

RECYCLING PLAN FOR DEMOLITION

Property Name _____

Property Address _____

Contractor Name _____

Contractor Address _____

Contractor Phone Number _____

Recycling Program Point-of-Contact _____

Phone Number _____ Building Type _____

Refuse Service Provider _____

Recycling Service Provider _____

RECYCLING METHOD USED: _____

RECYCLING MATERIALS INCLUDED IN THE RECYCLING PROGRAM:

_____ Lumber	_____ Metal	_____ Brick
_____ Aluminum Siding	_____ Vinyl Siding	_____ Cedar Siding
_____ Glass	_____ Wood Products	_____ Doors
_____ Copper Wiring	_____ Plumbing, including PVC pipes	
_____ Plastic film	_____ Fluorescent bulbs	_____ Furnace
_____ Other measures: _____		

SOURCE REDUCTION METHODS IMPLEMENTED:

_____ Compost yard waste
_____ Use fuel efficient vehicles and equipment

- _____ Recycle oil and tires from vehicles and equipment
 - _____ Perform regular maintenance on all vehicles and equipment
 - _____ Properly dispose of hazardous material from the job site (asbestos, etc.)
 - _____ Other measures: _____
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Signature of Responsible Party

One copy of this form must be completed and delivered to:

Ms. Rhonda Dowd
c/o Public Works
601 Conkey Street
Hammond, IN 46320