


**New Jersey Department of Environmental Protection
Division of Sustainable Waste Management**

**Certificate of Public Convenience and Necessity (CPCN) Annual Report for Solid Waste
Collectors/Transporters and Brokers
Fillable PDF Instructions**

Section 1 (Downloading the Form):

Save a local copy of the PDF file “2024 CPCN Annual Collector Transporter Utility Report.pdf”.

In order to use all of the features within the form the file will need to be opened in Adobe  Acrobat Reader with a version of Adobe Reader XI or higher. It is a free software available for download at <https://get.adobe.com/reader/>.

**** Please note – Do not print out this form to complete by hand. This form will be read electronically and must be filled using Adobe Acrobat Reader. It is strongly recommended to save your report after each page that is completed. ****

Section 2 (New Features):

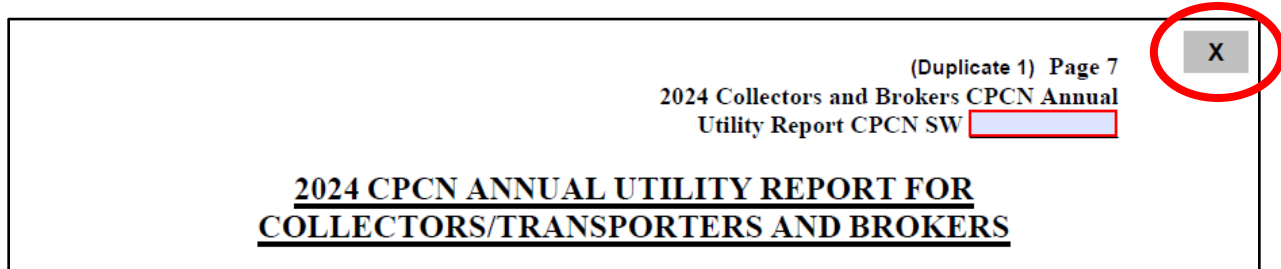
New features of the fillable form include the ability to duplicate pages, attach files, calculate buttons, and submit digital signatures.

Section 2A (Duplicating Pages):

On some pages, you may need additional space to provide all the required information. If you need additional space on a page, click on the “Duplicate This Page” button at the bottom of the screen. A blank copy of that page will be added to the end of the document.

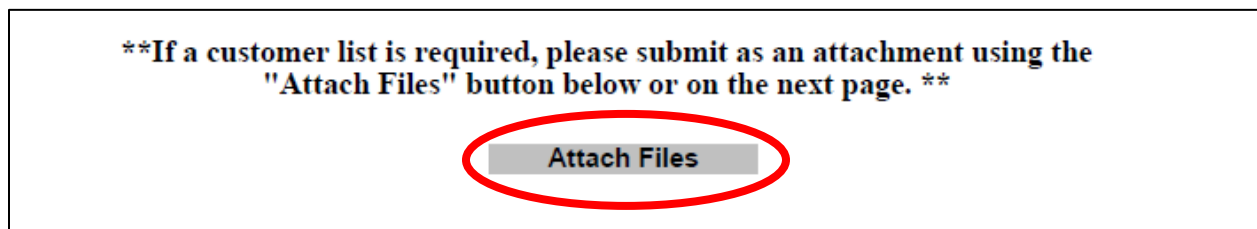
2. LIST OFFICERS AND EQUITY HOLDERS:			
*Name	<input style="width: 90%;" type="text"/>	*Title	<input style="width: 90%;" type="text"/>
		*Equity	<input style="width: 90%;" type="text"/>
Name	<input style="width: 90%;" type="text"/>	Title	<input style="width: 90%;" type="text"/>
		Equity	<input style="width: 90%;" type="text"/>
Name	<input style="width: 90%;" type="text"/>	Title	<input style="width: 90%;" type="text"/>
		Equity	<input style="width: 90%;" type="text"/>
3. NAME OF REGISTERED AGENT (Out of State Companies) : <input style="width: 90%;" type="text"/>			
STREET ADDRESS: <input style="width: 90%;" type="text"/>			
CITY, STATE, ZIP <input style="width: 25%;" type="text"/> <input style="width: 10%; text-align: center;"/> ▼ <input style="width: 25%;" type="text"/>			
TELEPHONE: <input style="width: 90%;" type="text"/>			
CELL PHONE: <input style="width: 45%;" type="text"/>		FAX NUMBER: <input style="width: 45%;" type="text"/>	
<input style="border: 2px solid red; padding: 5px;" type="button" value="Duplicate This Page"/>			

If a page was accidentally duplicated or is no longer needed, it may be deleted where there is an “X” button at the top right. Clicking this “X” will delete the page from the document.

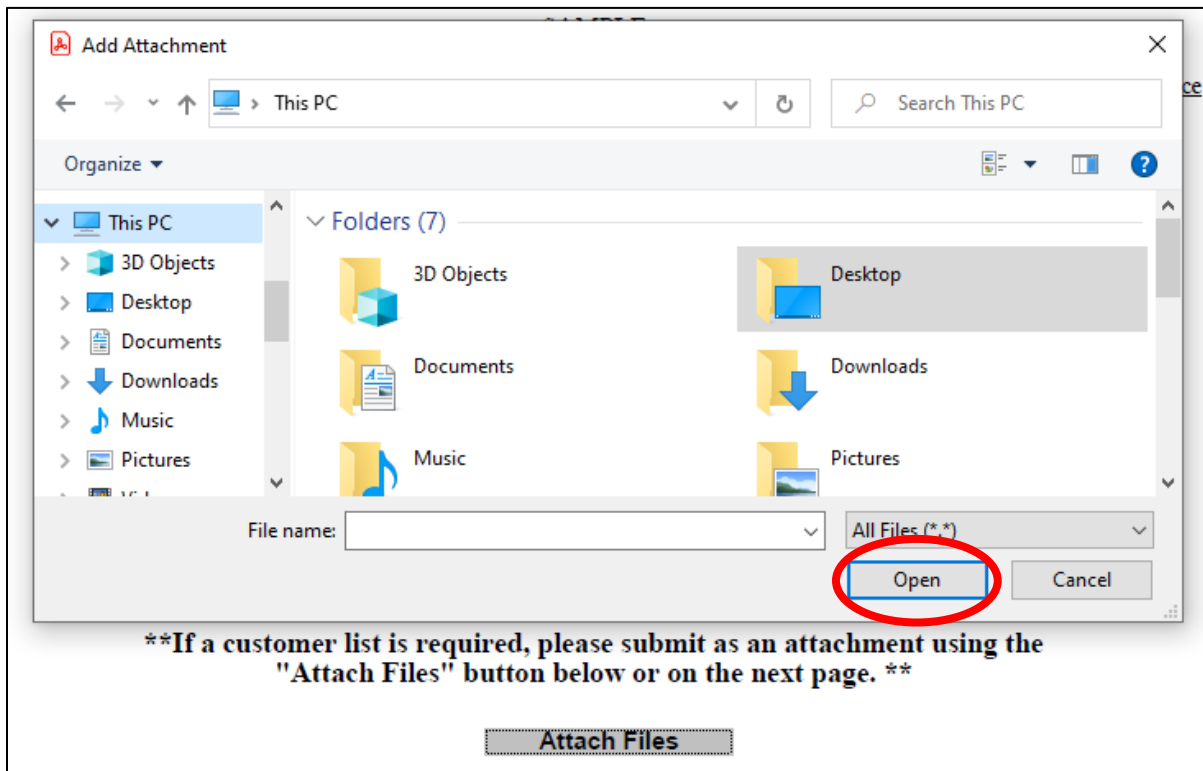


Section 2B (Attaching Documents):

Additional documents that are required to be submitted must be attached directly to the PDF. Pages that request additional documents contain an “Attach Files” button.



Clicking the “Attach Files” button will bring up a “File Explorer” window. Browse to the location on your computer where the file you wish to attach is located. Select the file and click “Open”. The file is now attached to the document.



Section 2C (Customer List):

If you are required to attach a customer list based on the information you've added on page 15 of the report (Customer Service Area Inventory), please note that the list will be treated as a confidential document and will not be subject to public review pursuant to N.J.A.C. 7:26H-5.9(c)(4).

Section 2D (Calculate Totals):

"Calculate Totals" buttons have been added to pages that require calculations (20, 22 & 27). Clicking the "Calculate Totals" buttons will calculate the totals on all pages that require calculations. Please note that calculations may take a few seconds to complete.

Gross Operating Revenues consist of reportable revenues which are derived from customer bills, fees, sales and services.

County	2024 Collector Gross Revenue
Atlantic	0.00
Bergen	0.00
Burlington	0.00
Camden	0.00
Cape May	0.00
Cumberland	0.00
Essex	0.00
Gloucester	0.00
Hudson	0.00
Hunterdon	0.00
Mercer	0.00
Middlesex	0.00
Monmouth	0.00
Morris	0.00
Ocean	0.00
Passaic	0.00
Salem	0.00
Somerset	0.00
Sussex	0.00
Union	0.00
Warren	0.00
Subcontracts (from pg 9)	0.00

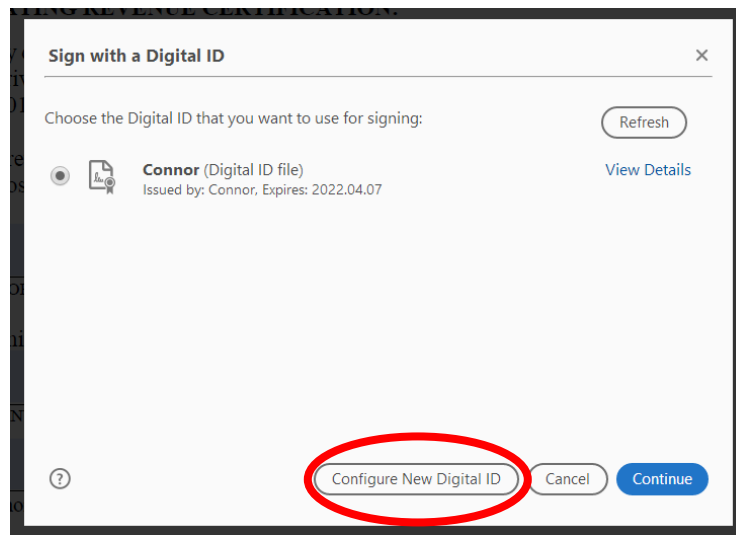
Total Gross Operating Revenue During Calendar Year 2024: \$0.00 **Collector Total** Calculate Totals

Section 2E (Digital Signatures):

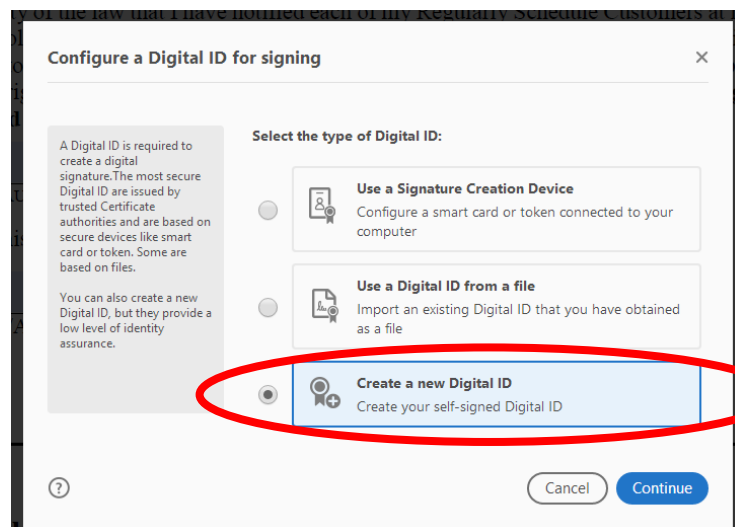
The form contains the ability to use digital signatures. Both the Owner/Authorized Member signature and the notary signature referenced in Section 3 below are required digital signatures. A signature field will be denoted after click on “Click Here to Sign Document” by having a red mark in the top left corner of the field (see below).



Clicking on the signature field will bring up a prompt with steps instructing users to sign with a digital ID. The first step is to click the “Configure New Digital ID” button.



If you do not already have a Digital ID file on your computer then select the third option, “Create a new Digital ID” and click continue.



Select the “Save to File” option and click continue. Then enter your information and create a password

The first screenshot, titled "Select the destination of the new Digital ID", shows two options: "Save to File" (selected) and "Save to Windows Certificate Store". The second screenshot, titled "Create a self-signed Digital ID", shows a form with fields for Name (John Smith), Organizational Unit, Organization Name, Email Address (john@smith.com), Country/Region (US - UNITED STATES), Key Algorithm (2048-bit RSA), and Use Digital ID for (Digital Signatures). The third screenshot, titled "Save the self-signed Digital ID to a file", shows a file path (C:\Users\doftus\AppData\Roaming\Adobe\Acrobat\DC) and a password creation section with fields for "Apply a password to protect the Digital ID:" and "Confirm the password:".

The digital ID that was created in the previous steps should now be selected. You will be prompted for your password. After entering your password click on the sign button in the bottom right of the window. The field will now be digitally signed.

The first screenshot, titled "Sign as 'John Smith'", shows a "Sign" button circled in red. The second screenshot shows the result of the signing: "John Smith" followed by "Digitally signed by John Smith Date: 2025.03.25 09:12:16 -04'00'" and a red signature line. Below this, the text "John Smith" is followed by "Digitally signed by John Smith Date: 2025.03.25 09:13:26 -04'00'" and a red signature line, with the text "(Signature of Owner or Officer)" in red below it.

**** Please note – Page 32 must not be signed until you are in the presence of a notary (See Section 3 below for instructions on the notary signature page). ****

Section 3 (Notary Signature):

Page 32 of the form must be filled out in the presence of a notary. Additionally, please note that all applicable pages must be completed prior to the affixation of signatures on the notary page.

After the form is signed by a notary it will become locked for editing.

Please email or bring a saved copy to your notary on a flash drive. Once you are in the presence of your notary, please fill out the fields and signature on page 32. After all the fields have been completed, have the notary click in the red bordered box labeled, “Sign Notary”.

**** Please note – If any signatures or required fields have not been completed at this point the PDF will display an error message with the missing fields. Please complete all missing fields before the notary signs. ****

VERIFICATION AND OATH FOR
2024 CPCN ANNUAL UTILITY REPORT FILING

NAME OF PERSON COMPLETING THIS FORM:

RELATIONSHIP TO BUSINESS:

CONTACT NUMBER:

The 2024 CPCN Annual Utility Report for Solid Waste Collectors/Transporters and Brokers must be verified and certified by the oath of the President or another principal general officer if other than the respondent and must be approved as a "key employee" as defined by N.J.S.A. 13:1E-127(f).

Oath To be made by the Proprietor, Partner, President or other principal officer of the utility:

(Insert name of Owner or Officer and Title)

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment" N.J.A.C. 7:26H-5.9(d)

I acknowledge that submitting false information to the Department of Environmental Protection may subject my company to potential enforcement actions, penalties and/or revocation of the A-901 license and CPCN.

Click Here to Sign Document

(Signature of Owner or Officer)

State of _____ County of _____

Sworn to and subscribed before me

this _____ day of _____, 20____

Print Name of Notary Public or Officer Authorized to Administer Oath

Signature of Notary Public or Officer Authorized to Administer Oath

My Commission expires: _____

The notary must complete all the fields that appear after the box disappears. Once the fields are complete the signature button can be clicked to unlock the signature field. The steps to sign the notary are the same as above in section 2E.

State of County of

Sworn to and subscribed before me

this day of 20

Print Name of Notary Public or Officer Authorized to Administer Oath

Signature

Signature of Notary Public or Officer Authorized to Administer Oath

My Commission expires:

State of New Jersey County of Mercer

Sworn to and subscribed before me

this 25 day of March 2025

Sample Notary

Print Name of Notary Public or Officer Authorized to Administer Oath

Sample Notary Digitally signed by Sample Notary
Date: 2025.03.25 09:16:38 -04'00'

Signature of Notary Public or Officer Authorized to Administer Oath

My Commission expires: Sample

Once the form has been signed by the notary it will be locked from editing. Please save the form at a convenient location on the PC or flash drive. The form is now ready to submit (See section 4 below). Please have the notary send you a copy of the completed form by email or placed back on your flash drive.

Section 4 (Submission to the DEP):

After completing the report, save the filled-out form and send it as an [attachment to swutility@dep.nj.gov](mailto:swutility@dep.nj.gov). Additionally, to facilitate an increase in performance and ease of use include any suggestions, questions or concerns in regard to this new submission method. Please remember to save all work with the form to maintain accurate records.