

INSTRUCTIONS FOR CERTIFIED RECOVERED MATERIALS PROGRAM APPLICATION & REPORTING FORMS*

A. GENERAL INFORMATION

- 1) All applications for certification shall be accompanied by a certification fee of \$50.00 in check or money order made payable to the Department of Environmental Protection and mailed to the following address:

*Florida Department of Environmental Protection
P.O. Box 3070
Tallahassee, Florida 32310-3070*

THE CERTIFICATION APPLICATION AND FEE MUST BE RECEIVED BY THE DEPARTMENT BY APRIL 1ST OF EACH YEAR.

- 2) **DO NOT report recovered materials received from other certified companies.** A listing of other certified dealers is provided. Review this list & omit any materials received from these companies as these tons have already been reported. Verification about the reporting of materials can be obtained from the seller or person(s) transferring recovered materials to your facility. This eliminates double counting.
- 3) Recovered material quantities must be reported in **short tons** (one short ton = 2,000 Pounds).
- 4) Make additional copies of reporting forms as necessary to report by County of Origin. An electronic copy of forms can be obtained by calling 850/245-8726. Original signatures are required on each form.
- 5) Report by **County of Origin** those recovered materials that the company has received and sold only. One Reporting Form must be used for each county from which a facility handles materials.
- 6) The application for certification is for the period July 1st of the application year through June 30th of the following year. The recovered material reporting form(s) is (are) based on the previous calendar year's data.

B. APPLICATION FORM INSTRUCTIONS

The following instructions pertain to the **CERTIFICATION APPLICATION FORM**, referenced by item number.

- 1) **Provide the Applicant Name, Physical Address, Mailing Address, Telephone, Fax, Contact Person, E-Mail & Web addresses, Legal Owners, Partners, Officers, and/or Directors:** The applicant is the name of the entity (company) within the State of Florida which is engaged in recycling activities. Only one application shall be required per entity (as an example, a business entity may consist of three recycling facilities located throughout the State; but only one application is required). The contact person should be an applicant's representative who is authorized to answer questions pertaining to these forms. The Contact information is to include the addresses & phone numbers where this person can be reached. Include on the appropriate lines the names of owners, partners, corporate officers and directors. Attach additional page(s) if necessary.
- 2) Indicate if you are applying for a new (first) certification or renewing a certification by shading in the appropriate circle.
- 3) **Describe the applying entity:** By shading the appropriate circle(s), indicate the type of recycling activity being conducted. Indicate whether it is a public (governmental) entity or a private (business or nonprofit) entity and whether the function is as end user of recovered materials, a non-exempt generator, or a dealer/processor. If more than one description applies, indicate as appropriate.

INSTRUCTIONS (Continued)

Use the following definitions for the terms in this item:

- **“Dealer/Processor”** means any person who handles, purchases, receives, recovers, sells recovered materials. A person whose activities are limited strictly to the transportation of recovered materials is not considered to be a person who handles, purchases, receives, recovers, sells or is an end user of recovered materials.
- **“Nonexempt Generator”** Any person who produces recovered materials; and annually transfers in excess of 600 tons of recovered materials to any combination of in-state persons who make a product utilizing recovered materials as a raw material in place of, or in addition to virgin raw materials, or to persons out of this state.
- **“End User”** means a person who makes a product utilizing recovered materials as a raw material in place of, or in addition to virgin raw materials and who receives more than 600 tons per year of recovered materials from persons in Florida who are not certified.

4) **Location and Type of Facility:** For each facility location owned or operated in the State of Florida, please list the facility name, street address, the county in which the facility is located, the Latitude & Longitude coordinates (for mapping purposes) and the type of facility. In the facility type column, use one or more codes to describe the type(s) of facility(ies). Codes R-a through R-c are for facilities that process source separated materials, and code M is for solid waste facilities, as follows:

- **R-a: A Recovered Material Processing Facility (RMPF):** This is engaged solely in the collection, storage, processing, resale, or reuse of recovered materials, e.g., a scrap metal or paper stock dealer/processor.
- **R-b: A Recovered Materials Processing Facility (RMPF):** This handles or processes recovered materials from curbside recycling programs in which the materials are separated by type prior to the time of delivery to the facility.
- **R-c: A Recovered Materials Processing Facility (RMPF):** This handles or processes recovered materials from a curbside, a separately collected “blue bag”, or other collection program where various types of recovered materials are commingled with each other at the time of delivery to the facility.
- **M: Materials Recovery Facility (MRF):** This is a permitted solid waste facility that extracts recyclable materials from solid waste, including materials suitable for use as a fuel or soil amendment, or any combination of such materials. This facility type separates more than 600 tons annually of recovered materials extracted from mixed solid waste and sells or transfers this material directly out-of-state or to an in-state person who makes a product utilizing recovered materials as a raw material in place of, or in addition to virgin raw materials. This includes “blue bag” collection programs which collect and transport recovered materials commingled with solid waste.

5) **Signature:** The form must be signed and dated by the entity’s authorized representative. Unsigned applications are considered invalid and will be returned. Be certain to type or print the authorized representative’s title beside the signature & their name beneath the signature.

C. REPORTING FORM INSTRUCTIONS

The following instructions are for the **RECOVERED MATERIALS REPORTING FORM**.

For each facility listed in item 3 of the Certification Application Form, fill out a separate reporting form for each county from which the facility received recovered materials. Please make additional copies of this form as necessary.

ALL ANNUAL REPORTING FORMS shall be sent to:

*Florida Department of Environmental Protection (FDEP)
2600 Blair Stone Road
Mail Station # 4570
Waste Reduction Section
Tallahassee, Florida 32399-2400*

ALL QUARTERLY REPORTING FORMS shall be sent to counties requesting quarterly reports (listing enclosed). DO NOT SEND THESE TO THE FDEP. Registrants shall report on a quarterly basis to such local governments, information for the preceding quarter, not later than 90 days after the ending date of each quarter, and shall include only the information required in Rule 62-722.900 (1), F.A.C. Quarters shall begin January 1, April 1, July 1 and October 1 of each year.

- 1) **Certified Name:** The name of the reporting entity which is engaged in recycling activities (as on Certification Application Form).
- 2) **Facility Name:** This is the name of the individual facility at the address in item 3 below. If the facility does not have a name to differentiate it from other facilities owned or operated by your company or business, use the business name.
- 3) **Address:** This is the actual street address, including city, of the facility (not post office box).
- 4) **City:** fill on only if the facility is located within the incorporated limit of a municipality.
- 5) **County:** The name of the county in which the facility is physically located.
- 6) **County of Origin:** The county from which the recovered materials were received then sold. Use a separate form for each of these counties.
- 7) **Recovered Materials**

Report in Tons by material type and Subtotal:

- **Non-Exempt Generators-** Enter ONLY the total tons generated within the "County of Origin" listed in item 6 above which were shipped to in-state persons who make a product utilizing recovered materials as a raw material in place of, or in addition to virgin raw materials, or to persons out of this state. Subtotal the tons being reported for each recovered material category.
- **End Users:** Enter ONLY the total tons received from the "County of Origin" listed in item 6 above which were received from in-state persons who are NOT certified under Rule 62-722 F.A.C., ("Regulation of Recovered Materials-Certification and Registration of Recyclers"). DO NOT REPORT TONS GOING TO DEALER/PROCESSORS. Subtotal the tons being reported for each recovered material category.

INSTRUCTIONS (Continued)

- **Dealer/Processors:** Enter ONLY the total tons received from the “County of Origin” listed in item 6 above which were received from either 1) in-state persons who are NOT certified under Rule 62-722 F.A.C., (“Regulation of Recovered Materials Certification and Registration of Recyclers”), or 2) from Non-Exempt Generators. Subtotal the tons being reported for each recovered material category.
- 8) **Reported Tons of all Recovered Materials total:** Total of the material subtotals from item 7 above. NOTE: The total tons handled at the facility (see item 9 below) are not reported on this line in order to prevent, to the greatest extent possible, “double counting” of materials recycled.
- 9) **Total Tons of Recovered Materials Received or Handled:** Enter the total tons of all recovered materials handled at the facility. On this line include tons of recovered materials reported in item 8 above plus other recovered materials (as listed in item 7 above and does not include materials such as construction and demolition debris, yard waste, etc.) handled at the facility which are NOT required to be reported in item 8 above, e.g., recovered materials received from other registrants or certified persons. THIS ITEM IS TO BE FILLED OUT ONLY IF THE COUNTY AS SHOWN IN ITEM 6 IS THE SAME AS THE COUNTY AS SHOWN IN ITEM 5 ABOVE.
- 10) **Amount of Solid Waste Disposed:** Enter the total tons or estimated amount, to the best of your knowledge, of solid waste which was transferred from the facility for disposal, or collected by a solid waste hauler. Level of service information, e.g., size of solid waste container and frequency of collection, will satisfy this requirement and may be entered on this line, in the event that total tons or volume cannot be determined. THIS ITEM IS TO BE FILLED OUT ONLY IF THE COUNTY AS SHOWN IN ITEM 6 IS THE SAME AS THE COUNTY AS SHOWN IN ITEM 5 ABOVE.
- 11) **Disposal Facilities or Haulers Receiving And Collecting:** Provide the facility name and street address for each disposal facility receiving solid waste from the reporting facility. In the event that the disposal site is unknown, enter the name, business address and city/zip code of the person with whom such disposal was arrange. THIS ITEM IS TO BE FILLED OUT ONLY IF THE COUNTY AS SHOWN IN ITEM 6 IS THE SAME AS THE COUNTY AS SHOWN IN ITEM 5 ABOVE.
- 12) **Signature:** The reporting form must be signed by an authorized representative, including title, and the date signed.
- 13) **Non-Confidentiality:** Place authorized representative’s initials in this box ONLY if you deem the information (other than facility name and location) contained on this form is NOT CONFIDENTIAL AND DESIRE THAT THIS INFORMATION BE RELEASED TO THE PUBLIC.

* Please telephone the Waste Reduction Recovered Materials Program at 850/488-0300 to request any necessary assistance.