



Department of Energy & Environmental Protection
Bureau of Materials Management & Compliance Assurance
79 Elm Street - 4th Floor
Hartford, Connecticut 06106-5127

Annual Municipal Recycling Report
For FY 2020-2021

This report regarding municipal recycling activity for the previous fiscal year is required to be submitted by September 30th of each year to the Connecticut Department of Energy & Environmental Protection (DEEP) -CGS Sec 22a-220(h). (PLEASE SUBMIT THIS FY2021 REPORT NO LATER THAN NOVEMBER 30, 2021)

Parts 1 through 5 can be completed and submitted to the CT Department of Energy & Environmental Protection via any one of the following methods

- Fax (860) 424-4059 Attn: Solid Waste Facility Reporting- Paula Guerrero; Or
Scanned & E-Mailed To Paula.Guerrera@ct.gov (Do not send hard copy if sending electronically); Or
Land-Mailed to CT DEEP; Bureau of MM&CA – Recycling Office; 79 Elm Street - 4th Floor; -Hartford, CT 06106-5127; Attn: Solid Waste Facility Reporting- Paula Guerrero.
Must be double-sided and preferably on paper with a minimum 30% post-consumer content.
PLEASE CONSERVE PAPER – Do not send unused pages or sections. Indicate (at bottom of this page) the total number of pages in your report.

Questions? Please visit the CT DEEP Website, contact Paula Guererra (860) 424-3334 or Peter Brunelli (860) 424-3536

1. Name of City/Town Vernon
Mailing Address: 14 Park Place, Vernon, CT Zip Code 06066
2. Recycling Contact: Name: Mark Rizzo
Title: Road Foreman
Phone #: 860-870-3500 Fax #: 860-870-3505 Email: mrizzo@vernon-ct.gpv
3. Reporting Period: July 1, 20 20 through June 30, 20 21
Number of Pages in This Report: 6



## PART 1: MATERIALS RECYCLED FROM RESIDENTIAL SOURCES

## Materials Recycled from Residential Sources

(A) Recyclable Item	(B) Name/Address - <i>First Destination for Residential Recyclables</i> (after the municipal transfer station or municipal compost site, if applicable)	(C) Amount Recycled	(D) Units of Measure
<b>Bottles/Cans/Cartons/Paper (BCP)</b>  • <i>First Destination Is a CT SW Facility</i>  <input checked="" type="checkbox"/> <i>Includes Res &amp; NonRes</i>	Destination Name: <b>Willimantic Waste Paper</b> Town: <b>Willimantic</b> State: <b>ct</b> Check all that apply: <input checked="" type="checkbox"/> <b>Single Stream</b> <input type="checkbox"/> <b>Dual Stream</b> <input type="checkbox"/> <b>Material Collected Separately</b>	NA	NA
<b>Bottles/Cans/Cartons/Paper</b>  • <i>First Destination Is NOT a CT SW Facility</i>  <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>USA Recycling</b> Town: <b>Enfield</b> State: <b>CT</b> Check all that apply: <input type="checkbox"/> <b>Single Stream</b> <input type="checkbox"/> <b>Dual Stream</b> <input checked="" type="checkbox"/> <b>Material Collected Separately</b>	NA	NA
<b>For the materials listed below, please report quantity generated in the municipality and recycled thru a program operated by the municipally or thru a municipally contracted program</b>			
<b>Storage Batteries (vehicle batteries)</b>  <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>John's Scrap</b> Town: <b>Columbia</b> State: <b>CT</b>	1.4	tons
<b>Scrap Metal –</b>  <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>Ct Scrap</b> Town: <b>North Franklin</b> State: <b>CT</b>	182	Tons
<b>Waste Oil (gallons)</b>  <input type="checkbox"/> <i>Includes Res &amp; NonRes</i>	Destination Name: <b>Federal Oil Services</b> Town: <b>Killingworth</b> State: <b>CT</b>	4800	Gallons
<b>Used Textiles (clothing, shoes, linens etc.)</b> <input checked="" type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>Simple Recycling</b> Town: <b>Solon</b> State: <b>OH</b>	17.7	Tons
<b>Electronics</b> Check Types Included: <input checked="" type="checkbox"/> <b>CEDs (CT e-Waste Recycling Program)</b> <input type="checkbox"/> <b>Non-CEDs</b> <input checked="" type="checkbox"/> <b>Other- Specify: Nicd Batteries</b> <input checked="" type="checkbox"/> <b>Other- Specify: Fluorescent bulbs</b> <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>Take 2 Recycling</b> Town: <b>Waterbury</b> State: <b>CT</b>	54.54	Tons
<b>NiCd Batteries</b> <input type="checkbox"/> <i>Includes Res &amp; NonRes</i>	Destination Name: Town: State:		
<b>C&amp;D Waste Recycled (NOT DISPOSED)</b>	Destination Name: Town: State:		



### Other Materials Collected Through A Municipal Recycling Collection Program

<b>Disaster Debris Clean Wood</b> <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: _____		
	Town: _____ State: _____		
	Destination Name: _____		
	Town: _____ State: _____		
<b>Paint</b> <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>CREOC And Sherwin Williams</b>	<b>397</b>	<b>units</b>
	Town: <b>Manchester</b> State: <b>CT</b>		
<b>Mattresses</b> <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>USA Hauling And Recycling</b>	<b>1198</b>	<b>Units</b>
	Town: <b>Enfield</b> State: <b>CT</b>		
<b>Other – Specify: Tires</b> <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>Don Stevens Tiers</b>	<b>3200</b>	<b>units</b>
	Town: _____ State: _____		
<b>Other – Specify:</b> <input type="checkbox"/> <i>Tonnage Includes Res &amp; NonRes</i>	Destination Name: <b>Interstate Refrigeration</b>	<b>562</b>	<b>units</b>
	Town: <b>Foxboro</b> State: <b>MA</b>		



### PART 2: MATERIALS RECYCLED FROM NON-RESIDENTIAL SOURCES

#### OTHER RECYCLABLES - Materials Recycled from *NON-Residential* Sources

(A) Recyclable Item	(B) Name/Address - <i>First Destination for Other Recyclables</i> (after the municipal transfer station or municipal compost site, if applicable)	(C) Amount Recycled	(D) Units of Measure
<b>Non-Residential Bottles/Cans/Paper (BCP)</b> • <i>First Destination Is a CT SW Facility</i>	Destination Name: _____  Town: _____ State: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately	<b>NA</b>	<b>NA</b>
	Destination Name: _____  Town: _____ State: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately	<b>NA</b>	<b>NA</b>
	Destination Name: _____  Town: _____ State: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately	<b>NA</b>	<b>NA</b>
<b>Non-Residential Bottles/Cans/Paper</b> • <i>First Destination Is Not a CT SW Facility</i>	Destination Name: _____  Town: _____ State: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately		
	Destination Name: _____  Town: _____ State: _____ Check all that apply: <input type="checkbox"/> Single Stream <input type="checkbox"/> Dual Stream <input type="checkbox"/> Material Collected Separately		
<b>Other</b> Specify Type of Recyclable:: <input type="checkbox"/> Only Residential <input type="checkbox"/> Only Non-Residential <input type="checkbox"/> <i>Includes Res &amp; NonRes</i>	Destination Name: _____  Town: _____ State: _____		



**PART 3: Information Regarding Collectors (Haulers) of Solid Waste (SW) and Recyclables Operating Within the Borders of the Municipality**

Please list below the haulers or collectors operating in your municipality and provide their contact information- including their e-mail address: (Please duplicate this page if additional space is needed.)

<b>3A: Collector (Hauler) Contact Information</b>					
<b>Name of Hauling Company</b>	<b>Mailing Address &amp; E-mail Address</b>	<b>Contact Name</b>	<b>Phone Number</b>	<b>Did Hauler Register in Your Municipality in FY2020? [CN1]</b>	<b>Did Hauler Submit FY2020 [CN2] Annual Report To Your Municipality?</b>
All Waste INC.	Mailing:143 murphy RD Hartford, CT, 06114  E-mail: mslowik@allwaste.com	Matthew Slowik	860-724-3316	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
CWPM LLC	Mailing:PO. Box 415 Plainville, CT, 06062  E-mail: bmccain@cwpm.com	Brian McCain	860-747-1335	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
USA Hauling & Recycling INC	Mailing:15 Mullen RD Enfield, CT, 06062  E-mail: frankm@usarecycle.com	Frank Marci	860-746-3200	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Windsor Sanitation	Mailing:PO. Box Windsor, CT, 06095  E-mail: dcance@windsorsanitation.com	Denise Cance	860-688-3955	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Mailing: _____ E-mail: _____			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Mailing: _____ E-mail: _____			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Mailing: _____ E-mail: _____			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Mailing: _____ E-mail: _____			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Mailing: _____ E-mail: _____			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Attach additional sheets if needed

### 3B: Collection Service(s) Information

Name of Hauling Company	Source of SW & RECY Hauled Check all that apply.	Types of SW &/or RECY Hauled by the Collector Check all that apply.	Collector Offers Subscription Service for Residential Curbside Collection of: Check all that apply.
All Waste INC.	<input type="checkbox"/> Residential <input checked="" type="checkbox"/> Non-Residential	<input checked="" type="checkbox"/> MSW; <input checked="" type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
CWPM LLC	<input type="checkbox"/> Residential <input checked="" type="checkbox"/> Non-Residential	<input checked="" type="checkbox"/> MSW; <input checked="" type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
USA Hauling & Recycling INC	<input checked="" type="checkbox"/> Residential <input checked="" type="checkbox"/> Non-Residential	<input checked="" type="checkbox"/> MSW; <input checked="" type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
Windsor Sanitation	<input type="checkbox"/> Residential <input checked="" type="checkbox"/> Non-Residential	<input checked="" type="checkbox"/> MSW; <input checked="" type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
	<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential	<input type="checkbox"/> MSW; <input type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
	<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential	<input type="checkbox"/> MSW; <input type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
	<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential	<input type="checkbox"/> MSW; <input type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
	<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential	<input type="checkbox"/> MSW; <input type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
	<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential	<input type="checkbox"/> MSW; <input type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
	<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential	<input type="checkbox"/> MSW; <input type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables
	<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential	<input type="checkbox"/> MSW; <input type="checkbox"/> Recyclables; <input type="checkbox"/> C&D; <input type="checkbox"/> Yard Waste <input type="checkbox"/> Landclearing ; <input type="checkbox"/> Food Scraps <input type="checkbox"/> Special Waste <input type="checkbox"/> Other – Specify-	<input type="checkbox"/> MSW <input type="checkbox"/> Recyclables

Attach additional sheets if needed

**Please note:** All collectors hauling solid waste (including recyclables) generated within the borders of your municipality are required to: (1) register annually in your municipality and (2) report annually to your municipality – CGS Sec 22a-220a(d).

The collector/hauler reporting form can be found at: [www.ct.gov/DEEP/solidwastereporting](http://www.ct.gov/DEEP/solidwastereporting) or by clicking on links below:

Annual **Collector/Hauler** Reporting Form to be **submitted to the municipalities** in which the collector/hauler operates  
[Word](#) [pdf](#) [Instructions](#)

### Part 4: Solid Waste Disposed (Please Report Disaster Debris Separately From Other Material)

Please indicate the first destination(s) (landfill, resource recovery facility, or regional multi-town transfer station) where solid waste generated in your town is received for disposal.

- If first destination is your municipal transfer station – report the first destination of waste sent out from your transfer station.
- If first destination is out-of-state, report (in Column C) the tonnage delivered to that facility.
  - If you are unable to get information regarding tonnage sent to that out-of-state facility, report information regarding the hauler who transported that waste out-of-state.

(A) Type of Solid Waste Disposed	(B) Name and Address of First Destination (i.e. Receiving Facility (after the municipal transfer station, if applicable))	(C) Tons this FY
<b>MSW<sup>1</sup></b> • <b>First Destination Is a CT SW Facility</b> (after the municipal transfer station, if applicable)	Destination Name: <b>Willimantic Waste Paper</b> Town: <b>Willimantic</b> State: <b>CT</b>	<b>NA</b>
	Destination Name: _____ Town: _____ State: _____	<b>NA</b>
<b>Oversized MSW<sup>1</sup></b> - (furniture, mattresses, carpets, etc) • <b>First Destination Is a CT SW Facility</b> (after the municipal transfer station, if applicable)	Destination Name: <b>USA Hauling and Recycling</b> Town: <b>Hartford</b> State: <b>CT</b>	<b>NA</b>
	Destination Name: _____ Town: _____ State: _____	<b>NA</b>
<b>MSW<sup>1</sup></b> • <b>First Destination Is Not a CT SW Facility</b> (after the municipal transfer station, if applicable)  If unable to report tonnage to this first destination (located out-of-state) – please provide Hauler Name and Contact Info	Destination Name: _____ Town: _____ State: _____	Tons: _____
	Destination Name: _____ Town: _____ State: _____	Tons: _____
<b>Oversized MSW<sup>1</sup></b> - (furniture, mattresses, carpets, etc) • <b>First Destination Is Not a CT SW Facility</b> (after the municipal transfer station, if applicable)  If unable to report tonnage to this first destination (located out-of-state) – please provide Hauler Name and Contact Info	Destination Name: _____ Town: _____ State: _____	Tons: _____
	Destination Name: _____ Town: _____ State: _____	Tons: _____
<b>CONSTRUCTION &amp; DEMOLITION WASTE</b> (after the municipal transfer station, if applicable)	Destination Name: <b>USA Hauling and Recycling</b> Town: <b>Hartford</b> State: <b>CT</b>	Tons: _____
<b>DISASTER DEBRIS</b> (after the municipal transfer station, if applicable)	Destination Name: _____ Town: _____ State: _____	Tons: _____
<b>LANDCLEARING DEBRIS (logs and stumps)</b> (after the municipal transfer station, if applicable)	Destination Name: <b>We Care Denali</b> Town: <b>Ellington</b> State: <b>CT</b>	Tons: <b>NA</b>

<sup>1</sup> **MSW** is solid waste from residential, commercial and industrial sources; **excluding** hazardous, biomedical, sludge; etc.

<sup>2</sup> **SPECIAL WASTE** is any waste other than hazardous or radioactive waste which requires special handling for safe disposal such as sewage treatment, water treatment, and industrial sludges; fly ash and casting sands or slag; contaminated dredge spoils, etc.



**Part 5: Certification of Data Reported**Municipality: vernon

Reporting Period: July 1 2020\_

June 30, 2021\_

Certification of document. This document, which is required to be submitted to the Commissioner of Energy and Environmental Protection, shall be signed by the municipal CEO or a duly authorized representative of such CEO, and by the individual(s) responsible for actually preparing such document, and each such individual shall certify in writing as follows:

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify, based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, that the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that any false statement made in the submitted information may be punishable as a criminal offense under §53a-157b of the Connecticut General Statutes and any other applicable law."

**Municipal Recycling Contact Signature:**

Signature - Municipal Recycling Contact

Date

12/14/21

Printed Name – Municipal Recycling Contact  
Mark RizzoE-mail Address  
mrizzo@vernon-ct.gov

APPROVED  
TOWN ADMINISTRATOR

**Municipal CEO Signature:**

Signature Of Municipal CEO

Date

Michael J. Rizzo  
2021



Printed Name - Municipal CEO

E-mail Address

m.rizzo@vernon-ct.gov

**Part 6: Survey Questions re Municipal Recycling Program**

The Part 6 survey is currently being hosted on SurveyMonkey and a unique URL will be e-mailed to municipal recycling contacts in August. This survey contains program-specific questions related to municipal solid waste program performance and municipal compliance with basic statutory recycling requirements.

**MUNICIPALITIES MUST COMPLETE BOTH THE QUANTITATIVE SECTION (PARTS 1-5); AND THE WEB-BASED SURVEY SECTION (PART 6) IN ORDER TO SATISFY THEIR REPORTING OBLIGATION.**

**No Internet Access?**

**Contact Peter Brunelli (860) 424-3536 or Paula Guerrera (860) 424-3334 for a paper version of Part 6.**