



# Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road, MS 4555  
Tallahassee, Florida 32399-2400

DEP Form #: 62-722.400(9)(b), F.A.C.  
Form Title: Reporting form for Recovered Materials  
Effective Date: December 17, 2013  
Incorporated in Rule: 62-722.400, F.A.C.

## REPORTING FORM FOR RECOVERED MATERIALS

USE ONE FORM FOR EACH COUNTY FROM WHICH A FACILITY HANDLED RECOVERED MATERIALS  
Submit to: 2600 Blair Stone Rd. MS 4555 Tallahassee, FL 32399-2400

YEAR OF DATA: \_\_\_\_\_

- 1. Certified Company Name: \_\_\_\_\_
- 2. Facility Name: \_\_\_\_\_
- 3. Address: \_\_\_\_\_
- 4. City/Zip: \_\_\_\_\_
- 5. County: \_\_\_\_\_
- 6. County of Origin: \_\_\_\_\_
- 7. Contact person & Phone Number: \_\_\_\_\_

(Check one of the following)

DEP Annual:

Local Government Quarterly:

- 1st Quarter  2nd Quarter
- 3rd Quarter  4th Quarter

8. RECOVERED MATERIALS		TOTAL TONS
PAPER	Old Newspapers (ONP).....	_____
	Old Corrugated Containers (OCC).....	_____
	High Grades/Office Paper.....	_____
	Mixed Paper.....	_____
	Subtotal Paper:	_____
PLASTIC	Plastic Bottles.....	_____
	All Other Plastic.....	_____
	Subtotal Plastic:	_____
METALS	Aluminum Cans.....	_____
	Other Non-Ferrous.....	_____
	Steel Cans.....	_____
	Other Ferrous.....	_____
Subtotal Metal:	_____	
GLASS	Glass Containers ... ..	_____
RUBBER	Rubber (do not include tires).....	_____
TEXTILES	Textiles.....	_____

9. REPORTED TONS OF RECOVERED MATERIALS..... TOTAL TONS: \_\_\_\_\_

10.\* TOTAL TONS OF RECOVERED MATERIALS RECEIVED OR HANDLED..... \_\_\_\_\_

11.\* AMOUNT OF SOLID WASTE DISPOSED..... \_\_\_\_\_

12.\*Name and Address of Disposal Facilities or Waste Haulers receiving and Collecting Solid Waste from this Facility:

Company name	Address	City & Zip Code
_____	_____	_____
_____	_____	_____

\*These items are to be completed only if the County of Origin (6) matches the County (in item 5) on this form

13. Under penalty of perjury, I hereby certify that the foregoing information is true and correct to the best of my knowledge and belief. I further represent that the foregoing (other than facility name and location) constitutes trade secrets, as defined in s. 812.081 (1)(c), F.S., and is to be held as confidential information, exempt from the provisions of s. 119.07(1), F.S., unless I have entered my initials in the box at item 13 below. Unauthorized release of this information is prohibited.

Signature (authorized representative)	Title	Date
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14.  By entering my initials in this box, I hereby represent that all information contained hereon is not confidential or trade secret and may be released to the public