



RESIDENTIAL MUNICIPAL WASTE AND RECYCLING HAULER REPORT

Cook County Department of Environmental Control

AS REQUIRED UNDER THE PROVISIONS OF THE ENVIRONMENTAL CONTROL ORDINANCE (CHAPTER 30 OF THE MUNICIPAL CODE OF COOK COUNTY): Any waste and recycling hauler operating within the boundaries of Cook County, except within the corporate limits of the City of Chicago, shall submit quarterly reports to the Solid Waste Coordinator of the Cook County Department of Environmental Control. This report must be completed and submitted in its entirety. If further space is required, include additional sheets as attachments to this form as needed.

Municipality: _____

Hauler Name: _____

Estimated Households Serviced: _____

Reporting Period: January 1 – March 31, _____ (Due April 30)
 April 1 – June 30, _____ (Due July 31)
 July 1 – September 30, _____ (Due October 31)
 October 1 – December 31, _____ (Due January 31)

<u>Materials</u>	<u>Method of Pick-up</u>		<u>Quantity</u>
Waste Collected for Permanent Disposal	curbside pickup	drop-box/one-day	_____ tons
Recyclables*	curbside pickup	drop-box/one-day	_____ tons
Yard Waste	curbside pickup	drop-box/one-day	_____ tons
Food Scraps	curbside pickup	drop-box/one-day	_____ tons
Other Collections:			
Electronics	curbside pickup	drop-box/one-day	_____ tons
White Goods	curbside pickup	drop-box/one-day	_____ tons
Household Hazardous Waste	curbside pickup	drop-box/one-day	_____ tons
Pharmaceutical Waste	curbside pickup	drop-box/one-day	_____ tons
Other _____	curbside pickup	drop-box/one-day	_____ tons

***Please check accepted recyclable materials**

Plastics #1 - #5, #7

Newspaper

Mixed Paper and Cardboard

Aluminum

Other _____

Glass Bottles and Jars

Steel/Tin Cans

Plastics #6

Other _____

Certification

I certify, as an authorized representative of the company named below, that I have personally examined and am familiar with all the information submitted in response to the questions contained in this report, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that all information submitted is true, accurate and complete.

Name: _____

Title: _____

Company Name: _____

Mailing Address: _____

Phone Number: _____ Fax Number: _____

E-mail address: _____

Signature: _____ Date: _____

Mail the completed form to:

COOK COUNTY DEPARTMENT OF ENVIRONMENTAL CONTROL
69 W WASHINGTON, SUITE 1900
CHICAGO, IL 60602

For questions and information:
Cook County Department of Environmental Control
www.cookcountyil.gov/environment
312-603-8217
Christopher.lipman@cookcountyil.gov