



MUNICIPAL SOLID WASTE TRANSFER STATION 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 owner or operator of a municipal solid waste transfer station shall submit a quarterly report specifying the quantities of waste and/or recyclable materials accepted for transfer by the municipal solid waste transfer station. This report must be completed and submitted in its entirety and be accompanied by the appropriate payment as calculated below. If further space is required, include additional sheets as attachments to this form as needed.

Facility Name and Address: _____

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)

A) Weight of Material Received by the Transfer Station (tons)	_____
B) Weight of Materials Removed From The Waste Stream To Be Recycled (tons)	_____
C) Weight of Materials Transferred For Disposal (Line A minus Line B) (tons)	_____
D) Fee Due (Line C multiplied by \$0.22)	=====

Department of Revenue Use Only

Allocation Code: **4310**

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 report, payment coupon, and payment to:

**COOK COUNTY DEPARTMENT OF REVENUE
118 N. CLARK STREET, ROOM 1160
CHICAGO, IL 60602**

For questions and information, contact:

Cook County Department of Environmental Control
312-603-8217
Christopher.lipman@cookcountyil.gov

Department of Revenue Use Only
Allocation Code: 4310

MAIL ALL PAYMENTS ALONG WITH THIS FORM TO:
 COOK COUNTY DEPARTMENT OF REVENUE
 118 N. CLARK STREET, ROOM 1160
 CHICAGO, IL 60602



COOK COUNTY
 ENVIRONMENTAL CONTROL
 (312) 603 - 8217

ENVIRONMENTAL CONTROL
SOLID WASTE AND RECYCLING

Facility Name:		Contact Number:	
Facility Address:	City:	State	Zip:

PLEASE SELECT ONE OF THE FOLLOWING BELOW:

ALLOCATION CODE	DESCRIPTION	AMOUNT
4309	EW - LANDFILL TIPPING FEES (Special Fund 585) - Quarterly	
4310	EW - TRANSFER STATION TIPPING FEES (Special Fund 585) - Quarterly	
4312	EW - RECYCLING FACILITY PERMIT APPLICATION FEES (General fund) - Annually	
4311	EW - CLEAN CONSTRUCTION AND DEMOLITION DEBRIS (CCDD) PERMIT APPLICATION FEES (General Fees) - Annually	
	TOTAL AMOUNT	\$

Detach Below

PAYMENTS WILL NOT BE ACCEPTED WITHOUT THIS COMPLETED COUPON

ENVIRONMENTAL CONTROL - SOLID WASTE AND RECYCLING

MAIL ALL PAYMENTS ALONG WITH COUPON TO:
 COOK COUNTY DEPARTMENT OF REVENUE
 118 N. CLARK STREET, ROOM 1160
 CHICAGO, IL 60602

FACILITY NAME: _____

PHONE NUMBER: _____

FACILITY ADDRESS: _____

Date of Application: _____

4309	EW - LANDFILL TIPPING FEES	\$
4310	EW - TRANSFER STATION TIPPING FEES	\$
4312	EW - RECYCLING FACILITY PERMIT APPLICATION FEES	\$
4311	EW - CLEAN CONSTRUCTION & DEMOLITION DEBRIS (CCDD) PERMIT APPLICATION FEES	\$
AMOUNT DUE		\$

FOR OFFICE USE ONLY

Account/Permit Number: _____