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| **ECOLOGO-G** |
|  | **ANNUAL REPORT****TRANSFER STATION** |  |
| FACILITY NAME:        | CALENDAR YEAR OF REPORT:       | PERMIT NUMBER:       | FACILITY ID:       |
| FACILITY LOCATION (street address):      | COUNTY:      |
| FACILITY CONTACT (name):       | FACILITY PHONE:      |
| FACILITY CONTACT MAILING ADDRESS (if different):       | FACILITY CONTACT PHONE (if different):       | FACILITY CONTACT EMAIL:       |
| Did you operate in      ? [ ]  Yes ***If yes***, proceed to next section and complete the form.[ ]  No ***If no***, answer the following questions, sign and date the last page, and submit. This completes your reporting obligations. When did you stop operations?      Do you plan to restart? [ ]  No [ ]  Yes When?        |
| **AMOUNT AND TYPE OF WASTE DISPOSED PER YEAR** |
| **PLEASE CHECK IF RECEIVED** | **AMOUNT RECEIVED FOR DISPOSAL**Please check: [ ]  Cubic Yards or [ ]  Tons |
| [ ]  Municipal/Commercial Solid Waste |       |
| [ ]  Construction/Demolition Waste |       |
| [ ]  Landclearing Debris |       |
| [ ]  Industrial Waste |       |
| [ ]  Inert Waste |       |
| [ ]  Wood Waste |       |
| [ ]  Yard Debris |       |
| [ ]  Ash (other than special incinerator ash) |       |
| [ ]  Dredged Materials |       |
| [ ]  Sewage Sludge |       |
| [ ]  Asbestos |       |
| [ ]  Petroleum Contaminated Soils |       |
| [ ]  Other Contaminated Soils |       |
| [ ]  Tires (for disposal)  |       |
| [ ]  Medical Waste |       |
| [ ]  Food Processing Waste (for disposal) |       |
| [ ]  Other (specify): |       |
| **Total** |       |

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| OTHER ACTIVITIES AT THE SITE:[ ]  Recycling Collection / Material Recovery (Please specify on pages 3-4) [ ]  Yard Debris Collection for Recycling [ ]  Moderate Risk Waste Handling [ ]  Waste Tire Storage [ ]  Pile [ ]  Surface Impoundment [ ]  Tank [ ]  Other       |
| METHOD OF TRANSPORT TO FINAL DISPOSAL DESTINATION(s):[ ]  Truck [ ]  Rail [ ]  Intermodal [ ]  Other (specify):       Name of Disposal Facility:       |
| Are you open to the public? [ ]  Yes [ ]  No | Tip fees (Attach schedule if available):       |
| During the reporting year, were there any changes in your management practices that would impact your operations? [ ]  No [ ]  Yes (specify)      Are there any new solid waste activities planned at your site for this calendar year? [ ]  No [ ]  Yes (specify)            Planned start date:       |
| DID YOU RECEIVE MATERIAL FOR DISPOSAL FROM: | WHERE FROM | TYPE OF MATERIAL | ESTIMATE AMOUNT[ ] Tons or [ ] Cubic Yards |
| Out of County? |       |       |       |
|  [ ]  Yes [ ]  No |       |       |       |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |
| Out of State? |       |       |       |
|  [ ] Yes [ ]  No |       |       |       |
|  |       |       |       |
|  |       |       |       |
| Out of Country? |       |       |       |
|  [ ]  Yes [ ]  No |       |       |       |
|  |       |       |       |

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| **NOTE: Please ONLY fill in this chart if you collected materials for RECYCLING or COMPOSTING****AMOUNTS AND TYPES OF MATERIALS COLLECTED FOR RECYCLING OR COMPOSTING** |
| **PLEASE CHECK IF RECEIVED FOR RECYCLING or COMPOSTING** | **COMMERCIAL**Please check:[ ] Cubic Yards/Year or [ ]  Scaled Tons/Year  | **RESIDENTIAL**Please check: [ ]  Cubic Yards/Year or [ ]  Scaled Tons/Year | **TOTAL AMOUNT RECEIVED**Please check: [ ]  Cubic Yards/Year or [ ]  Scaled Tons/Year |
| [ ]  Newspaper |       |       |       |
| [ ]  Corrugated Paper |       |       |       |
| [ ]  Mixed Waste Paper |       |       |       |
| [ ]  Container Glass  |       |       |       |
| [ ]  PET Plastics |       |       |       |
| [ ]  HDPE Plastics |       |       |       |
| [ ]  LDPE Plastics |       |       |       |
| [ ]  Other Recyclable Plastics |       |       |       |
| [ ]  Aluminum Cans |       |       |       |
| [ ]  Tin Cans |       |       |       |
| [ ]  Ferrous Metals (iron, steel) |       |       |       |
| [ ]  Nonferrous Metals (excluding aluminum cans) |       |       |       |
| [ ]  Appliances (white goods) |       |       |       |
| [ ]  Electronics (computers, CPUs,  hard drives) |       |       |       |
| [ ]  Electronics (monitors, TVs) |       |       |       |
| [ ]  Tires (collected) |       |       |       |
| [ ]  Asphalt  |       |       |       |
| [ ]  Concrete |       |       |       |
| [ ]  Construction/Demolition |       |       |       |
| [ ]  Wood Waste |       |       |       |
| [ ]  Landclearing Debris |       |       |       |
| [ ]  Yard Debris  |       |       |       |
| [ ]  Food/Food Scraps |       |       |       |
| [ ]  Textiles (rags, clothing) |       |       |       |
| [ ]  Co-Mingled Recyclables (specify): |       |       |       |
| [ ]  Other (specify): |       |       |       |
| [ ]  Other (specify): |       |       |       |
| [ ]  Other (specify): |       |       |       |
| **Total Collected for Recycling** |       |       |       |

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| **NOTE: Please ONLY fill in this chart if you collected materials for RECYCLING or COMPOSTING****DESTINATION AND FINAL USE OF OUTGOING MATERIALS COLLECTED FOR RECYCLING or COMPOSTING** |
| **RECYCLED MATERIAL** | **OUTGOING AMOUNT**Please specify tons or cubic yards. | **DESTINATION FACILITY**Please specify name, city, state. | **FINAL USE OF MATERIAL**Please specify: disposed, recycled, reused, composted, treated, burned for energy, stockpiled, etc. |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
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|       |       |       |       |
|       |       |       |       |
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|       |       |       |       |
|       |       |       |       |
| PREPARED BY:       | DATE:       | PHONE:       |
| EMAIL:       |

*If you need this publication in another format, please call the Waste 2 Resources Program at 360-407-6900.
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