

**PROCESSING AND RECYCLING GENERAL INFORMATION  
RECYCLING REGISTRATION FORM 3\_\_\_ -**

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

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**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.

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**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:

\_\_\_\_\_  
\_\_\_\_\_

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**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) _____

Facility Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(mailing) \_\_\_\_\_

Address: \_\_\_\_\_  
(physical) \_\_\_\_\_

County: \_\_\_\_\_

County: \_\_\_\_\_

Telephone: \_\_\_\_\_

Web-Site (if applicable): \_\_\_\_\_

E-mail: \_\_\_\_\_

**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))

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**FACILITY CONTACT**

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Location where Records will be maintained:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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**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: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

(print or type name)

**PROCESSING & RECYCLING FACILITY**

## SUPPLEMENTAL INFORMATION

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

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

### OPERATING RECORD

The following records must be kept and maintained in accordance with Solid Waste Regulations, Processing and Recycling Chapter 335-13-3-.05, except where notified in Solid Waste Regulations, Processing and Recycling Chapter 335-13-3-.05(3).

- 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 with Solid Waste Regulations, Processing and Recycling Chapter 335-13-3-.02(3) must submit a semi-annual report as outlined in Solid Waste Regulations, Processing and Recycling Chapter 335-13-3-.05(4).
  - Any information submitted to ADEM may be considered confidential if requested in writing by the facility.
  - Records are to be keep and maintained for a duration of three years and made available for inspection by ADEM personnel upon request.
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For additional information or questions concerning the completion of this form please contact ADEM Recycling staff at 334-271-7988 or via email at [Recycling@adem.state.al.us](mailto:Recycling@adem.state.al.us).