



Borough of Alpine Department of Public Works / Recycling Coordinator

MAIL/FAX/E-MAIL COMPLETED REPORT TO:

ALPINE RECYCLING COORDINATOR, Hilltop Lane, Alpine, NJ 07620 Fax: 201-784-2912

E-MAIL: swehman@alpinenj.org

2018 Recycling/Waste Management Information Form – Project Start

Submit this form to Borough Clerk’s office prior to starting a permitted project.

Date: _____ Permit Type: _____ Permit # _____

Property Owner: Name: _____ Block _____
Address: _____ Lot _____
Email: _____

Contractor: Name: _____ Cell: _____
Company: _____ Tel: _____
Address: _____ City _____ ST: _____
Email: _____

Project: _____
(Tree pruning/removal; Stump removal; New construction; Demolition; Minor Alteration; Major Renovation, etc.)

Estimated: Start Date: _____ Stop Date: _____

Materials to be generated by project: _____
(See Waste Management Tonnage Form attached for material types)

Estimated Amounts: _____

End Market(s): _____

{Lists of NJ Class B and C Recycling Facilities available from our office or online at http://www.state.nj.us/dep/dshw/recycling/recymkts_directory.htm. The Bergen County Utilities Authority also has a market directory on their website at https://bergenutilities.govoffice3.com/vertical/Sites/%7BF76805AC-71CD-427F-AD9B-9E08876F224A%7D/uploads/2017_MD.pdf

By signing below, I acknowledge that I am responsible for complying with the requirements of Borough Ordinance #188//State Law N.J.S.A. 13:1E-96.2 related to recovery of waste generated from the above project. The responsible parties including subcontractors shall specifically investigate opportunities to salvage, reuse and recycle the waste materials to be generated prior to the start of this project.

Signature of Property Owner

Signature of Contractor