



# Commercial Recovered Materials Hauler Registration Program

## APPLICATION

*The Margate City Commission has established a Commercial Recovered Materials Hauler Registration Program. This application is based on the information required by Sec. 19-12, "Private collection services for recovered materials at commercial establishments", Code of Ordinances of the City of Margate, Florida, Ordinance 2015-9.*

*Please submit one original and one copy of the completed application along with the annual non-refundable registration fee of \$200.00 or the \$100.00 transfer fee to the Department of Environmental and Engineering Services at 901 NW 66 Avenue, Suite A, Margate, FL 33063. Annual registration expires September 30 each year.*

COMPANY INFORMATION			
Company Name:	Today's Date:		
Address:			
Email:	Phone:	Fax:	
Type of Organization:	Sole Proprietorship	Partnership	Corporation
(Complete the section below for the selected type of organization)			

SOLE PROPRIETORSHIP
Owner/Operator's Name:

PARTNERSHIP			
Name of Registered Agent:		State of Organization:	
Address:		Phone:	Fax:
Names of Partners	Address	Phone	Limits (if any)



## Commercial Recovered Materials Hauler Registration Program

### Application (continued)

CORPORATION		
Name of Registered Agent:	State of Incorporation:	
Address:	Phone:	Fax:
<u>Corporate Officers</u>		
President:	Treasurer:	
Vice President:	Secretary:	
<u>For Manager-Managed Limited Liability Corporation</u>		
Manager's Name:		
Address:	Phone:	Fax:
<u>For Publicly Held Corporation (Twenty-five or more stockholders)</u>		
Local Managing Officer's Name:		
Address:	Phone:	Fax:

PLEASE ATTACH THE FOLLOWING DOCUMENTS (IF APPLICABLE)	CHECK IF INCLUDED
Proof of current corporate standing.	
List of all officers from State of Incorporation; If foreign corporation, information certifying that applicant is qualified to do business in the State of Florida.	
If fictitious name, proof of registration.	
Copy of the recovered materials certification under Section 403.7046, F.S. ( <b>REQUIRED</b> )	
Form A – Vehicle List ( <b>REQUIRED</b> )	
Form B - Account and Container List ( <b>REQUIRED</b> )	



# Commercial Recovered Materials Hauler Registration Program

## Application (continued)

By signing below, the registrant acknowledges and agrees to abide by the requirements of Section 19-12 of the Code of Ordinances of the City of Margate, as amended from time to time, which includes, but is not limited to:

- A. That recovered materials will be processed at a recovered materials facility satisfying the requirements of Section 403.7046, Florida Statutes, as amended from time to time.
- B. That the mixing of recovered materials with garbage or trash contaminates the product and renders it as garbage or trash. In other words, garbage and trash shall not be mixed with recovered materials and shall be source separated. Containers of recovered materials which contain more than ten (10) percent solid waste, by weight or volume, shall not be deemed source separated.
- C. In no event shall the registrant perform commercial establishment solid waste collection services under the guise of collecting, transporting, processing, or disposing of recovered materials.
- D. That the service shall only be provided between the hours of 7:00 a.m. and 7:00 p.m., Monday through Saturday, with no collections on Sunday. The City Manager may modify times and days for collection in certain areas due to noise or other concerns. (Sec. 19-6 of the Code of Ordinances of the City of Margate)
- E. That no deliveries of recovered materials shall be made to a facility which is permitted as a Solid Waste Management facility and not permitted for processing of recovered material unless the registrant has given prior notification to the City Manager and registrant has received authorization to utilize such a facility.
- F. That if any information changes during the term of the registration, the registrant shall report those changes to the City within 30 calendar days of the change.
- G. That a copy of the Florida Department of Environmental Protection (FDEP) recovered materials reporting form submitted to the FDEP will simultaneously be provided to the City, if applicable.
- H. That registrant shall pay the City the required annual registration renewal fee between September 1 and October 1 of each year.
- I. That a copy of the vehicle list (Form A) and account and container list (Form B) be submitted concurrent with the registration application and annual renewal.
- J. That a copy of the monthly report (Form C) be submitted to the City's Department of Environmental and Engineering Services on or before the 15<sup>th</sup> of the following month. For example, Form C for the month of January is due by February 15<sup>th</sup>.

I hereby state that I am authorized by the company to execute this document, thereby legally binding the company to its requirements. I hereby state that I have read, understand, and will ensure that I and the company I represent will comply with the City Ordinance, and I also state that I will ensure that I and the company I represent will comply with and obey all applicable federal, state, and local laws, regulations, and ordinances.

Dated this \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_

Company:

Local Mailing Address:

Phone Number:	Fax:	Email:
Name:		Title:
Signature:		



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### Application (continued)

FOR OFFICIAL USE ONLY		
Type: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Transfer	Application Complete: <input type="checkbox"/> Yes	<input type="checkbox"/> No
Payment Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	Check # _____	Cash <input type="checkbox"/>
Application Reviewed By: _____	Application Recommended for Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Application Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
Director of DEES or Designee



# Commercial Recovered Materials Hauler Registration Program

## Form A - Vehicle List

**Company Name:**

Date:



# Commercial Recovered Materials Hauler Registration Program

## **Form B – Account and Container List**

**Company Name:**

Date:

**Type:** Type of Container (Cart, Dumpster, Compactor, etc.)  
**Size:** Container Size in Yards (0.5 cubic yards = 95-gallon cart)  
**Frequency:** Number of Collections Per Week



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## Form C – Monthly Report

Company Name:

Month:

### Tonnage

	<u>Estimated Tons</u>
Total Material Collected from Margate (A + B)	
Recovered Materials Recycled or Reused (A)	
Solid Waste Disposed (B)	

### Containers Added

<u>Account Name</u>	<u>Address</u>	<u>Type</u>	<u>Size</u>	<u>Frequency</u>

### Service Level Changed or Deleted

<u>Account Name</u>	<u>Previous Service Level</u>			<u>New Service Level</u>		
	<u>Type</u>	<u>Size</u>	<u>Frequency</u>	<u>Type</u>	<u>Size</u>	<u>Frequency</u>

Type: Type of Container (Cart, Dumpster, Compactor, etc.)

Size: Container Size in Yards (0.5 cubic yards = 95-gallon cart)

Frequency: Number of Collections Per Week