Part 1

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Facility Name*:		Program Interest # (6 digits)*:	
Submitted By*:			
Phone #*:		Reporting Period*:	
			Year
		MONTHLY SUMMARY	
NOTE	WASTE TYPES	SOLIDS TOTAL AMOUNT (IN TONS)	
The filing of this report is required by New Jersey Solid Waste	10	Municipal Waste*	←
Regulation N.J.A.C. 7:26-2.13(e). Failure to submit this report on a	13	Bulky Waste*	←
monthly basis may result in the imposition of a penalty per N.J.S.A.	13C	Construction & Demolition Waste*	←
13:1E-9 <u>et seq</u> . and/or revocation of license.	23	Vegetative Waste*	←
A complete monthly report consists	25	Animal & Food Processing Wastes*	INCOMING TONNAGES
of one page each of Form DWM-006B-1, 2, and 3 (Part 1, Part 2, &	27	Dry Industrial Waste*	*Required Field Enter 0 if no inbound waste for that type
Parts 3a, 3b, & 3c). Additional Part 2, 3a, 3b, & 3c forms must be filed	27A	Asbestos/Asbestos-Containing Waste*	←
for each final disposal facility and/or county of waste origin.	271	Incinerator Ash*	←
All forms (Parts 1, 2, 3a, 3b, & 3c)	Other	Identify:	←
must be submitted to the NJDEP (address below) within 20 days		Total Inbound Solid Waste	←
after the last day of each month.			
		Total Disposed as Solid Waste (From Part 2a or 2c)	
		Total Recovered for Recycling (From Part 3b)	
		Total Recovered for Beneficial Reuse (From Part 3c)	
I certify that the information en	ntered abo	ove is true to the best of my knowledge.	
Signature:		Title: Date:	
ТН	IS FORM	I MUST BE SUBMITTED WITHIN 20 DAYS	

AFTER THE LAST DAY OF EVERY MONTH TO:

Mail Code: 401-02C

NJ Department of Environment Protection Division of Solid & Hazardous Waste Bureau of Solid Waste Planning & Licensing

401 East State Street

P.O. Box 0420 Trenton, NJ 08625-0420

Attn: Carol Puca (609) 984-4250 njdepswreporting@dep.nj.gov &

Attn: County SW Coordinator of the county where facility is located

For list, see Program web page at: http:/www.state.nj.us/dep/dshw

Part 2a

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Final Disposal Facility Name:										
Final Disposal Facility Location:	M	unicipality/	County/State	<u> </u>	Reportii	ng Period:	Mon	th	Yes	ar
Note: A separate (I of Waste Or	-	-	-		ch differer	nt "Final D	Pisposal Fa	cility", a	nd/or "C	County
COUNTY OF WASTE ORIGIN:	accurately i	eporting the	fied as transf	er stations a waste type	nd/ or mater by county a	ED AS SC rials recovery and municipal	facilities (TS	S/ MRF) w		n facility
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	Other	TOTAL TONS
TOTAL TONS										

Part 2b

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Note: A separate (Part 2b) page must be completed for each different "County of Waste Origin." Report all waste in TONS. Part 2b shall identify the weights received by your facility that are designated for disposal at an undeclared disposal facility and must be identified by county and municipality of origin as well as waste type, pursuant to N.J.A.C. 7:26-2.13(e) i.

COUNTY OF WASTE ORIGIN:		WASTE TYPES DISPOSED AS SOLID WASTE									
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	Other	TOTAL TONS	
TOTAL TONS											

Part 2c

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Final Disposal Facility Name:														
Final Disposal Facility Location:	Municipality/County/State				ng Period:	Mont		Yea						
Note: A separate (Pa waste in <u>TON</u>		ge must t							Report al	1				
		WASTE TYPES DISPOSED AS SOLID WASTE												
	10	13	13C	23	25	27	27A	27I	Other	TOTAL TONS				
NOTE														
Part 2c shall identify														
the weights sent out to a														
declared disposal														
facility, this information must be														
marked by disposal														
facilities name, location and waste type,														
pursuant to N.J.A.C.														
7:26-2.13(e) ii.														
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_														
-														
-														
<u> </u>														
<u> </u>														
<u> </u>														
		1	1	1	1	1		1	1	1				

Part 3a

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Facility Name:				Repor	ting Period	1:			
_				1	C	Moi	1th	Year	•
Note: A separate (Par waste in <u>TONS</u>		nust be cor	mpleted for	each differ	ent "Coun	ty of Waste	e Origin."	Report	all
COUNTY OF WASTE ORIGIN:	WAS	ГЕ (МАТ	ERIAL) T		COVEREI CIAL RE		ECYCLIN	NG AND	/OR
MUNICIPALITY	10R	13R	13C-R	23R	25R	27R	27I-R	Other	TOTAL TONS
					_				
TOTAL TONS		_							

Facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

DSHW-006B3 Rev. 6/13 **Part 3b**

TOTAL TONS

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Fac	cility Name:				Repo	orting Per	iod:							
					-		1	Month		Year				
No	te: Report all waste i	n <u>TONS</u> .												
		WA	WASTE (MATERIAL) TYPES RECOVERED FOR RECYCLING											
	RECYCLING MARKET	10R	13R	13C-R	23R	25R	27R	27I-R	Other	TOTAL TONS				

Facility must maintain records of specific materials handled and end-m	arkets for NJDEP review upon request.

DSHW-006B3 Rev. 6/13 **Part 3c**

New Jersey Department of Environmental Protection Division of Solid and Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Facility Name:		Reporting Period: Month Year											
				1	υ		Month		Year				
Note: Report all waste	in <u>TONS</u> .												
	WASTE	E (MATE	RIAL) TY	PES RE	COVERI	ED FOR	BENEFI	CIAL R	EUSE				
BENEFICIAL REUSE MARKET	10R	13R	13C-R	23R	25R	27R	27I-R	Other	TOTAL TONS				
TOTAL TONS													

Facility must maintain records of specific materials handled and end-markets for NJDEP review upon request.

Part 2b

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

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TOTAL TONS													

Part 2b

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Part 2b

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Part 2b

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TOTAL TONS											

Part 2a

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Final Disposal Facility Name:													
Final Disposal Facility Location:	M	:h	Year										
Note: A separate (I of Waste Or		-	-		h differer	nt "Final D	Pisposal Fa	cility", a	nd/or "C	County			
COUNTY OF WASTE ORIGIN:	accurately r	WASTE TYPES DISPOSED AS SOLID WASTE Note: Facilities classified as transfer stations and/ or materials recovery facilities (TS/ MRF) who are incapable of accurately reporting the flow of each waste type by county and municipality of origin to the final destination facility should submit Part 2b and Part 2c in place of Part 2a.											
MUNICIPALITY	10	13	13C	23	25	27	27A	27I	Other	TOTAL TONS			
TOTAL TONS													

Part 2c

New Jersey Department of Environmental Protection Division of Solid & Hazardous Waste

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Final Disposal Facility Name:											
Final Disposal Facility Location:	Municipality/County/State				Reporting Period:		Month		Yea	Year	
Note: A separate (Powaste in TON)		ige must t	e complete	ed for eac	ch differer	nt "Final D	isposal Fa	cility". I	Report al	1	
	WASTE TYPES DISPOSED AS SOLID WASTE										
	10	13	13C	23	25	27	27A	27I	Other	TOTAL TONS	
NOTE											
Part 2c shall identify											
the weights sent out to a											
declared disposal facility, this											
information must be											
marked by disposal facilities name, location											
and waste type,											
pursuant to N.J.A.C. 7:26-2.13(e) ii.											
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