

APPLICATION FOR RECYCLING PROGRAM GRANT

PART I - APPLICANT INFORMATION

PLEASE FOLLOW ALL INSTRUCTIONS AS PROVIDED

1. MUNICIPALITY NAME _____

<input type="checkbox"/> Home Rule	<input type="checkbox"/> Borough
<input type="checkbox"/> 1 st Class Twp.	<input type="checkbox"/> City
<input type="checkbox"/> 2 nd Class Twp.	<input type="checkbox"/> COG
<input type="checkbox"/> Town	<input type="checkbox"/> County
<input type="checkbox"/> SWA	<input type="checkbox"/> Authority
<input type="checkbox"/> Municipality	<input type="checkbox"/> Other: _____

2. OFFICIAL BUSINESS ADDRESS _____
BOX _____
STREET _____
CITY _____
PA_ ZIP _____

3. COUNTY _____

4. CONTACT PERSON: Mr. Ms. _____
TITLE _____

5. CONTACT PERSON TELEPHONE NUMBER (_____) _____

6. CONTACT PERSON EMAIL ADDRESS: _____

7. MUNICIPALITY WEBSITE ADDRESS: _____

PART II – EXECUTIVE SUMMARY
A. Program Information

1. What is the population of your municipality? _____
2. Is your municipality mandated to recycle per Act 101? YES NO
3. Does your municipality have an ordinance (rules/regulations) that requires residents to participate in a curbside recycling program? YES NO
Ordinance # _____ Date Enacted: _____
4. Will this ordinance (rules/regulations) be updated? YES NO
If YES, please list projected date(s): _____
5. Does your municipality have an ordinance that requires residents to participate in a waste collection service? YES NO
Ordinance # _____ Date Enacted: _____
6. Who collects the waste?
 Municipal Employees Contracted Hauler Private Subscription Other: _____

7. Please list the haulers who collect waste in your municipality: _____

8. What is the yearly cost to residents: _____
9. Does your municipality have an ordinance that requires commercial establishments to participate in a recycling program? YES NO
Ordinance # _____ Date Enacted: _____
10. Does your municipality have an ordinance that regulates the burning of waste? YES NO
Ordinance # _____ Date Enacted: _____
If YES, what items, if any, can be burned in your municipality? _____
11. Will the burning ordinance be updated? YES NO
If YES, please list projected date(s): _____
12. What materials are currently being collected curbside from residents within your municipality(ies)? Check all that apply:

<input type="checkbox"/> Newspaper	<input type="checkbox"/> Aluminum Cans	<input type="checkbox"/> Clear Glass
<input type="checkbox"/> Office Paper	<input type="checkbox"/> Steel Cans	<input type="checkbox"/> Green Glass
<input type="checkbox"/> Cardboard	<input type="checkbox"/> Appliances/Scrap Metal	<input type="checkbox"/> Brown Glass
<input type="checkbox"/> Magazines	<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Grass
<input type="checkbox"/> Mixed Paper		<input type="checkbox"/> Food Waste
<input type="checkbox"/> Other Paper Fiber: _____		<input type="checkbox"/> Tree Trimmings/Christmas Trees
<input type="checkbox"/> PET Plastic		<input type="checkbox"/> Electronics
<input type="checkbox"/> HDPE Plastic		
<input type="checkbox"/> Other Plastics: _____		

13. How often are the residential curbside materials collected per month?
 1X 2X 3X 4X Other: _____

14. How are the recyclable materials collected?
 Municipal Employees Contracted Hauler Private Subscription Other: _____

14a. Where are the collected recyclable materials processed / marketed? _____

15. What is the yearly cost to residents? _____

16. Please list the haulers who collect recyclables in your municipality: _____

17. What materials are currently being collected at any drop-off facilities operating within or on behalf of your municipality(ies)? Check all that apply:

- | | | |
|---|---|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Aluminum Cans | <input type="checkbox"/> Clear Glass |
| <input type="checkbox"/> Office Paper | <input type="checkbox"/> Steel Cans | <input type="checkbox"/> Green Glass |
| <input type="checkbox"/> Cardboard | <input type="checkbox"/> Appliances/Scrap Metal | <input type="checkbox"/> Brown Glass |
| <input type="checkbox"/> Magazines | <input type="checkbox"/> Used Motor Oil | <input type="checkbox"/> Grass |
| <input type="checkbox"/> Mixed Paper | | <input type="checkbox"/> Food Waste |
| <input type="checkbox"/> Other Paper Fiber: _____ | | <input type="checkbox"/> Tree Trimmings/Christmas Trees |
| <input type="checkbox"/> PET Plastic | | <input type="checkbox"/> Electronics |
| <input type="checkbox"/> HDPE Plastic | Operating Hours: _____ | |
| <input type="checkbox"/> Other Plastics: _____ | | |

18. What materials are currently being collected from (or recycled by) your commercial, institutional and municipal facilities within your municipality(ies)? Check all that apply:

- | | | |
|---|---|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Aluminum Cans | <input type="checkbox"/> Clear Glass |
| <input type="checkbox"/> Office Paper | <input type="checkbox"/> Steel Cans | <input type="checkbox"/> Green Glass |
| <input type="checkbox"/> Cardboard | <input type="checkbox"/> Appliances/Scrap Metal | <input type="checkbox"/> Brown Glass |
| <input type="checkbox"/> Magazines | <input type="checkbox"/> Used Motor Oil | <input type="checkbox"/> Grass |
| <input type="checkbox"/> Mixed Paper | | <input type="checkbox"/> Food Waste |
| <input type="checkbox"/> Other Paper Fiber: _____ | | <input type="checkbox"/> Tree Trimmings/Christmas Trees |
| <input type="checkbox"/> PET Plastic | | <input type="checkbox"/> Electronics |
| <input type="checkbox"/> HDPE Plastic | | |
| <input type="checkbox"/> Other Plastics: _____ | | |

19. How are the commercial establishments' recyclable materials collected?
 Municipal Employees Contracted Hauler Private Subscription Other: _____

20. Please list the haulers who collect recyclables from commercial establishments in your municipality: _____

21. Is there a residential curbside program in your municipality for the collection of leaves?
 YES NO
If YES, what is the collection frequency and who provides the service? _____
Where is this material processed? _____

22. Is there a residential curbside program in your municipality for the collection of garden residues, shrubbery, tree trimmings and similar materials? YES NO
If YES, what is the collection frequency and who provides the service? _____

Where is this material processed?: _____

23. Is there a residential drop-off program for the collection of leaves, garden residues, shrubbery, tree trimmings and similar materials? YES NO

If YES, how often and when is the drop-off facility available to residents? _____

Please list the drop-off facility(ies) utilized: _____

24. How often are residents reminded about the requirements of the recycling education program?

At least Monthly Quarterly Semiannually Annually Other: _____

25. What is used to remind residents of the program? (must provide documentation):

TV Radio Newsletter Calendar Direct Mailing Social Media
Other: _____ website (Address): _____

26. How often are commercial establishments reminded about how they should participate in the recycling program?

At least Monthly Quarterly Semiannually Annually Other: _____

27. What is used to remind commercial establishments of the program? (must provide documentation):

TV Radio Newsletter Calendar Direct Mailing Social Media
Other: _____ website (Address): _____

28. Does your municipality have a program of enforcement that periodically monitors participation, receives complaints and issues warnings for required participants and provides fines, penalties, or both?

YES NO

29. Does your municipality currently have any of the following (must provide supporting documentation for credit):

- a. Pay-As-You-Throw program where residents are charged for waste collection/disposal based on the volume (# of bags, etc.) of waste placed at the curb?
- b. Limitation on the amount (# of bags) of waste residents may place at the curb at any one time?
- c. Recycling ordinance in place for community events?
- d. A program to address littering and/or illegal dumping?

30. Describe any revenues or other financial incentives your municipality receives as a result of marketing your Act 101 recyclable materials: (Do not include 904 monies)

31. Please list how your residential recyclable materials are currently collected (commingled, single stream, source-separated) and where these materials are currently recycled and marketed:

PART II – EXECUTIVE SUMMARY
B. Project Description

1. Provide a brief description of the project for which you are seeking financial support:
(Please see part III – Project Narrative to expand your description)

2. If you are applying for funds to support a multi-municipal project, list the other counties or municipalities involved (please explain each municipality's involvement):

Is there an inter-municipal agreement? YES NO
If yes, please provide a copy of the agreement as supporting documentation.

Please explain the agreement: _____

3. What population will be served by the project for which you are seeking financial support?

How many households does this represent? _____

4. What new materials will be collected by the project for which you are seeking financial support?

5. Will there be any changes or additions to the method of collection by the project for which you are seeking financial support? If yes, please explain:

6. How often will the materials be collected (for drop-off programs, when will the drop-off container be available for residents to use it?)

7. Will there be any changes or additions to the collection frequency by the project for which you are seeking financial support? If yes, please explain:

8. Who will be responsible for the collection of recyclable materials included in the project for which you are seeking financial support?

9. Will your municipality be revising any ordinances (rules/regulations) for the project for which you are seeking financial support? YES NO

If yes, please explain:

10. Will your municipality be changing the frequency or methods of residential or commercial establishment education under the project for which you are seeking financial support? YES NO

If yes, please explain:

11. What are the goals of the project for which you are seeking financial support? List specific accomplishments you would like to achieve. How will you measure the project to determine if you are meeting your goals?

PART III – PROJECT NARRATIVE

On the page provided, expand the brief project description given in Part II, question #1. Provide details to give a comprehensive view of your proposed project. This is your opportunity to convey to the Department the purpose and benefits of your project.

PART IV – PROJECT SUSTAINABILITY PLAN

As outlined by Act 175 of 2002, Pennsylvania communities are to make their recycling programs more financially self-sufficient. The following questions are meant to foster an overall Sustainability Plan for your recycling program and are not intended to be the whole of the plan itself. In completing this section of the grant application and your Sustainability Plan, refer to the Department’s technical report on *Building Financially Sustainable Recycling Programs* under Recycling Program Development and Implementation Grants at DEP website:

http://www.portal.state.pa.us/portal/server.pt/community/financial_assistance/14065/recycling_program_development_and_implementation_grants_/589534

The Department will utilize the information given below in evaluating and prioritizing your grant proposal. **Failure to complete this section will result in the denial of your grant request.**

1a. What are the current annual costs of your recycling and waste programs? These costs can include, but are not limited to: personnel; fuel; equipment purchase; maintenance; depreciation; education; and contractual obligations. **Provide an additional itemized statement.**

1b. How have the above recycling and waste program costs been met in the past? Include in your revenues such sources as: fees/taxes; sale of recovered materials; donations/sponsors; grants/loans; and, avoided disposal costs. **Provide an additional itemized statement.**

2. What are the projections for future costs and revenues associated with your recycling and overall waste management program over the next five years? What capital costs for your recycling program do you anticipate procuring over that time period? What is your municipality’s funding plan (excluding Act 101, Section 902 Recycling Program Development Grants and Section 904 Recycling Program Performance Grants) to ensure revenues meet or exceed costs? **Provide an additional itemized statement.**

3. What strategies will your municipality pursue/implement to minimize costs and increase revenue? Include strategies for reducing waste generated/disposed and increasing recyclables collected.

4. What mechanisms will be employed by your municipality to monitor program costs, revenues, performance participation and efficiency?

5. What other benefits (environmental, social, etc.) can be attributable to your recycling and waste programs?

- 6. Describe the mechanisms employed by your municipality to solicit input and support from all parties (i.e. citizens, business community, elected officials, schools waste/recycling collectors, etc.) affected by your recycling program.

- 7. List any other programs or factors that affect the sustainability of your municipality’s recycling and waste programs.

PART V – THE PROPOSAL
A. Project Scope of Work

List each item for which funding is being requested OR for which you are claiming the value of as match. Briefly describe the function of each item as it relates to your project. Number each item, using the same number and order for PART V.B. – FINANCIAL/WORK COMPLETION DATA. Attach additional pages as necessary.

**PART VI
LAND USE PLANNING FORM (LPF)**

Directions. This form is to be used by applicants submitting grant applications affected by the Department's Policy for Consideration of Comprehensive Plans & Zoning Ordinances in DEP Review of Grants and Funding for Facilities or Infrastructure and meeting the requirements of either §§ 619.2 or 1105 of the Municipal Planning Code (MPC). Please answer the appropriate questions relating to the policy that applies to your grant application on the form provided. If you need additional space, please attach additional page(s) as necessary, identifying the applicant and the question being answered.

MPC Criteria:

DEP has the authority to rely on comprehensive plans and zoning ordinances when evaluating grant or funding applications for projects located in areas of the state meeting the conditions described in any of the following three categories:

1. (a) Are you applying for funds that will be utilized to develop facilities or infrastructure as defined in the grant application instructions (p. 10)?

YES NO

If **Yes**, please proceed to question 1(b). If **No**, this policy does not apply to your application.

- (b) Does your application qualify as a de minimis proposal as defined in the grant application instructions (p. 12)?

YES NO

If **Yes**, this policy does not apply to your application. If **No**, please proceed to question 2.

2. Under § 619.2(a) of the MPC:

- (a) Is the municipality where the proposed project will be located in a county where there is a county comprehensive plan?

YES NO

- (b) Has the municipality where the proposed project will be located adopted a comprehensive plan or is it part of a multi-municipal comprehensive plan?

YES NO

- (c) Has either the county or municipality where the proposed project will be located enacted zoning ordinances?

YES NO

- (d) Are the municipal zoning ordinances, the municipal comprehensive plan and the county comprehensive plan generally consistent?

YES NO

If you answered YES to each of these questions, please proceed to question 5.

If you answered NO to any of these questions, please proceed to question 3.

3. Under § 619.2(c) of the MPC:

Has the municipality where the proposed project will be located adopted a joint zoning ordinance?

YES NO

**If you answered YES to this question, please proceed to question 5.
If you answered NO to this question, please proceed to question 4.**

4. Under § 1105 of the MPC:

Has the municipality where the proposed project will be located entered into an implementing cooperative agreement with the municipalities participating in the multi-municipal plan and adopted generally consistent zoning ordinances?

YES NO

**If you answered YES to this question, please proceed to question 5.
If you answered NO to this question, this policy does not apply to you.**

5. Please provide a brief description and specific citation to each relevant section of the elements of the county, multi-municipal, or municipal comprehensive plan that relate to the proposed project. Citations should include the title and date of the plan, section, subsection or paragraph number, and page number.

6. Are there county, multi-municipal or municipal zoning ordinances that are generally consistent with the comprehensive plan?

YES NO

7. Please describe and explain how the proposed project is consistent with relevant zoning ordinances implementing the comprehensive plan in the space provided below. Identify each relevant zoning ordinance by title and date of enactment and by appropriate section, subsection or paragraph number.

8. Will the proposed project serve more than the local community where the project will be located?

YES NO

9. If YES, please indicate the additional communities that will be served in the space provided below and indicate if you have provided notice of the proposed project to these communities?

10. Will the proposed project be consistent with the requirements of the relevant zoning ordinances, including plans for community facilities and utilities? Please explain in detail. Identify each relevant zoning ordinance by title and date of enactment and by appropriate section, subsection or paragraph number.

11. Verification. Applicants are required to obtain the signature of the Director of the county planning agency, or multi-municipal planning agency, if one has been designated, prior to submitting this form to the Department. County Planning Directors or directors of the relevant multi-municipal planning agency are to verify that the applicant's answers on the MMPF accurately describe and reflect the multi-municipal comprehensive plan and zoning ordinances.

(signature)

(title)

(date)

PART VIII – SUPPORTING DOCUMENTS

Attach such items as proof of publication and responses received, price quotes and/or bids, ordinances and/or regulations, examples of educational materials, letters of support, multi-municipal agreement littering or illegal dumping education, incentive-based pricing documentation, special collections programs, monies received from the sale of Act 101-recyclable materials, justification of equipment that is pro-rated to reflect recycling use, and any other items necessary to support your grant request. Be sure to consider the Department of General Services' COSTARS program when seeking quotes for equipment