



CITY OF ELK GROVE  
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## Business and Multi-Family Recycling Self-Haul Recycling Form

**Information on this report will not be disclosed except as required under the law.**

1. Business/Generator Name: \_\_\_\_\_
2. Contact Name: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_
3. Address: \_\_\_\_\_
4. Business Type:
  - Office             Food Service         Retail         Industrial/Warehouse
  - Multi-family         Hotel             Church         Medical
  - Auto Service/Gas    Other (please specify): \_\_\_\_\_
5. Garbage Hauler (please specify): \_\_\_\_\_
6. Number of Employees: \_\_\_\_\_
7. Please complete the table below with the self-haul information for your facility:

Designated Recycling Materials	Estimated Monthly Volume of Recyclable Material Generated	Name of Recycling Facility where Recyclable Material is Delivered
Aluminum and Steel Containers		
Glass Bottles and Containers		
Mixed Paper (newspaper, junk mail, cardboard, phonebooks, magazines, computer paper, and milk and egg cartons)		
Plastics (all empty food and beverage containers #1-#7)		
Scrap Metal		
Wood Pallets		

8. Business/Generator Owner or Designee:

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date