

# ULSTER COUNTY RESOURCE RECOVERY AGENCY

## Board of Directors

Frederick Wadnola, Chairman  
David Gordon, Esq., Vice Chairman  
Charles Landi, Treasurer  
Brian Devine, Member  
John "Jack" Hayes, Member

## Legal Staff

Kenneth Gilligan, Esq.



*Executive Director*

**TIMOTHY B. ROSE, P.E., M.P.A.**

999 Flatbush Road  
P.O. Box 6219  
Kingston, NY 12402

[www.ucrra.org](http://www.ucrra.org)

## Administrative Staff

Timothy DeGraff, C.P.A., Controller  
Charles Whittaker, Operations Manager  
Vacant, Recycling Coordinator  
Thomas Briggs, Compliance Officer  
Amy Lopiano, Chief Accounting Clerk

E-Mail: [ucrra@ucrra.org](mailto:ucrra@ucrra.org)

Phone: (845) 336-0600

Fax: (845) 336-4129

---

November 1, 2019

Dear Hauler,

Enclosed you will find the **2020 Hauler License Application**. Be advised that no Hauler shall collect, transport, or dispose of solid waste and/or recyclable materials generated within Ulster County without first obtaining a Hauler License issued by the Agency. The term of each license issued by the Agency expires on December 31<sup>st</sup> of the year of issuance, unless issued in the month of December, in which case it shall expire on the 31<sup>st</sup> day of December of the following year. **With this in mind, applications for renewal in 2020 will be accepted between December 1 and December 31, 2019.** Listed below are some important changes that were made to the application and recycling enforcement, as well as some repeats from 2019:

- 1.) **As a reminder, the Flow Control Law requires a permit from this Agency for any truck that will be used to pick up and carry MSW and transport it to either of this Agency's transfer stations.**
- 2.) **Applications must be completed in full and returned by the close of business on December 31, 2018.**
- 3.) **The Agency has received numerous calls with recycling complaints, which have been and will continue to be investigated. Please ensure that your customers are offered proper recycling containers, as well as outreach/education on what materials are acceptable for recycling in your collection program.**

**Also, please ensure that during collection, recyclables are not being mixed with garbage in the same collection truck. Ulster County's Source Separation Law (Local Law Number 4 of 2010) makes it an unlawful act for "[a]ny hauler to collect, transport, store, or deliver regulated recyclable materials that contain solid waste."**

- 4.) **Please advise your drivers to adhere to the posted speed limits for everyone's safety.**
- 5.) **Current proof of insurance (automotive, general, and worker's comp) must be up to date and on file with the Agency.**

The following materials are available at the Agency's office. You may also download them via our website or request copies by phone that can be picked up, mailed, or emailed.

- 1.) Local Law Number 4 of 2010, A Local Law Amending Local Law Number 8 Of 1991 As Amended By Local Law Number 8 of 2007 Ulster County Mandatory Source Separation And Recycling Law
- 2.) Local Law Number 9 of 1991, A Local Law Providing For The Management Of Solid Waste In The County Of Ulster
- 3.) Local Law Number 10 of 2012, A Local Law Amending Local Law Number 9 Of 1991, Ulster County Solid Waste Management Law

Should you have any questions regarding the application process, please feel free to contact me at (845) 336-0600 ext. 126 or by email at [tbri@ucrra.org](mailto:tbri@ucrra.org). Thank you for your cooperation.

Sincerely,

Thomas A. Briggs  
Compliance Officer

CC: Timothy Rose, Executive Director; File

# ULSTER COUNTY RESOURCE RECOVERY AGENCY

## Board of Directors

Fred Wadnola, M.S.Ed., C.A.S., Chairman  
Katherine Beinkafner, Ph.D., P.G., Vice Chairman  
Charles Landi, Treasurer  
Lisa Mitten, LEED GA, MPP, MS-Ed., EMIT, Member  
JoAnne Myers, Ph.D., Member

## Legal Staff

Kenneth Gilligan, Esq.



Executive Director  
**TIMOTHY B. ROSE, P.E., M.P.A.**  
999 Flatbush Road  
P.O. Box 6219  
Kingston, NY 12402

## Agency Staff

Timothy DeGraff, CPA, Controller  
Charles Whittaker, Director of Operations & Safety  
Angelina Peone, Recycling Coordinator  
Melinda France, Recycling Educator  
Thomas Briggs, Compliance Officer  
Amy Lopiano, Chief Accounting Clerk

E-Mail: [ucrra@ucrra.org](mailto:ucrra@ucrra.org)  
Website: [www.ucrra.org](http://www.ucrra.org)  
Phone: (845) 336-0600  
Fax: (845) 336-4129

# 2020

## COMMERCIAL HAULER LICENSE APPLICATION



HAULER NAME: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

## TABLE OF CONTENTS:

|  |    |
|--|----|
| TABLE OF CONTENTS.....                                     | 3  |
| INSTRUCTIONS AND GENERAL INFORMATION.....                  | 5  |
| COMPANY / ORGANIZATION INFORMATION.....                    | 7  |
| CORPORATION .....  | 7  |
| EXPERIENCE.....  | 7  |
| TRADE BUSINESS AND PARTNERSHIPS.....                       | 7  |
| ULSTER COUNTY DEPARTMENT OF HEALTH LICENSE NO. ....        | 8  |
| UCRRA TRANSFER STATION(S) USED .....                       | 8  |
| TYPES OF MATERIAL ACCEPTED AT THE UCRRA FACILITIES.....    | 8  |
| VEHICLE STORAGE.....                                       | 8  |
| VEHICLE INFORMATION .....                                  | 9  |
| CONTAINER LOCATIONS.....                                   | 11 |
| DAILY ROUTE AND PICKUP SCHEDULE .....                      | 13 |
| INSURANCE .....  | 15 |
| ACKNOWLEDGEMENT .....                                      | 15 |
| LICENSEE’S CERTIFICATION – INDIVIDUAL OR PARTNERSHIP ..... | 16 |
| CERTIFICATE OF AUTHORITY - CORPORATIONS.....               | 16 |
| ACCOUNTS RECEIVABLE COLLECTION PROCEDURES.....             | 26 |
| TRANSFER STATION AND MRF TIPPING FLOOR SAFETY RULES .....  | 30 |

**INSTRUCTIONS AND GENERAL INFORMATION:**

1. Please type or print clearly.
2. **This application form must be completed in full.**
3. All certifications must be signed by an officer or principal of the applicant.
4. Each application must be submitted with the application fee of \$200.00 \$ 200.00
5. Please include \$100.00 for each vehicle and/or trailer (as defined below) to be used by you in Ulster County:  
Total number of vehicles from page 9: \_\_\_\_\_ x \$100.00 \$ \_\_\_\_\_  
Total enclosed: \$ \_\_\_\_\_
6. Those applicants who require additional information or assistance may contact the Ulster County Resource Recovery Agency at (845) 336-0600 between 7:30am and 3:30pm, Mon-Fri.
7. **Completed applications will be accepted between December 1 and December 31, 2019.**
8. Please keep a copy of this application for your records.

**Term of License:**

Each license issued shall be valid for a term expiring on December 31<sup>st</sup> of the year of issuance, unless issued in the month of December, in which case it shall expire the 31<sup>st</sup> day of December of the next year. License renewals shall be considered in the same manner and subject to the same conditions as original applications.

- Any vehicle and/or trailer that hauls MSW **must** be registered and permitted.
- “Trailer” is defined as any structure carrying MSW attached to a vehicle.
- There is a separate \$100 registration fee for each vehicle and/or trailer.

**Agency hours of operation:**

**Ulster:**

- **Ulster Transfer Station:**  
Mon – Sat from 6:00am – 3:00pm
- **Materials Recovery Facility**  
Mon – Fri from 7:00am – 4:00pm
- **Administrative Office**  
Mon – Fri from 7:30am-3:30pm

**New Paltz:**

- **New Paltz Transfer Station:**  
Mon – Fri from 7:00am – 4:00pm, Sat from 7:00am – 12:00pm (Apr – Dec only)

**COMPANY/ORGANIZATION INFORMATION:**

**\*\*\* All information is required \*\*\***

**Business Name:** \_\_\_\_\_

**Owner, Officer, Etc.:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

**Email:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone (Day):** \_\_\_\_\_ **Ext.:** \_\_\_\_\_

**Phone (Evening):** \_\_\_\_\_ **Ext.:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**CORPORATION:**

Please provide the names and addresses of each officer and director:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EXPERIENCE:**

Please briefly describe the experience of your business of collection and disposal of refuse and similar material below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TRADE BUSINESS AND PARTNERSHIPS:**

Applicants conducting business under a trade name or a partnership must submit a copy of the trade name or partnership certificate duly certified by the Clerk of the county in whose office the certificate was filed.

**ULSTER COUNTY DEPARTMENT OF HEALTH LICENSE NO.:** \_\_\_\_\_ (Required)

**UCRRA TRANSFER STATION(S) USED** (circle one):            **ULSTER**            **NEW PALTZ**            **BOTH**

**TYPES OF MATERIAL ACCEPTED AT THE UCRRA FACILITIES:**

| MATERIAL  | ACCEPTED AT             | CHECK ALL THAT APPLY |
|---|-------------------------|----------------------|
| Municipal Solid Waste (MSW)                                   | Ulster / New Paltz TS   |                      |
| Regulated Recyclables   |                         |                      |
| Commingled Containers (Glass, Plastic, Metal)                 | Ulster MRF              |                      |
| Paper / Mixed News  | Ulster MRF              |                      |
| Corrugated Cardboard (OCC)                                    | Ulster MRF              |                      |
| Industrial Waste (Special license modification from DEC req.) | Ulster / New Paltz TS   |                      |
| Source Separated Organic Waste / Food Waste                   | Ulster Compost Facility |                      |
| Yard Waste  | Ulster Compost Facility |                      |
| Construction and Demolition (C&D)                             | Ulster / New Paltz TS   |                      |

**THE FOLLOWING TYPES OF MATERIAL ARE NOT ACCEPTED AT ANY UCRRA FACILITIES:**

- Medical Waste
- Friable Asbestos
- Hazardous Waste
- Single Stream Recycling

Please call the Agency for information regarding the above items.

**VEHICLE STORAGE:**

Are there any terminals or facilities in which the collection vehicles can or may be stored at other than the main facility located at the address above?

Yes: \_\_\_\_            No: \_\_\_\_

If yes, please indicate the locations below:

| STREET ADDRESS | CITY | STATE | ZIP |
|----------------|------|-------|-----|
|                |      |       |     |
|                |      |       |     |
|                |      |       |     |
|                |      |       |     |
|                |      |       |     |

**VEHICLE INFORMATION:**

(Copy or attach additional sheets as necessary)

**TOTAL NUMBER OF VEHICLES:** \_\_\_\_\_

Please indicate the following information for your vehicles:

**Any change in truck registration needs to be reported to the Agency with 24 hours of such change, ie: changed registration plates, addition of or deletion of any truck(s). Please be aware that trucks that are not listed on your permit with the Agency may not be allowed to dump at either facility.**

Hauler Truck ID – This is your company truck identification. e.g.: PK1 PK2 T1 R1 etc.

Model – Please indicate the type of vehicle according to the following key:

|                      |    |                               |    |
|----------------------|----|-------------------------------|----|
| PACKER.....          | V1 | TRACTOR TRAILER.....          | V5 |
| ROLL-OFF.....        | V2 | TRAILER – CONTAINING MSW..... | V6 |
| RECYCLING TRUCK..... | V3 | OTHER (explain).....          | V7 |
| SPLIT BODY.....      | V4 |                               |    |

| HAULER TRUCK ID | OWNERSHIP | MAKE | YEAR | MODEL OF CHASSIS | BODY TYPE | CUBIC CAPACITY OR TARE WEIGHT | COLOR | VIN NUMBER | PLATE NUMBER | COMMUNITY OF OPERATION |
|-----------------|-----------|------|------|------------------|-----------|-------------------------------|-------|------------|--------------|------------------------|
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |



| HAULER TRUCK ID | OWNERSHIP | MAKE | YEAR | MODEL OF CHASSIS | BODY TYPE | CUBIC CAPACITY OR TARE WEIGHT | COLOR | VIN NUMBER | PLATE NUMBER | COMMUNITY OF OPERATION |
|-----------------|-----------|------|------|------------------|-----------|-------------------------------|-------|------------|--------------|------------------------|
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |
|                 |           |      |      |                  |           |                               |       |            |              |                        |

**CONTAINER LOCATIONS:**

Please indicate the number and location of all waste and recyclable materials containers distributed by you to customers within Ulster County. All containers must be clearly marked with your company information.

| MUNICIPALITY KEY  |      |                         |      |
|-------------------|------|-------------------------|------|
| MUNICIPALITY      | CODE | MUNICIPALITY            | CODE |
| <b>TOWNS</b>      |      | <b>SAUGERTIES</b> ..... | 15   |
| DENNING .....     | 1    | <b>SHANDAKEN</b> .....  | 16   |
| ESOPUS .....      | 2    | <b>SHAWANGUNK</b> ..... | 17   |
| GARDINER .....    | 3    | <b>ULSTER</b> .....     | 18   |
| HARDENBURGH ..... | 4    | <b>WAWARSING</b> .....  | 19   |
| HURLEY .....      | 5    | <b>WOODSTOCK</b> .....  | 20   |
| KINGSTON .....    | 6    | <b>VILLAGES</b>         |      |
| LLOYD .....       | 7    | <b>ELLENVILLE</b> ..... | V1   |
| MARBLETOWN .....  | 8    | <b>NEW PALTZ</b> .....  | V2   |
| MARLBOROUGH ..... | 9    | <b>SAUGERTIES</b> ..... | V3   |
| NEW PALTZ .....   | 10   | <b>CITY</b>             |      |
| OLIVE .....       | 11   | <b>KINGSTON</b> .....   | C1   |
| PLATTEKILL .....  | 12   |                         |      |
| ROCHESTER .....   | 13   |                         |      |
| ROSENDALE .....   | 14   |                         |      |

| CONTAINER TYPE<br>i.e. toter, dumpster, roll off, etc. | TOTAL SIZE – CUBIC YARD | LOCATION OF CONTAINERS<br>(MUNICIPALITY CODE) | NUMBER OF CONTAINERS<br>(PER MUNICIPALITY) | WASTE (W) OR RECYCLING<br>MATERIALS (RM) |
|--|-------------------------|---|--|--|
|  |                         |   |  |  |
|  |                         |   |  |  |
|  |                         |   |  |  |

| CONTAINER TYPE | TOTAL SIZE – CUBIC YARD | LOCATION OF CONTAINERS<br>(MUNICIPALITY CODE) | NUMBER OF CONTAINERS<br>(PER MUNICIPALITY) | WASTE (W) OR RECYCLING<br>MATERIALS (RM) |
|----------------|-------------------------|---|--|--|
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |
|                |                         |   |  |  |

**DAILY ROUTE AND PICKUP SCHEDULE:**

Applicant’s proposed daily route and pickup schedule for each area and building to be serviced. (Copy or attach additional sheets as necessary)

**NOTE: Within thirty (30) days of occurrence, any changes in the daily route and pickup schedule shall be reported, in writing, to the Agency.** This shall not apply to such routes and special districts as are provided for by contract with a Municipality.

**If any company reports** and/or route sheets clearly indicate your daily route, you may submit these instead.

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---



**INSURANCE:**

Before a license may be issued by the Agency, each applicant shall file with the Agency proof of the following insurance coverage, consisting of a certificate of the insurance carrier.

- Worker’s compensation insurance or proof of exemption.
- Disability benefits insurance.
- Bodily Injury Liability Insurance in an amount not less than **ONE MILLION AND 00/100 (\$1,000,000.00) DOLLARS** for each occurrence, and in an amount not less than **ONE MILLION AND 00/100 (\$1,000,000.00) DOLLARS** general aggregate.
- Property Damage Liability Insurance in an amount not less than **ONE MILLION AND 00/100 (\$1,000,000.00) DOLLARS** for each occurrence and in an amount of not lot less than **ONE MILLION AND 00/100 (\$1,000,000.00) DOLLARS** general aggregate.

**Please note: a current certificate of insurance must be on file with the Agency at all times. Be sure to send a copy of your certificate to the Agency when your policy renews.**

**REVOCAION OR DENIAL OF LICENSES:**

The Agency is authorized to deny any application or suspend or revoke a hauler license issued where one or more situations exist as stated within **Local Law Number 10 of 2012**.

**ACKNOWLEDGEMENT**

I, \_\_\_\_\_, hereby request a license to collect municipal solid waste within the County of Ulster. I agree that the information provided is true and accurate. I also agree, if the license is granted, to pay the fees charged by the Ulster County Resource Recovery Agency for the disposal of the materials under this license, and to comply with the rules and by-laws for the use of facilities of the Ulster County Resource Recovery Agency dated April 1993; as amended August 1997. I further acknowledge that I have received and reviewed a copy of Local Law Number 4 of 2010, Local Law Number 9 of 1991 and Local Law Number 10 of 2012.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**LICENSEE’S CERTIFICATION – INDIVIDUAL OR PARTNERSHIP:**

STATE OF NEW YORK                    )  
   ) ss  
COUNTY OF ULSTER                    )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, before me personally came \_\_\_\_\_, to me known, and known to me to be the same person described in and who executed the same for the purpose herein mentioned and, if operating under any trade name, that the certificate required by the New York State General Business Law Section 130 has been filed with the County Clerk of Ulster County.

**CERTIFICATE OF AUTHORITY – CORPORATIONS:**

I, \_\_\_\_\_ certify that I am the \_\_\_\_\_ of the \_\_\_\_\_, a corporation duly organized and in good standing under the \_\_\_\_\_ named in the foregoing License, that \_\_\_\_\_ who signed said License on behalf of the Licensee was, at the time of execution \_\_\_\_\_ of the Licensee and I further certify that said License was duly signed for and in behalf of said Licensee by authority of its Board of Directors, thereunto duly authorized, and that such authority is in full force and in effect at the date hereof.

**(Corporate Seal)**

STATE OF NEW YORK                    )  
   ) ss  
COUNTY OF ULSTER                    )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, before me personally came \_\_\_\_\_, to me known, and known to me to be the (title) \_\_\_\_\_ of \_\_\_\_\_ the Corporation described in and which executed the above certificate, who being by me duly sworn did Dispose and say that he, the said \_\_\_\_\_, resides at \_\_\_\_\_. and that he is the \_\_\_\_\_ of said corporation and knows the corporate seal and that it was affixed to the above certificate by order of the Board of Directors of said corporation, and that he signed his name thereto by like order.

\_\_\_\_\_  
Notary Public

# **ATTACHMENT A**

## **COMMERCIAL HAULER WASTE REDUCTION AND RECYCLING PLAN**



**COMMERCIAL HAULER WASTE REDUCTION AND RECYCLING PLAN:**

**\*\*\* Please note that this section of the application has changed from the previous year. All information is required in order for your application to be processed. \*\*\***

**GENERAL INFORMATION**

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**RECYCLING METHOD**

**(Circle all that apply)**

Type of Vehicles: Packer: Split Body Rear Loader Front Loader  
Roll-Off  
Dump Truck  
Recycling Truck  
Other: \_\_\_\_\_

Types of Containers: Dumpsters Roll-offs Wheeled Containers/Carts Recycling Bins

**RECYCLING COLLECTION SCHEDULE**

Days/Frequency of recycling pick up: Mon Tues Wed Thurs Fri Sat Sun EOW Weekly Bi-Weekly

Describe different levels of service for residential, commercial and institutional customers such as types of containers and methods of collection. **(Attach a sample copy of any schedule)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In accordance with County Local Law No. 4 of 2010, County of Ulster, A Local Law Amending Local Law Number 8 Of 1991 As Amended By Local Law Number 8 Of 2007 Ulster County Mandatory Source Separation And Recycling Law "All haulers who provide solid waste collection services in Ulster County must also provide collection for regulated recyclable materials. All haulers should make every attempt to notify their customers in writing as to how the regulated recyclable materials should be sorted, either separated into designated categories or commingled. The hauler also should provide reasonable notice to its customers of any change in instructions". The Law also states under "Reporting" that annual recycling and MSW tonnages must be reported to the Agency to compile data for the mandated NYSDEC report. To be in compliance with this law, I/we submit the following:

Materials Recycled: (Check all that apply)

- Metal Cans
- Glass
- Newspaper
- Cardboard
- Junk Mail and Magazines
- Plastic Containers
- Other: \_\_\_\_\_

Please specify the types of plastic containers accepted in your recycling program: (Check all that apply)



Bottles & Jugs



Food Tubs & Lids



Buckets/Large Jugs



Bulky Rigid Plastics



Clamshell Packaging



Cups



Molded Packaging



Yogurt Cups



Bakery Domes

The Agency recognizes that the recycling industry is always changing, and that both public and private waste handlers must adapt to changing recycling markets. Have there been any significant changes to your recycling program since the last time you completed this form? (Examples: switch to bi-weekly pick-ups, added/removed items accepted, changes to how customers source separate into categories, etc.)

---

---

---

---

---

**CUSTOMER EDUCATION:**

Does your company have a designated recycling educator as a customer resource? If so, please list their public contact information:

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Describe how your company promotes and encourages recycling compliance from customers. Outline procedures for new customers regarding recycling education including how educational material will be distributed:

---

---

---

---

**Required:** Attach a copy of Customer Recycling Instructions with this application. Your application will not be processed until we have this information.

Provide a direct URL link to recycling instructions on your company's website:

---

UCRRA offers free educational resources about recycling, waste reduction, and composting. Would you like to receive more information about recycling education?

Send to Email: \_\_\_\_\_

**RECYCLING CERTIFICATION:**

Recycling: It's the Law.

1) Have all of your customers been advised of the requirements for recycling as required in Local Law Number 4 of 2010, Ulster County Mandatory Source Separation and Recycling Law by your company?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

2) If requested, have your customers been given or will they be given a copy of Local Law Number 4 of 2010, Ulster County Mandatory Source Separation and Recycling Law?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

3) Have you provided proper recycling containers to all of your customers?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

A copy of Local Law No. 4 of 2010, County of Ulster, A Local Law Amending Local Law Number 8 Of 1991 As Amended By Local Law Number 8 Of 2007 Ulster County Mandatory Source Separation And Recycling Law is available for download on our website ([www.ucrra.org](http://www.ucrra.org)). You can also obtain a copy by calling the Agency at (845) 336-0600 and requesting one be sent to you.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# **ATTACHMENT B**

## **ACCOUNTS RECEIVABLE COLLECTION PROCEDURES**

# UCRRA

## ACCOUNTS RECEIVABLE COLLECTION PROCEDURES

The Agency prepares invoices on a monthly basis for its customers with charge accounts. Account applications are reviewed and approved prior to accounts being opened. Each applicant signs a payment guarantee and agrees to payment terms of net 30 (1 ½ % service charge per month will be assessed on all past due accounts). In the event an account goes into arrears, the following procedures are followed:

**Past due 30 days** – phone call is made and a statement of account is mailed out

**Past due 60 days** – phone call is made, statement of account is mailed out (second notice), and the customer's account is deactivated. Customer's account will be reactivated when account balance is zero.

**Past due 90 days** – phone call is made, statement of account is mailed out (final notice), and customer's account remains deactivated. Customer's account will be reactivated when account balance is zero.

**Past due 120 days** – account remains deactivated, and a demand letter is mailed out by regular and certified mail. Customer's account will be reviewed by the Agency Controller and Executive Director for potential reactivation when account balance is zero.

**Past due 150 days** – outside legal counsel retained and litigation will commence. If litigation ever commences against a customer, reactivation of their account can only be approved by the Agency's Board.

# **ATTACHMENT C**

## **EXCERPTS FROM SAFETY POLICY #002**

# ULSTER COUNTY RESOURCE RECOVERY AGENCY

## Excerpts from Safety Policy #002 that Pertain to Users of Agency Facilities

### TRANSFER STATION AND MRF TIPPING FLOOR SAFETY RULES

UCRRA's daily operating goal is to maintain an accident/injury free workplace. For the protection of all personnel, the following **Tipping Floor Rules** must be followed at **all times**:

#### Material Tipping

- Tipping areas will be limited to within the confines of the transfer station and MRF. No vehicle will dump outside of the transfer station/MRF doors. All tipping floor personnel will be equipped with radios to communicate with company vehicles, scale operator and supervisors.
- Passengers or helpers in self-tipping vehicles will remain in vehicle at all times when waiting to unload or when unloading, unless engaged in assisting the driver. The designated person who exits the vehicle must stay within 6 feet of the vehicle. When closing swinging door(s), the driver or helper is to stay with the moving door until it is closed and secured. ALL DOORS WILL BE CLOSED ON ROLL-OFF VEHICLES OUTSIDE OF THE TRANSFER STATION, CLEAR OF TRAVELED WAY. NO vehicle is to be left unattended at any time while waiting to tip/unload, during unloading or after unloading.
- A minimum of **15 feet** must be maintained between any persons and mobile equipment. If helpers must leave the vehicle for any reason other than to assist the driver, they will do so before vehicle is directed to tip/unload or after vehicle has tipped/unloaded and exited the tipping area.
- Drivers, passengers and/or helpers will be restricted to activities related to the tipping and/or unloading of their vehicles. It is strictly prohibited for drivers, passengers and/or helpers to be moving about anywhere else throughout the tipping area(s).
- Drivers and/or helpers that are tipping or unloading must open doors as far away as possible from heavy equipment and forklift. Drivers/helpers will not approach the rear of the truck unless adequate floor space exists between the truck and the loading pit and conveyor. A minimum distance of **10 feet** between driver/helper and pit/conveyor must be maintained. No driver, helper, traffic spotter or other individual is allowed under a raised tailgate without proper block out, t-bar or similar device.
- UCRRA tipping floor personnel are not allowed to help tipping or unloading vehicles with the unloading of MSW or other material(s) unless it is absolutely necessary to correct an unsafe situation.

#### Floor Safety

- A maximum of one (1) tipping/unloading vehicle at a time will be allowed in each bay of the transfer station.
- Walking or standing in the transfer station unnecessarily by any individual is prohibited at all times. If a person enters the transfer station for any other reason than listed above, all activity must cease immediately and that person questioned.
- Trailer drivers must stand either outside building or next to Office Safe Zone while loading is in progress. Any driver not in compliance will not be loaded.



- Non-essential vehicle traffic will be prohibited.
- Speed limit on all property is 5-10 mph.
- Smoking is not allowed except in designated smoking areas.
- Scavenging any item(s) or material(s) delivered to the transfer station/MRF by users or UCRRA employees is **strictly prohibited**.
- All UCRRA drivers, commercial haulers, contractors and customers will be required to wear hard hats and safety glasses. **Employer** of commercial drivers and contractors will supply safety equipment.
- Visitors will be accompanied at all times by UCRRA personnel and must wear hard hats and safety glasses. Visitor safety equipment will be available at each location.
- All violations of these rules and procedures by a vehicle driver, helper, passenger, occupant, visitor, contractor or UCRRA employee will be reported to a supervisor.