

Attachment B

C&D Facility Diversion Documentation Report

Facility Name:	
Facility Street Address:	
Facility City/Zip:	
Contact Name:	
Contact Phone:	
Contact Email:	

DIRECTIONS: Please provide tonnage information for the following C&D fractions that you accept for material recovery at your Facility. Please provide weight data for the last completed calendar quarter (i.e. Jan-March, April-June, etc.). Please identify this time period. Please only provide weights in tons, not pounds or cubic yards. Please identify conversion method, if used.

Time Period: From: To:

A	B	C	D	E	F	G	H	I	J	K	L
DISPOSAL TYPE	Total Tons Received	Total Tons Salvaged	Total Tons Recycled	Total Tons Composted	Total Tons ADC	Total Tons Beneficial Reuse	Total Tons Mulch	Total Tons Biomass	Total Tons Other:	Total Diverted Tons	Total Tons Garbage
Mixed C&D										0	0
Mixed Demolition										0	0
Other Waste Materials (Identify Below)										0	
										0	0
										0	0
Total Tons	0	0	0	0	0	0	0	0	0	0	0

Utilizing the data above, your Facility Diversion Rate should be: *

* Divide "Total Diverted Tons" (Column K) into "Total Tons Received" (Column B) to determine the facility Diversion Rate in percent