

**Prince George's County**  
**Commercial, Industrial & Multifamily Property Recycling Report/Plan**  
Annual Recycling Report for Property Owners and Managers

*Please Print Legibly:* For \_\_\_\_\_ reporting year. Tonnage \_\_\_\_\_ in pounds. Date: \_\_\_\_\_

**Section 1: Property Information**

Property Name: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Section 2: Property Management Information**

**On Site Property Manager:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Property Management Company Contact:**

Company: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

***If Applicable:***

Homeowners Assoc. President Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Section 3: Property Profile**

**Property Type:** (Check all that apply)

- |                                    |                                      |  |   |
|------------------------------------|--------------------------------------|--|---|
| <input type="checkbox"/> Office    | <input type="checkbox"/> Grocery     | <input type="checkbox"/> Auto Repair   | <input type="checkbox"/> Bar/Restaurant   |
| <input type="checkbox"/> Retail    | <input type="checkbox"/> Service     | <input type="checkbox"/> Hotel/Motel   | <input type="checkbox"/> Health/Medical   |
| <input type="checkbox"/> Bank      | <input type="checkbox"/> Education   | <input type="checkbox"/> Beauty/Barber | <input type="checkbox"/> Place of Worship |
| <input type="checkbox"/> Apartment | <input type="checkbox"/> Condominium | Other:: _____                          |   |

**Generated Waste Profile: The primary waste materials generated at this property.**

(Check all that apply)

- |                                       |  |  |                                      |
|---------------------------------------|--|--|--------------------------------------|
| <input type="checkbox"/> Office Paper | <input type="checkbox"/> Plastic Bottles | <input type="checkbox"/> Motor Oil/Oil Filters | <input type="checkbox"/> Scrap Metal |
| <input type="checkbox"/> Newspaper    | <input type="checkbox"/> Glass Bottles   | <input type="checkbox"/> Food Scraps           | <input type="checkbox"/> Tires       |
| <input type="checkbox"/> Cardboard    | <input type="checkbox"/> Metal Cans      | <input type="checkbox"/> Anti-freeze           | <input type="checkbox"/> Yard Debris |

Other: \_\_\_\_\_

**Additional Material:**

- |  |                                       |   |
|--|---------------------------------------|---|
| <input type="checkbox"/> Electronics   | <input type="checkbox"/> Fluorescents | <input type="checkbox"/> Grease/Cooking Oil |
| <input type="checkbox"/> Hard Plastics | <input type="checkbox"/> Textiles     | <input type="checkbox"/> Pallets            |
|  |                                       | <input type="checkbox"/> Mattresses         |

Other: \_\_\_\_\_

**Section 4: Current Waste Hauler Information**

- Does this property currently receive recycling services?  Yes  No
- Day(s) of **RECYCLING** collection: (Circle) M T W TH F S
- This property receives recycling services from: \_\_\_\_\_ (Service provider)
- Recycling service provider phone number: \_\_\_\_\_
- This property receives waste services from: \_\_\_\_\_ (Service provider)
- Are the collection areas enclosed?  Yes  No

**Section 5: Current Garbage and Recycling Containers**

**Garbage**

Types of Containers	Number of Containers	Collection Frequency
2 yd. Dumpster		
4 yd. Dumpster		
6 yd. Dumpster		
8 yd. Dumpster		
64-96 gal. Cart		
Compactor		
Chute		
Other:		

**Recycling**

Types of Containers	Number of Containers	Collection Frequency
2 yd. Dumpster		
4 yd. Dumpster		
6 yd. Dumpster		
8 yd. Dumpster		
64-96 gal. Cart		
Compactor		
Chute		
Other:		

**Property Description:**

- |  |  |
|--|--|
| 1. Number of garbage collection areas: _____ | 2. Number of recycling collection areas: _____ |
| 3. Total number of Units in Complex: _____   | 4. Total Number of Individual Buildings: _____ |
| 5. Number of Units Per Floor: _____          | 6. Number of Floors Per Building: _____        |

**Section 6: Recycling Plan**

I am aware that Prince George’s County Council Bill 87-2012 requires my commercial/industrial/multifamily property to implement a recycling collection program as follows.

**My commercial/industrial/multifamily property is:**

*(Please initial next to all that apply)*

- 1. Separating designated recyclable materials from garbage (recycling). *Initial* \_\_\_\_\_
- 2. Displaying signs and labeled containers in appropriate areas or rental units for the collection of designated recyclable materials. *Initial* \_\_\_\_\_
- 3. A party to a written service agreement for recycling collection service as noted above in Section 4 “Currant Waste Hauler Information”. *Initial* \_\_\_\_\_  
**OR**
- 4. If NOT recycling, needing more containers or switching haulers, initial here. *Initial* \_\_\_\_\_  
**Getting quotes from different recycling service providers.**

**Section 7: Signatures**

**Signatures: I understand and confirm that this information is true and correct.**

Printed Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

**Section 8: Name And Address Where The Annual Recycling Report Should Be Mailed**

Name of whom Receives Mail-Out: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State & Zip Code: \_\_\_\_\_

*If you have any questions, concerns, or require technical assistance please contact the Prince George’s County Recycling Section. Also, please inquire about Source Reduction and learn how you can realize substantial savings through reduced purchasing and disposal costs while benefiting the environment.*

**Contact Information:**

Prince George’s County  
 Recycling Section  
 9200 Basil Ct., Suite 300  
 Largo, MD 20774  
 Phone: (301) 883-3635  
 Fax: (301) 883-6048

# SHEET FOR ESTIMATING QUANTITIES OF RECYCLABLES

The following table provides a list of commonly used storage containers, with their capacity and the amount of recyclable material that each container holds.

## Recyclable Material Capacity (in Pounds)

Recycling Container Size	Volume Capacity (Cubic Yards)	Newspaper (Loose)	Cardboard (Loose)	Aluminum (Whole cans)	Glass (Whole bottles or jars)	Steel (Whole cans)	Plastic (Whole bottles)	Single-Stream Containers* OR Commingled
<b>32-gallon</b>								
garbage can or pail	0.18	72	N/A	13	99	27	5	29
<b>55-gallon drum</b>	0.3	120	N/A	22	165	45	9	48
<b>90-gallon cart</b>	0.5	200	N/A	37	275	75	15	80
<b>Dumpster (2 yd)**</b>	2	800	150	148	1,100	300	60	320
<b>Dumpster (4 yd)**</b>	4	1,600	300	296	2,200	600	120	640
<b>Dumpster (6 yd)**</b>	6	2,400	450	444	3,300	900	180	960
<b>Roll-off Container**</b>	10	4,000	750	740	5,500	1,500	300	1,600
<b>Roll-off Container**</b>	20	8,000	1,500	1,480	11,000	3,000	600	3,200
<b>Roll-off Container**</b>	30	12,000	2,250	2,220	16,500	4,500	900	4,800

N/A - It is not likely that cardboard would be stored in this size container.

\*This category refers to aluminum, steel, plastic, and glass containers collected together in the same container.

\*\*Common-sized dumpsters and roll-offs are shown. Check with your collector to verify the size that your property uses.

## HOW TO USE THE TABLE TO FILL IN WORKSHEET

For each recyclable material your property collects.

1. Enter the type of material in column A.
2. Enter the size of container used to store this material in column B.
3. Enter the total number of containers dedicated to this material in column C.
4. Refer to table above to determine the average number of pounds of this material that the storage container holds. Enter this figure in column D.
5. Multiply column C times column D. enter this figure in column E.
6. Enter the number of collections each year that your property receives for this material in column F.
7. Multiply column E times column F. Enter this figure in column G.

A	B	C	D	E	F	G
Type of Recyclable Material	Type of Storage Container	Number of Containers (includes all locations)	Material Capacity for Container (Refer to table)	Quantity of Material Collected from all containers (lbs)	Number of Collections per Year	Total Quantity per Year (lbs)
↓	↓	↓	↓	↓	↓	↓
_____	_____	_____ X _____ = _____	_____	_____ X _____ = _____	_____	_____
_____	_____	_____ X _____ = _____	_____	_____ X _____ = _____	_____	_____
_____	_____	_____ X _____ = _____	_____	_____ X _____ = _____	_____	_____
_____	_____	_____ X _____ = _____	_____	_____ X _____ = _____	_____	_____
_____	_____	_____ X _____ = _____	_____	_____ X _____ = _____	_____	_____
<b>Total =</b>						_____

# PRINCE GEORGE'S COUNTY ANNUAL MULTIFAMILY/BUSINESS RECYCLING QUANTITIES REPORT

Property Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_

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

Recyclables Collector \_\_\_\_\_ Reporting Year \_\_\_\_\_

## Recyclable Materials Collected During Reporting Year

If you do not have actual documentation to determine weights of recyclables collected, you must use the worksheet on the back side of this form to calculate estimates.

<u>Material</u>	<u>Total Pounds</u>
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Newspaper	⇒ _____
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Single - Stream*	⇒ _____
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Aluminum Cans	⇒ _____
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Steel Cans	⇒ _____
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Plastic Bottles	⇒ _____
-----------------	---------

Jars and Glass Bottles	⇒ _____
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Other	⇒ _____
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<b>Total =</b>	⇒ _____
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**SEND FORM TO:**  
**THE RECYCLING SECTION**  
**9200 BASIL COURT**  
**SUITE 300**  
**LARGO MD 20774**  
**FAX # 301-883-6048**  
**ATTN: RECYCLING**  
**E-mail [vebarkdoll@co.pg.md.us](mailto:vebarkdoll@co.pg.md.us)**

\*If your property collects recyclable paper, aluminum, steel, plastic and glass containers together, please enter the total weight of these containers in the Single - Stream category and leave the corresponding individual recyclable categories blank.

I certify that to the best of my knowledge the recycled materials listed are residential wastes generated such that they are not landfilled or incinerated. Our weight records remain on file and will be available for auditing purposes for three (3) years after this filing date.

Printed Name \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Title \_\_\_\_\_

