Certificate of Public Convenience & Necessity (CPCN) Application
Check List

Note: Unless this application is administratively complete, your application for a CPCN will be returned to you.

1. CPCN Application must be completed and notarized. If submitted by attorney notarization is not required.

2. Provide a copy of A-901 Approval/ License.

3. Provide Applicants experience in the solid waste collection/disposal industry (Question 30/CPCN Application)

4. For Corporation, submit a copy of filed Certificate of Incorporation.

5. For Limited Liability Company, submit a copy of filed Certificate of Formation.

6. If **not** incorporated under the laws of the State of New Jersey (Foreign Entities), submit a copy of "New Jersey Certificate of Authority" or "New Jersey Certificate of Registration," giving company the authority to do business in New Jersey.

7. Provide a copy of filed "NJ Business Registration Certificate." Business Registration & Records questions may be directed to the Division of Revenue's toll-free telephone number (866) 534-7789.

8. If using an "Alternate Name" to do business in New Jersey, provide copy of filed "Registration of Alternate Name." Alternate names are effective for five years and may be renewed for five-year-periods. Questions may be directed to the Division of Revenue's toll-free telephone number (866) 534-7789.

9. For a Sole Proprietorship or General Partnership using a business name, provide a copy of filed "Registration of Trade Name," as registered with the County Clerk's Office in the county where the business is located. Registration at the county level is compulsory.

10. Submit a completed Tariff (Schedule of charges or rates) in accordance with N.J.A.C. 7:26H-1.13 seq. Tariffs for Collection and Disposal Utilities. Tariff is not required for Solid Waste Brokers.

11. Provide a Statement of Financial Condition, as evidence of financial responsibility, as in a balance sheet, income statement, or proforma statement. (Page 9/CPCN Application)
    (Proforma: as a formality/an **estimate** of future operations made in advance)

12. Copy of "Commercial Vehicle Liability Insurance Policy," and a copy of General Business Liability Insurance; including Policy Declaration Pages, showing terms and conditions.
    (Coverage Amounts/Effective Dates/Expiration Dates)

13. Broker's: Copy of company's standard business contract, proposal, service or operating agreement. (BLANK FORMS)

14. Copy of Certificate of Authority allowing new businesses to collect NJ Sales & Use Tax, issued by New Jersey Division of Taxation

15. Verification Statement; Signed & Notarized, as applicable. (Page 8/CPCN Application)

For Solid Waste Facility Certificate (Landfills, Incinerators, and Transfer Stations) Only:

1. Provide a copy of a Solid Waste Facility Permit. Contact Tom Byrne for more information at (609) 984-6812.

2. The Facility must be included in the County's Solid Waste Management Plan.

3. Provide all other information/documentation requested above, as applicable. (Items 1 – 15).

For Solid Waste Broker Certificate Only:

1. Complete entire CPCN Application

2. Complete Page 1 of Solid Waste Collection Tariff – submit a blank copy of company's standard Business Contract, Service Agreement, Business Proposal or Operating Agreement, in lieu of Tariff.

3. Provide all other information/documentation requested above, as applicable. (Items 1-15)

Mail Entire Application to:
New Jersey Department of Environmental Protection
Division of Solid & Hazardous Waste
Bureau of Planning & Licensing
401 E. State Street, Mail Code 401-02C
P.O. Box 420
Trenton, NJ 08625-0420

Billing: **Do not include a payment with this application**. The Department of Treasury, Division of Revenue will send you a bill, which is based on a $25.00 filing fee, plus an additional (1/10th) of 1% percent of your estimated State of New Jersey Solid Waste Gross Operating Revenue for one (1) year. Upon approval and payment of the fee to the Division of Revenue, your Certificate will be mailed to you.

Questions can be directed to Suzanne Conway (609) 633-1389, Fax (609) 777-1951

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY
FOR
SOLID WASTE COLLECTION AND/OR DISPOSAL

RETURN THIS FORM TO:	NJDEP Division of Solid & Hazardous Waste Bureau of Planning & Licensing 401 East State Street, Mail Code 401-02C P.O. Box 420 Trenton, New Jersey 08625-0420

Pursuant to R.S. Title 48:13A-1 et seq., the undersigned hereby makes application for Certificate(s) of Public Convenience and Necessity as indicated below and certified, under oath, to the correctness of the following information:

Mark with "X" Nature of Application and Type of Certificate(s) applied for:

- ☐ Solid Waste Collection Certificate
- ☐ Medical Waste Collection Certificate
- ☐ Solid Waste Facility Certificate (Circle one: Landfills, Incinerators, Transfer Stations)
- ☐ Solid Waste Broker
- ☐ Transportation of Solid Waste from Transfer Station to Disposal Site

Furnish a detailed description of the proposed operation of the Applicant's business plan. (Attach additional sheets as necessary.) _____

_____

_____

_____

_____

Question 1-7 Must be Answered by All Applicants

1. Applicant (Print name, address & zip code) as it appears on Applicant's A-901 Approval. _____

2. Trade name, if any, under which business is to be conducted _____

3. The address of each office in New Jersey from which the business is to be conducted: (List each office and business telephone number.) (Attach additional sheets if necessary.)

4. If the Applicant is a Sole Proprietorship, give the name, address, and date of birth of the proprietor.

4a. If Applicant is a Partnership, give the names, addresses, dates of birth of all partners. Attach a copy of Partnership Agreement(s).

_____ _____
_____ _____
_____ _____
_____ _____

4b. If Applicant is any other type of business association (other than a corporation or limited liability company), state nature of such association and names, addresses, dates of birth of all principals. (Attach additional sheets if necessary.)

_____ _____
_____ _____
_____ _____
_____ _____

5. List the names, addresses, dates of birth, and titles of those individuals having an actual administrative responsibility, which in the case of a proprietorship shall be the managing proprietor, partnership, the managing partners; or if any other type of association other than a corporation, those having similar administrative responsibility. (Attach additional sheets if necessary.)

_____ _____
_____ _____
_____ _____
_____ _____

6. If the business is to be conducted at more than one location in this State, provide the name and address of the individual in charge of each such location. (Attach additional sheets if necessary.)

_____ _____
_____ _____
_____ _____
_____ _____

7. Designate the agent in New Jersey upon whom notice process and orders of the Department of Environmental Protection may be served. Furnish the address, zip code and telephone number of such agent. If Applicant is from out of state (Foreign Entity), include agent's acceptance of designation by affidavit.

_____
_____
_____
_____

<u>Questions 8 - 19 Must be Answered by Corporations & Limited Liability Companies</u>

8. Corporate Name of Applicant, LLC: _____

9. Address of Principal Office: _____

_____

10. Date Incorporated or Organized: _____ 10a. Under laws of what state? _____

11. Furnish a copy of Business Entity Formation/Organizational Documents, (Certificate of Incorporation, Certificate of Formation), as filed with the New Jersey Secretary of State, Division of Revenue.

11a. If business is not organized/formed under laws of the State of New Jersey (Foreign Business Entities), and are seeking authorization to do business in New Jersey, furnish a copy of Certificate of Authority or Certificate of Registration, giving the authority to do business in New Jersey.

11b. If Sole Proprietor using a business name (other than their own name), you must register the "trade name" at the County Clerk's Office in the county where your business is located.

11c. Sole Proprietors, provide a copy of Business Name/Trade Name Registration, as filed in the County Clerk's Office where your business is located.

11d. All businesses must register for "Tax and Employer Purposes" with the New Jersey Division of Revenue. Provide a copy of New Jersey Business Registration Certificate.

12. Provide name and address of Registered or Authorized Agent in New Jersey (As filed with the New Jersey Secretary of State) upon whom process in any proceeding against Applicant or proceedings in any court of this State or in the United States District Court for the District of New Jersey may be served.

_____ _____
_____ _____
_____ _____
_____ _____

13. Provide address of Registered Office in New Jersey _____
_____
_____
_____

14. List names, addresses, dates of birth, of all officers of Applicant Corporation and office held by each. (Attach additional sheets if necessary.)

_____ _____
_____ _____
_____ _____
_____ _____

15. List names, addresses, dates of birth, of all members of the Board of Directors of the Applicant Corporation. (Attach additional sheets if necessary.)

_____ _____
_____ _____
_____ _____
_____ _____

16. List names, addresses, dates of birth, and percent of stock ownership of all stockholders holding five or more percent of the issued and outstanding stock of the Applicant Corporation. If any stockholder is another corporation, attach rider giving answers to Questions 8 through 19 with respect to each such corporation. (Attach additional sheets if necessary.)

_____ _____
_____ _____
_____ _____
_____ _____

17. Has any Corporation, Partnership, Association, or Individual other than the stockholders herein set forth any beneficial interest, directly or indirectly, in the stock held by said stockholders? ☐ Yes, ☐ No If "Yes", state details.

_____
_____
_____
_____

18. Has any stockholder of the Applicant Corporation any beneficial interest, directly or indirectly, in the stock of any other stockholder of the Applicant Corporation? ☐ Yes ☐ No

19. Does the individual signing this application on behalf of said Corporation know, or have any reason whatsoever to believe or suspect that any of the officers or directors of said corporation, or any holder, directly or indirectly, by any device or subterfuge whatsoever of more than five percent of beneficial interest of the capital stock of said corporation would fail to qualify as an individual applicant for a certificate hereby applied for in any respect?
☐ Yes, ☐ No If "Yes", state the name of the person or persons failing to qualify.

_____ _____
_____ _____
_____ _____
_____ _____

<u>Questions 20 - 24 Inclusive Must be Answered by All Applicants</u>

20. Has any Individual, Partnership, Corporation or Association, other than the Applicant, any interest directly or indirectly, in the certificate applied for or in the business to be conducted under said certificate? ☐ Yes, ☐ No
If "Yes", state names, addresses, and interest of such Individuals, Partnerships, Corporations or Associations.

_____ _____
_____ _____
_____ _____
_____ _____

21. Has the Applicant agreed to permit any person to receive, or agreed to pay to any employee or another person (by way of rent, salary or otherwise), all or any portion or percentage of the gross or net profits or income derived from the business to be conducted under the certificate applied for? ☐ Yes, ☐ No If "Yes", state details.

_____
_____
_____
_____

22. Has the Applicant or any person mentioned in this application ever had any interest, directly or indirectly, in any application for a Solid Waste Collection and/or Disposal Certificate of Public Convenience and Necessity in New Jersey which was denied? ☐ Yes, ☐ No If "Yes", give the name of Applicant and state to whom the application was made and when, and state reasons if any, given by this issuing authority for the denial.

_____
_____
_____
_____

23. Has the Applicant or any person mentioned in this application having a beneficial interest in the certificate applied for or in the business to be conducted under said certificate ever had interest, directly or indirectly, in any Solid Waste Collection and/or Disposal Certificate of Public Convenience and Necessity in New Jersey or in any other state which was surrendered, suspended, revoked or canceled? ☐ Yes, ☐ No If "Yes", state details with respect to each surrender, suspension, revocation or cancellation.

_____
_____
_____
_____

<u>Questions 25 - 29 Must be Answered by Solid Waste Disposal Operators</u>
(Landfills, Incinerators, Transfer Stations)

24. Provide the schedule of rates charged to solid waste collectors for disposal at the disposal site. For each rate charged, the formula or basis must be stated to justify a rate different from the other rates charged. Furnish four copies of the tariff in accordance with N.J.A.C. 14:11-7.

_____
_____
_____
_____

25. Provide in detail, any preference given to any solid waste collectors as to time, place or price.

_____
_____
_____
_____

26. Provide the method of disposal used at the disposal site. (Example: Sanitary Landfill, Incineration, Recycling or any other method.)

_____
_____
_____
_____

27. If a Sanitary Landfill is operated, provide the capacity. (Example: approximate acreage presently utilized and the acreage available for future use.)

_____
_____
_____
_____

28. Are you also engaged in the business of solid waste collection? ☐ Yes, ☐ No If "Yes", provide in detail the extent of such business.

_____
_____
_____
_____

Requirements Which Must Be Satisfied by All Applicants

29. For those persons listed in previous questions five and six, indicate specific prior experience and education or training in relation to the collection and/or disposal of solid waste.

    _____
    _____
    _____
    _____

30. On separate sheets attached to this Application, list all equipment including motor vehicles which will be owned and/or used by Applicant for the collection and/or disposal of solid waste. If any equipment owned by the Applicant is subject to liens or other encumbrances, so indicate, giving details of any and all liens, chattel mortgages, security interests, or other encumbrances on such equipment, including names of all liens, mortgages, or other security interest holders. All equipment listed must be described accurately in terms appropriate to its usual and accepted description and categorization; i.e., type, capacity, weight, dimensions, etc.

31. Furnish a copy of vehicles/equipment Certificate of Insurance, including Policy Declaration Page, stating terms and conditions on all vehicles and/or equipment. (If applicable)

32. Motor carriers operating commercial motor vehicles in interstate transportation must have at least the minimum amount of insurance required by law.

    Provide copy of MCS-90 Endorsement - Endorsement that must be attached to the auto liability policy to assure that federally mandated coverage is in place; or

    Provide a copy of motor carrier surety bond for public liability issued by a surety.

33. If applicable, provide USDOT Number _____

34. The Applicant must attach a Statement of Financial Condition, including a balance sheet, an income statement for the end of the most recent one-year period of operations of Applicant's business, or a Proforma Statement (for last 12 months) for new operations. (Proforma - an estimate made in advance)

35. Applicant must attach a copy of their A-901 Approval Letter/License as issued by the New Jersey Department of Environmental Protection - If the approval was issued more than six months prior to submittal of this application, attach a statement describing your solid waste business activities between the A-901 approval date to present.

35. If the Applicant is engaged in business and presently charging rates, attach a copy of a tariff required by N.J.A.C. 7:26H-4. If the rates charged are embodied in a contract, attach a copy of each such contract.

36. If the Applicant is a new business entity, attach a copy of a tariff required by N.J.A.C. 7:26H-4 showing rates proposed to be charged. (Forms enclosed)

37. Applicant must attach a description of his/her experience, training, or education in the solid waste collection and/or solid waste disposal industry together with all supporting data.

The New Jersey Division of Taxation will review your State tax account as part of the New Jersey Department of Environmental Protection's (NJDEP) CPCN application.

Taxation must issue a clearance to NJDEP in order for your application to be processed.
Tax questions: email the Division of Taxation at BusinessAssistanceTC.Taxation@treas.nj.gov

NOTE: In answering 25 or 36, the schedule of rates must include all factors and variables which enter into the determination of rates to be charged including the density of areas served, type of service rendered, the frequency of collection, etc. In this regard, the schedule is to include what service is rendered for the amount charged. This must be done for each rate.

VERIFICATION

The undersigned files this application as

_____
(Indicate relationship to applicant)

and states that, in such capacity, he is qualified and authorized to file and verify such documents; that he has carefully examined all the statements and matters contained in the application; and that all such statements made and matters set forth are true and correct to the best of his knowledge, information, and belief.

_____
Signature

Date _____ _____
Print Name

State of _____)

County of _____)

_____ being duly sworn upon his oath according to law deposes

and says that he is _____ of the
Name of Applicant Title of Applicant

_____ and that he is authorized on the part of said applicant to verify and
Name of Applicant

file with NJ Department of Environmental Protection this application and attachments thereto; that he has carefully examined all of the statements contained in such application and the attachments thereto and made a part thereof; that he has knowledge of the matters set forth therein and that all such statements made and matters set forth therein are true and correct to the best of his knowledge, information, and belief. Affiant further says that the applicant makes this application intending in good faith to present evidence which the applicant believes will support the application as to which authority to operate is sought herein.

Subscribed and sworn to before me _____

this _____ day of _____ 20___

Signature of Officer Authorized to Administer Oaths

_____

_____
Signature of Applicant

Statement of Financial Condition

Applicant must attach a statement of financial condition to include balance sheet and income statements or pro forma statements (12- month basis for new operations).
Assets: See below

Company:_____

[1] **Estimated Gross Operating Revenue derived from NJ Solid Waste for one year**: _____

Cash _____

Account Receivable _____

Equipment

Description	Current Value
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Other Assets

Description	Current Value
_____	_____
_____	_____
_____	_____
_____	_____

Total Assets _____

Liabilities:	**Amount**
_____	_____
_____	_____
_____	_____
_____	_____

Total Liabilities _____

Equity:	**Amount**
_____	_____
_____	_____

Assets less Liabilities = Balance _____

[1] A company's estimated gross operating revenue will generate a company's application fee. Do "NOT" submit any payment with this application. You will receive a bill from Treasury. The bill will be based on 1/10th of 1 percent of your estimated gross operating revenue.

SOLID WASTE COLLECTION TARIFF COMPANY: _____

Required: pages 1, 2 and a price list. See page 2 for examples. In addition, complete all pages that apply to the types of services you're proposing to provide. If services are not applicable, mark N/A

TARIFF COVER PAGE

1. Application

   This Tariff contains the terms and conditions and schedules of rates governing the services furnished by a public utility and holder/applicant of a Certificate of Public Convenience and Necessity for the collection of solid waste.

The Utility's Principal Physical Location:

Company:

Street Address:

Mailing Address:

Email Address:

Company President/Owner:

Contact Person:

Telephone _____ Cell phone_____

Fax:

Registered Agent: Name, Address, Telephone, Fax

2. Territory Served

   Solid waste collection services are provided by the utility as set forth in this document and are applicable in the Counties of: **(If you would like to operate in all counties of New Jersey enter: "All counties of New Jersey")**

By the filing of this Tariff Document, the Utility named above agrees to conform with all rules and regulations promulgated by the District Solid Waste Management Plans and the NJ Department of Environmental Protection in accordance with N.J.S.A. 48:13A-1 et seq., and N.J.S.A. 13:1E-1 et seq.

SOLID WASTE COLLECTION TARIFF COMPANY: _____

3. Hours of operation:

   The collector shall pick-up waste in accordance with the following schedule: _____

   _____

   _____

   The collector will not pick-up waste on the following holidays: _____

   _____

   When a scheduled collection day occurs on a listed holiday, the collection will be made on the next scheduled collection day. In those cases where the collection is scheduled on one collection per week basis, the collection will be made as soon as possible.

4. Billing and payment procedures (please list): _____

   _____

List type of service, capacity of truck or container, price and whether dumping fee is included in price

Examples

Dump truck service: 5 cubic yards. Price does not include a dumping fee.

$550.00 per full truck load
$412.50 per ¾ truck load price
$275.00 per ½ load
$137.50 per ¼ load

Pick-up service/dump truck service, by the item (piece); for example chair $75, couch $150.
Price includes dumping fee.

Box truck service, 5 cubic yards: $300 per load. This includes disposal fees.

Pick-up truck service, 5 cubic yards: $275 per load. This includes disposal fee.

Pick-up truck service, 8 cubic yards: $350 per load. This does not include disposal fee.

Roll-off container service, 10 cubic yards: $250 per pull plus disposal fee.

Roll-off container service, 10 cubic yards: $450, 20 cubic yards: $650, 30 cubic yards: $750, and 40 cubic yards: $850.
Dumping fee is included.

Flatbed service, 48 feet: $400 plus $1.00 per mile/actually traveled one way to a disposal site.
This does not include disposal fee.

Tractor trailer service, 90-125 cubic yards: $600 to $700 a day. This does not include tipping fee.

Tractor trailer service, 90-125 cubic yards: $1.69 per mile. This does not include tipping fee.

Rack body truck, 14 feet: estimated $700-$900 per load. This does not include disposal fee.

SOLID WASTE COLLECTION TARIFF COMPANY: _____

PAGES 4-18 MAY BE REQUIRED. FILL OUT PAGES THAT APPLY TO YOUR COMPANY.

TABLE OF CONTENTS

	PAGE NOS.
COVER PAGE: APPLICATION TERRITORY SERVED	1
HOURS AND DATES OF OPERATIONS	2
BILLING AND PAYMENT PROCEDURES	2
TABLE OF CONTENTS	4

SOLID WASTE COLLECTION TARIFF COMPANY: _____

RESIDENTIAL SERVICE
TABLE OF CONTENTS

General Provisions: _____

Schedule of Rates: _____

1. **Description:**

   This section contains the general provisions applicable to the provisions of residential solid waste collection service.

2. **General Provisions:**

   Service is limited to collection and disposal of residential solid waste as defined in N.J.A.C. 7:26H-1.2. Supplemental services, if any, are provided for in the miscellaneous service section of this tariff.

SOLID WASTE COLLECTION TARIFF COMPANY: _____

SCHEDULE OF RATES
RESIDENTIAL SERVICE

The rates contained herein do not include applicable taxes and surcharges. These charges are listed on the customer's bill as prescribed in the Tariff Terms and Conditions N.J.A.C. 7:26H-4.5.

Application in:

Service Charge		Disposal Charge ___ Containers Per Pick-up @ ___ lbs. or Per Container Charge		Additional Container		Monthly Charge
Curbside Service (if applicable)						
1 X/wk _____	+	_____	+	_____	=	_____
2 X/wk _____	+	_____	+	_____	=	_____
other _____	+	_____	+	_____	=	_____
Walk in Service (if applicable)						
1 X/wk _____	+	_____	+	_____	=	_____
2 X/wk _____	+	_____	+	_____	=	_____
other _____	+	_____	+	_____	=	_____

*Additional Walk-in Fee for each 50 ft. increment or part thereof beyond Standard walk in distance of 50 ft. To determine total walk-in rate add an appropriate additional walk-in fee to total rate from above.

Drive in Service (if applicable)						
1 X/wk _____	+	_____	+	_____	=	_____
2 X/wk _____	+	_____	+	_____	=	_____
other _____	+	_____	+	_____	=	_____

SOLID WASTE COLLECTION TARIFF COMPANY: _____

TABLE OF CONTENTS
COMMERCIAL, INDUSTRIAL AND INSTITUTIONAL SERVICE

General Provisions: _____

Containers: _____

Schedule of Rates: _____

1. Description:

   This section contains the general provisions and charges applicable to the provision of containerized general service.

2. General Provisions:

3. Containers: Sharing of containers is prohibited unless prior arrangements are made with the collector concerning the joint use of the container. Waste quantity, container rental, and service charges will be assessed based upon the percentage use of each customer.

SOLID WASTE COLLECTION TARIFF COMPANY: _____

SCHEDULE OF RATES
RATE SCHEDULE NO.
CONTAINER SERVICE

The rates contained herein do not include applicable taxes and surcharges. These charges are listed on each customer's bill as prescribed in N.J.A.C. 7:26H-4.5.

Application in:

COMPACTED WASTE TYPE
Front Rear (*Circle one*)
MONTHLY DISPOSAL AND SERVICE CHARGE
FREQUENCY OF SERVICE - PICKUPS PER WEEK/MONTH

	Container size in cubic yards	1	2	3	4	5	6	Other
1. Disposal Service								
2. Disposal Service								
3. Disposal Service								
4. Disposal Service etc...								
Other Service								

SOLID WASTE COLLECTION TARIFF COMPANY: _____

RATE SCHEDULE NO.
CONTAINER SERVICE

The rates contained herein do not include applicable taxes and surcharges. These charges are listed on each customer's bill as prescribed in N.J.A.C. 7:26H-4.5.

Application in:

UNCOMPACTED WASTE TYPE
Front Rear (*Circle one*)
MONTHLY DISPOSAL AND SERVICE CHARGE
FREQUENCY OF SERVICE - PICKUPS PER WEEK/MONTH

	Container size in cubic yards	1	2	3	4	5	6	Other
1. Disposal Service								
2. Disposal Service								
3. Disposal Service								
4. Disposal Service etc...								
Other Service								

SOLID WASTE COLLECTION TARIFF COMPANY: _____

RATE SCHEDULE NO.
CONTAINER SERVICE

The rates contained herein do not include applicable taxes and surcharges. These charges are listed on each customer's bill as prescribed in N.J.A.C. 7:26H-4.5.

Application in:

WASTE TYPE 13 - BULKY
Front Rear (*Circle one*)
MONTHLY DISPOSAL AND SERVICE CHARGE
FREQUENCY OF SERVICE - PICKUPS PER WEEK/MONTH

	Container size in cubic yards	1	2	3	4	5	6	Other
1. Disposal Service								
2. Disposal Service								
3. Disposal Service								
4. Disposal Service etc...								
Other Service								

SOLID WASTE COLLECTION TARIFF COMPANY: _____

RATE SCHEDULE NO.
ON CALL SERVICE

The rates contained herein do not include applicable taxes and surcharges. These charges are listed on each customer's bill as prescribed in N.J.A.C. 7:26H-4.5.

Application in:

MONTHLY DISPOSAL AND SERVICE CHARGE
WASTE TYPES 10 AND 13

	Container size in cubic yards	Bulky	Front Load	Rear Load	Container
1. Disposal Service					
2. Disposal Service					
3. Disposal Service					
4. Disposal Service etc...					
Other Service					

ADDITIONAL CHARGES (*if any*)

CONTAINER RENTAL (*if applicable*)

SOLID WASTE COLLECTION TARIFF COMPANY: _____

TABLE OF CONTENTS
ROLL OFF SERVICE

General Provisions: _____

Containers: _____

Schedule of Rates: _____

1. Description:

   This section contains the general provisions and charges applicable to the provision of limited and general roll off service.

2. General Provisions:

   Service is limited to collection and disposal of acceptable commercial, industrial, institutional or bulky solid waste as defined in N.J.A.C. 7:26H-1.4. Service is rendered via an open or closed box type container which is rolled off or pulled on the chassis of a straight truck or semi-trailer by gravitational or mechanical means.

3. Containers:

   Sharing of containers is prohibited unless prior arrangements are made with the collector concerning the joint use of the container. Waste quantity, container rental, and service charges will be assessed based upon the percentage use of each customer.

SOLID WASTE COLLECTION TARIFF COMPANY: _____

RATE SCHEDULE NO.
ROLL OFF SERVICE

The rates contained herein do not include applicable taxes and surcharges. These charges are listed on each customer's bill as prescribed in N.J.A.C. 7:26H-4.5.

Application in:

WASTE TYPE
OPEN CONTAINER
MONTHLY SERVICE CHARGE
FREQUENCY OF SERVICE - PICKUPS PER WEEK/MONTH

	Container size in cubic yards	1	2	3	4	5	6	Other
1. Disposal Service								
2. Disposal Service								
3. Disposal Service								
4. Disposal Service etc...								
Other Service								

SOLID WASTE COLLECTION TARIFF COMPANY: _____

RATE SCHEDULE NO.
ROLL OFF SERVICE

The rates contained herein do not include applicable taxes and surcharges. These charges are listed on each customer's bill as prescribed in N.J.A.C. 7:26H-4.5.

Application in:

WASTE TYPE
CLOSED COMPACTED
MONTHLY SERVICE CHARGE
FREQUENCY OF SERVICE - PICKUPS PER WEEK/MONTH

	Container size in cubic yards	1	2	3	4	5	6	Other
1. Disposal Service								
2. Disposal Service								
3. Disposal Service								
4. Disposal Service etc...								
Other Service								

TABLE OF CONTENTS
MISCELLANEOUS SERVICE

General Provisions: _____

Schedule of Rates: _____

Bulky waste: _____

Seasonal waste: _____

Additional services: _____

1. Description:

   This section contains the general provisions and charges applicable to the provision of solid waste collection services which are ancillary to a customer's main service and are not otherwise provided for in other classes of service.

2. General Provisions:

   Service is rendered on a limited basis.

SOLID WASTE COLLECTION TARIFF COMPANY: _____

1. Description of Service:

   The following subsection contains the rates and charges applicable to the provision of collection and removal services for bulky refuse as defined in N.J.A.C. 7:26H-1.4.

2. Special Provisions:

   Rates contained herein do not include applicable taxes and surcharges. These charges are listed on each customer's bill as described in N.J.A.C. 7:26H-4.5.

RATE SCHEDULE NO.
BULKY WASTE

1. Service Charge/Disposal Charge:

   (Applicable to On-Call Service which requires special pick-ups for items or bulk too small for roll off and too large for the hopper of a standard collection vehicle.)

Items to be Collected	Rate Services	Rate Disposal
Construction/demolition debris		
Stoves		
etc...		

SEASONAL SERVICE

1. Description of Service:

   The following subsection contains the rates and charges applicable to the provision of residential solid waste services on a limited basis and restricted to collection and removal of yard clippings and garden waste.

2. Special Provisions:

   The rates contained herein do not include applicable taxes and surcharges. These charges are listed on each customer's bill as described in N.J.A.C. 7:26H-4.5.

RATE SCHEDULE NO.
SEASONAL SERVICE

1. Service Charge/Disposal Charge:

Items to be Collected	Rate Services	Rate Disposal

ADDITIONAL SERVICES

1. Description of Service:

   The following subsection contains the rates and charges applicable to the provision of solid waste collection service not otherwise provided for in the tariff.

   This section is reserved for solid waste utilities to outline those services not otherwise provided for in this document. General format procedures as described herein must be followed and all variations must be submitted by format petition to the Department for consideration and approval.

2. Special Provisions:

   The rates contained herein do not include applicable taxes and surcharges. These charges will be outlined in customer's bill as prescribed in N.J.A.C. 7:26H-4.5.

RATE SCHEDULE NO.
ADDITIONAL SERVICE

Items to be Collected	Rate Services	Rate Disposal

SOLID WASTE COLLECTION TARIFF COMPANY: _____

SCHEDULE OF RATES
RATE SCHEDULE NO.
TRANSPORTATION FROM A TRANSFER STATION TO A DISPOSAL SITE

Example Price Includes Transportation only.

A. For solid waste transportation in open container 40 yards or less, $300.00 plus $1.00 per one-way mileage from a transfer station to a disposal site.

B. For solid waste transportation in an open container in excess of 40 yards, $400.00 plus $1.00 per one-way mileage from a transfer station to a disposal site.

C. Baled solid waste transportation on a flatbed carrier, $400.00 plus $1.00 per one-way mileage from the transfer station to a disposal site.