CERTIFICATE OF REUSE OR RECYCLING

For use of this form, see the Integrated Solid Waste Management Plan; the proponent is DPW-ENRD

To be completed by Recycling Center Representative:						
Fort Rucker Recyc DPW Environment BLDG 9322, Mayfi	tal & Natural			255-0468		
Check box:	Generated	or	Received			
Other Organization	n: (Name, Ad	dress, Ph	one)			
Sign:						
Check box:	Generated	or	Received			
Date:						
Weight:						
Check box:	Tons	or	Lbs. /	Estimate	or	Exact Weight
Description:						
All materials rec			or reuse or recycled state, Army and Loc			done in conformance with
Recycling Center	Representati	ve				
Print:		· · · · · · · · · · · · · · · · · · ·				
Sign:						
DO NOT WRITE BELOW THIS LINE						
Entered into the Solid Waste Annual Report (SWAR):				Yes		No
Date:		initials:				

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