Connecticut Department of
ENERGY & ENVIRONMENTAL PROTECTION

BUSINESS RECYCLING CHECKLIST

DEEP Inspectors use this form during their Inspections to assess compliance with the Recycling law, in accordance with Section 22a-241b(d) of the Connecticut General Statutes.

Name of Facility/Site: _____
Address: _____ Town: _____
Date of Inspection: _____ Name of Inspector: _____
Site Contact/Title: _____ Phone Number: _____

Does the company have a solid waste recycling program: __ Yes __ No

If so, please indicate which items are recycled:

Mandatory –

__ Corrugated Cardboard
__ Boxboard*
__ Newspaper
__ Magazines*
__ White Office Paper
__ Colored Office Paper*
__ Leaves (composted)
__ Glass/Metal – Food/Beverage Containers
__ Plastic Containers #1 PET and #2 HDPE*
__ Ni-Cd Rechargeable Batteries
__ Used Oil (crankcase)
__ Scrap Metal
__ Lead-Acid Batteries (from vehicles)
__ Grass Clippings

Other –

__ Electronics
__ Hearing Aid Batteries
__ Shrink Wrap
__ Other (list):
__ Mercury Containing Equipment (including thermometers)
__ Discarded Mail
__ Paper Beverage Containers (Milk cartons and juice packages)

*Materials will be mandatory recyclables in 2012.

Name and title of person assigned to oversee the company's solid waste and recycling efforts:
_____

Name and title of person assigned to manage the company's solid waste and recycling efforts:
_____

Name(s) and title(s) of person(s) who collects solid waste and maintains separation of recyclables (custodial staff person, company/service, etc.):
_____

Name of trash hauler: _____

Does the same hauler provide recycling services: __yes __no
If not, who does: _____

Are separate containers provided: __yes __no

Did you take any photographs during the inspection? __yes __no

Is there a solid waste and recycling contract for services: __yes __no

Name, title, and phone number of contact person for contract information (corporate office, building management, etc.): _____

Is there a waste reduction, pollution prevention, or sustainability program or a "green team" for the company: __yes __no

If yes, describe briefly: _____
_____

Storage areas for recycled material: Inside/Outside
Exposed to storm water? __yes __no

Observations the inspector should make:

1) Is there evidence of a recycling program? Check to see if there are recycling containers in logical locations, both inside and outside the building. Are all containers clearly labeled? For example, posting that clearly explains how recyclables should be managed; office paper recycling bins near copy machines and at individual workstations; bottle and can receptacles in cafeteria or break room; containers for corrugated cardboard in shipping/receiving area; dedicated dumpsters for recyclables near garbage area or shipping/receiving area; etc:

2) Are the recycling containers being properly used? For example, are the recycling bins contaminated with trash? Are the proper recyclables in the designated bins?

3) Do they educate staff as to the proper management of recyclables?