

CVSWMD MONTHLY SOLID WASTE REPORT

This form may be photocopied or reproduced if more space is necessary.

Date: _____ Submitting for the month of _____ Year 20 _____

(The month listed above is for the month the waste was collected and/or disposed of. Monthly reports are required of all licensed haulers and are due within thirty (30) days following the end of each month. Surcharge owed is also due within thirty (30) days of the end of each month)

Hauler or Business Name: _____

Contact Name (if different from above): _____

Contact Phone Number: _____

WASTE COLLECTION (materials that will be buried, burned or land filled)

Tons of Waste, trash, etc collected	Receiving Facility	Surcharge owed (tons X \$30)
	CV Transfer Facility	0-Surcharge collected at facility
Total	Surcharge Owed (enclose check)	

Please check here if payment is being sent separately.

RECYCLING/COMPOST COLLECTION

Material	Destination facility	Total Tons
Total Tons (all materials)		

“Under penalties of perjury, I declare that I have examined this return and the accompanying schedules and to the best of my knowledge and belief it is true, correct, and complete.”

Signature Title

Send completed reports to CVSWMD at 137 Barre St., Montpelier, VT 05602 or by fax to 802-229-1318 or e-mail to administration@cvswmd.org. It is the responsibility of the sender to confirm electronic submittals. For questions, contact us at 802-229-9383 ext. 100.