

PERMIT APPLICATION

TO REMOVE, TRANSPORT AND DISPOSE OF SOLID WASTE
OR RECYCLABLES

Town of Plainville

P. O. Box 1717 – Plainville, MA 02762

Permit #	_____
Received	_____
Fee	___\$100.00___
Paid (ck or cash)	_____
License granted	_____

FOR OFFICE USE ONLY

Date of Application: _____

Instructions

All sections of this application must be completed. Incomplete applications will not be considered.

In accordance with MGL Chapter 111, Sections 31 A and 31B and in accordance with the Code of the Town of Plainville, Division 5, Chapter 712, "Solid Waste and Recyclables, Rules and Regulations for Removal, Transport, and Disposal", the undersigned makes application to the Board of Health for permission to collect and transport Solid Waste and/or Recyclables as set forth below:

Check here if this is your first application. Check here if this is a renewal application.

Permit Fee

The application fee is \$100.00 per company seeking a permit to operate in the Town of Plainville.

Please select which type(s) of collection you will be providing (*check all that apply*):

- Solid Waste and Recyclables Recyclables Only Solid Waste Only (Commercial Customers/Generators)
 Temporary Roll-off containers only

Permit Date

If approved, this permit will be effective from January 1, to December 31, 2018.

Company Information	
Company Name	
Contact Name	
Location Address	
City, State ZIP Code	
E-Mail Address	
Telephone #	
Mailing Address (if different)	
City, State, ZIP Code	
Emergency 24-hour Contact Name	
Emergency 24-hour Telephone #	
Website	

Truck Information

Estimated number of collection trucks to be used in the Town of Plainville during the permit year: # trucks .
(Use separate sheet to list additional trucks)

Truck Registration Number	State	Type and Capacity	Date of Last Inspection

Disposal/ Recycling Information

List facilities where Solid Waste and/or Recyclables will be delivered for disposal or processing during the permit year.
(Note multiple outlets if used during the permit year. Weight slips may be requested to verify end disposal site.)

Solid Waste Disposal Facility	Address	Material(s) Delivered
Recyclables Processing Facility/MRF	Address	Material(s) Delivered

Please check all and make sure all associated attachments are included. ***Incomplete applications will not be considered.***

- This is a permit renewal: I have attached a copy of the Annual Solid Waste and Recyclables Reporting Form. If this is your first application or you provide temporary roll-off containers only, write-in Not Applicable (NA).
- I have attached a copy of my certificate of insurance for public liability and property insurance and workers' compensation insurance.
- I certify that the company I represent operates in compliance with the Massachusetts Waste Ban regulations and the Mercury Disposal Prohibition.
- I have attached a copy of my marketing materials indicating the types of services offered, reminding Customers of the Massachusetts Waste Ban Materials.
- I confirm that my company is in compliance with the Bundled Service requirement outlined in Section VII. of the Code of the Town of Plainville, Division 5, Chapter 712. Solid Waste and Recyclables, Rules and Regulations for Removal, Transport, and Disposal. If you provide temporary roll-off containers only, write in Not Applicable (NA).
- I have attached a copy of my notification that will go to Customers who set out visible Waste Ban Materials mixed with Solid Waste, describing what was seen that violated the Waste Bans.
- All employees understand and will help educate all Customers about the Massachusetts Waste Bans.
- I am an authorized official of the company applying for this permit.
- Pursuant to MGL Ch. 62C Section 49A, I certify under the penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Signature of Company Official

Printed Name

Title

**Social Security or Federal Identification Number

Date

***** Your social security or FID number may be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This requires it made under the authority of Mass. F.L. c.62C s. 49A.***

ANNUAL SOLID WASTE AND RECYCLABLES REPORTING FORM
FOR PERMITTED HAULERS OPERATING in the Town of Plainville

Instructions

All sections of this form must be completed and submitted to the Board of Health with your Annual Permit Renewal Application.

Private Hauler permits will not be issued until this report is filed.

Reporting Period

For the period starting _____ through _____
MONTH/DATE/YEAR MONTH/DATE/YEAR

Company Information	
Company Name	
Name of Person Completing Form	
Address	
City, State ZIP Code	
Phone	
E-Mail	

In the table below, please provide the average number of Plainville Customers you served during this 12-month reporting period, by category type.

Category	Customer Count
Residential Customers: Solid Waste and Recyclables	
Commercial Customers: Solid Waste and Recyclables	
Commercial Customers: Recyclables Only	
Commercial Customers: Solid Waste Only	

Tonnage Data

Please provide the total tons of Solid Waste and Recyclables collected from Residential Customers within the Town/City of _____ during this 12-month reporting period. *(Note: In the case where your company delivers loads for disposal or recycling that are combined with more than one municipality, you must provide your best estimate of tonnage delivered from the Town of Plainville. Weight slips must be provided upon request from the Board of Health.)*

	Solid Waste	Recyclables
Tonnage		
Disposal or Processing Facility		

Please check all and make sure all associated attachments are included. If Not Applicable, enter (NA).

Incomplete applications will not be considered.

- I have attached a list of all Residential and Commercial Customers using each service (Solid Waste, Recycling) during the previous calendar year within the Town of Plainville.
- I have attached names and addresses of Commercial Customers who are provided Solid Waste only collection.
- I have attached names and addresses of Commercial Customers who are provided Recyclables only collection.
- I have been in communication with the Board of Health regarding Customer set-outs not in compliance with the *Town of Plainville regulation*.
- I have attached copies of all Waste Ban violation letters or notices received by my company during the prior year that refer to loads collected within the Town of Plainville.

Signature of Company Official Printed Name Title Date

Recycling Service Exemption Form for Commercial Generators

Town of Plainville

Date _____

RECYCLING SERVICE EXEMPTION FORM FOR COMMERCIAL GENERATORS

All Permitted Haulers must provide both Solid Waste and Recyclables collection to all Commercial Customers unless the Customer can provide proof to the Permitted Hauler that separate Recycling services are provided by another Permitted Hauler, or by one or several of the methods listed below. Commercial Customers that decline recycling collection service from their Permitted Solid Waste Hauler must demonstrate to their Permitted Hauler or the Town of Plainville that they are diverting Waste Ban Material from disposal.

The Town of Plainville periodically checks Waste Ban compliance throughout the Town of Plainville and can offer outreach and assistance. Permitted Haulers that do not offer/provide collection of Recyclables along with Solid Waste pickup are subject to fines, unless the Town of Plainville has received this form showing that recycling services were offered.

Please choose one:

- I am a Permitted Hauler/customer service representative submitting this form on behalf of the business/organization listed below. *Identify your company name here:* _____
- I am a business/organization who has declined recycling service offered by my Solid Waste Hauler.
- I am a Permitted Hauler/customer service representative advising the Town of Plainville of a business/organization who was offered recycling service, but refused. *Identify your company name here:* _____

Business, Organization, or Property Manager Seeking Exemption	
Business/Organization Name	
Business/Organization Contact	
Address	
City, State ZIP Code	
Phone	
E-Mail	

Materials Handling Information

Name of Permitted Solid Waste Hauler _____

Please describe the manner in which materials are recycled (check all that apply):

- Option 1 - Ship directly to mill: *Identify recycling outlet* _____
- Option 2 - Self-haul: *Identify recycling outlet* _____
- Option 3 - Back-haul to parent company
- Option 4 – Recycling Collection by Permitted Recycling Hauler _____
Name of Permitted Recycling Hauler

Signature

By signing below, I certify that I have read and understand the TOWN of PLAINVILLE requirement to comply with State-mandated Waste Bans (310 CMR 19.017) as stated in the Code of the Town of Plainville, Section 5, Chapter 712. Solid Waste and Recyclables, Rules and Regulations for Removal, Transport and Disposal.

Signature of Company Official

Printed Name

Title

Date