

Please return this form as soon as possible.
Mail to: Crown Point Mayor's Office, 101 N. East Street, Crown Point, IN 46317
Fax to: (219) 662-3262. Hand deliver to: Geisen Building, 109 N. East Street, according to the schedule on Page 1.

Recycling Plan Form — please clearly print responses

Business Name: _____

Business Address: _____

Business Recycling Program Contact Name: _____

Daytime Phone Number: _____ E-Mail Address: _____

GARBAGE SERVICE INFORMATION

Garbage Collection Service Provider: _____

RECYCLING SERVICE INFORMATION

Recycling Program Type: (circle one) Drop-off Pick-up collection service

If Drop-off, identify location: _____ Jerry Ross Park _____ Other location (specify) _____

If Pick-up collection, identify service company: _____

Recycling Service Frequency (circle) : Less than once-a-week Once-a-Week Twice-a-week More than twice-a-week

"Win-Win Workplace Recycling" Program Option: (circle only one— refer to Page 2 for descriptions)

Option #1 = Three (3) Recyclable Materials

Option #2 = Two (2) Recyclable Materials **AND** Two (2) Waste Reduction Strategies

Please list materials to be Recycled: (1) _____

(Identify 3 materials if using "Option #1" or

Identify 2 materials if using "Option #2.") (2) _____

(3) _____

If using "Option #2," please identify two (2) Waste Reduction Practices:

(1) _____

(2) _____

EDUCATIONAL ACTIVITIES TO SUPPORT WORKPLACE RECYCLING PROGRAM: (circle all that apply)

Flyers/Brochures Posted Signs/Info. Sheets E-mail/Periodic Updates Other: _____

Please retain the original Recycling Plan at the Business.

Provide a copy of the Recycling Plan to the Mayor's Office as directed above.

Please contact the Mayor's Office at (219) 662-3240 if you have questions about completing this form.