

**Penn Township
Commercial Recycling Report**

Report Year - _____

Phone 717-637-1561 E-mail pennrecycle@comcast.net

Section 1: Please fill in each section. If something does not apply to your business, please write N/A on the line provided.

Name of business: _____

Business address: _____

Mailing address: _____

Phone: _____ Email: _____

Name and title of person filing report: _____

Type of Business/Organization: _____

Trash hauler's name: _____ Phone: _____

Recycling hauler's name: _____ Phone: _____

Section 2: Identify your recycling hauler and the number of tons by material recycled.

Please attach copies of weight slips or verification from your recycling hauler

Material	Tons	Recycling Hauler Name
Single Stream (all materials together)		
Commingle (plastic, cans and PET bottles)		
Paper (mixed paper, shredded paper)		
Cardboard (OCC, chipboard, cores)		
Newspaper		
Glass (bottles, jars, clear, green, brown)		
Aluminum Cans		
Misc. Metals		
Misc. Plastic (HDPE, Polypropylene, LDPE)		
Other		

Section 3: Please read the following and sign on the line provided.

I certify to the best of my knowledge that the above accurately reports recycling activity from my establishment. I further authorize Penn Township to use this report in their administration of all reporting and grant program procedures established under Pennsylvania Act 101 of 1988, as amended.

Authorized Signature: _____ Date: _____

Print Name: _____ Title: _____

Note: Sections 1 and 3 MUST be completed.