



This form is now available for electronic submittal using the Alabama Environmental Permitting and Compliance System or AEPACS.

[Note: The program encourages the use of an electronic form submittal rather than a paper form submittal.]

Please click the link below to submit this form electronically using AEPACS.

<https://aepacs.adem.alabama.gov/nviro/ncore/external/home>

**PROCESSING AND RECYCLING GENERAL INFORMATION
RECYCLING REGISTRATION FORM 3___ -**

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
LAND DIVISION – SOLID WASTE BRANCH
POST OFFICE BOX 301463
MONTGOMERY, ALABAMA 36130-1463

INSTRUCTIONS: APPLICATIONS SHOULD BE TYPED OR PRINTED IN INK AND THE ORIGINAL AND ONE COPY SUBMITTED TO THE DEPARTMENT IN DUPLICATE. PLEASE CONTINUE ON AN ATTACHED SHEET OF PAPER IF INSUFFICIENT SPACE IS AVAILABLE TO ADDRESS ANY ITEM BELOW. PLEASE MARK N/A IN THE APPROPRIATE BOX WHEN AN ITEM IS NON-APPLICABLE TO THE APPLICANT.

FACILITY TYPE

___ INITIAL REGISTRATION FOR FACILITY

___ MODIFICATION OF EXISTING REGISTRATION

If a new facility, estimated date for beginning of operation: _____

List total acreage of entire property on which the facility is located: _____

List total acreage used or to be used in connection with operation of the facility (including area for building and storage): _____

Is the facility adjacent to or will it include, any other type of solid waste management activity (landfill, incinerator, water-to-energy plant, etc)?
Yes _____ No _____

If "yes" please explain:

MATERIALS COLLECTED

ESTIMATED QUANTITY (TONS/MONTH)	ESTIMATED QUANTITY (TONS/MONTH)	ESTIMATED QUANTITY (TONS/MONTH)
<input type="checkbox"/> PLASTIC _____	<input type="checkbox"/> MIXED PAPER _____	<input type="checkbox"/> ELECTRONICS _____
<input type="checkbox"/> GLASS _____	<input type="checkbox"/> FERROUS METALS _____	<input type="checkbox"/> BATTERIES _____
<input type="checkbox"/> NEWSPAPER _____	<input type="checkbox"/> OTHER METALS _____	<input type="checkbox"/> (OTHER) _____
<input type="checkbox"/> ALUMINUM _____	<input type="checkbox"/> KITCHEN GREASE _____	<input type="checkbox"/> (OTHER) _____
<input type="checkbox"/> CARDBOARD _____	<input type="checkbox"/> YARD WASTE _____	<input type="checkbox"/> (OTHER) _____

Site Information: _____

Address: _____

(physical) _____

City: _____

State/Area/Zip: _____

County: _____

Country: _____

Registrant Information/Name: _____

Address: _____

(mailing) _____

City: _____

State/Area/Zip: _____

County: _____

Country: _____

Email: _____

Phone Number: _____

RESPONSIBLE OFFICIAL (The responsible official will also be responsible for the submittal of semi-annual reports as required by Solid Waste Regulations, Processing and Recycling Chapter 335-13-3-.05(4))

Prefix/Name/Title: _____

Address: _____

City: _____ State/Area/Zip: _____ Country: _____

Phone Number: _____ Email: _____

FACILITY CONTACT

Prefix/Name/Title: _____

Address: _____

City: _____ State/Area/Zip: _____ Country: _____

Phone Number: _____ Email: _____

Physical Location where Records will be maintained:

Address: _____

City: _____ State/Area/Zip: _____ Country: _____

Phone Number: _____

RECORD CONTACT

Prefix/Name/Title: _____

Address: _____

City: _____ State/Area/Zip: _____ Country: _____

Phone Number: _____ Email: _____

MAILING CONTACT

Prefix/Name/Title _____

Address: _____

City: _____ State/Area/Zip _____ Country _____

PROCESSING & RECYCLING FACILITY

CERTIFICATION

A responsible official or representative as defined in Rule 335-13-3-.02(5) must provide their signature to verify the statement below.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE (Responsible official of applicant):

_____ Title: _____

(print or type name)

Date:

SUPPLEMENTAL INFORMATION

In addition to this form the following information must be submitted.

- A Description of how the facility will be designed and operated in accordance with Solid Waste Regulations, Processing and Recycling r. 335-13-3-.03.
- A Description of how the facility will comply with storage and accumulation limitations in accordance with Solid Waste Regulations, Processing and Recycling r. 335-13-3-.04.
- How the facility will comply with requirements for Records and Reports in accordance with Solid Waste Regulations, Processing and Recycling r. 335-13-3-.05.

OPERATING RECORD

The following records must be kept and maintained in accordance with ADEM Admin. Code r. 335-13-3 Solid Waste Regulations, Processing and Recycling.

- Copies of material receipts received at the facility for use by ADEM staff, the person delivering the materials, and the receiving recycling facility.
- Semi-annual reports that include reports of all materials received, stored, processed, or transferred.
- All recycling facilities exempt from registration in accordance to ADEM Admin. Code r. 335-13-3-.02(3) (Solid Waste Regulations, Processing and Recycling) must submit a semi-annual report as outlined in ADEM Admin Code r. 335-13-3-.05(4).
- Any information submitted to ADEM may be considered confidential if requested in writing by the facility in accordance with ADEM Admin. Code rs. 335-13-3-.02(a)(2) and 33-1-1-.06(2).
- Records are to be kept and maintained for three years and made available for inspection by ADEM personnel upon request.

For additional information or questions concerning the completion of this form please contact ADEM Recycling staff at 334-274-4201 or via email at Recycling@adem.alabama.gov.