facility	please provide Hauler Name and Contact Info:	
	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) NOTE: CWPM Landfills C&D in Ohio.	Facility: CWPM Address: 415 Christian Lane, Berlin, CT 06037	Tons: 207.4
	Facility: Address:	Tons:
DISASTER DEBRIS (after the municipal transfer station, if applicable)	Facility: Address:	Tons:
LANDCLEARING DEBRIS (after the municipal transfer station, if applicable) (Logs & Stumps) <i>*NOTE: BRISTOL CONTRACTS GRINDING OF BRUSH AND LOGS, BUT DOES NOT ACCEPT STUMPS. Total chips hauled reported under Brush Recycled at 1,553 tons.</i>	Facility: Chips hauled to Supreme Forest Products Address: 49 DePaolo Drive, Southington, CT 06489	See left *Note Tons:
	Facility: Address:	Tons:

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(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 WASTE²	Facility: Address:	Tons: 0

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 2014

June 30, 2015

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

Aug 7, 2015

Printed Name - Municipal Recycling Contact

E-mail Address

David F. Clark

davidclark@ci.bristol.ct.us

Municipal CEO Signature:

Signature Of Municipal CEO

Date

8/10/15

Printed Name - Municipal CEO

E-mail Address

Ken Cochrane

Part 6: Qualitative Survey Questions re Municipal Recycling Program

PLEASE COMPLETE FY2015 PART 6 ELECTRONICALLY - ON SURVEY MONKEY- CLICK [HERE](#)
No Internet Access? Contact Paula Guerrero (860) 424- 3334 for a Paper Version.