Reimbursement for Recycling Program Start-Up Cost
Condominium/Apartment Buildings

The City and County of Honolulu, Department of Environmental Services will reimburse multi-family property associations or residential building owners for expenditures associated with the start-up of recycling programs for their residential facilities. Eligible costs include recycling containers and equipment, tenant education materials, system design consultation and coordination. **Pre-approval is required to confirm eligibility of planned expenditures.** Distribution of monies is subject to availability of funds.

Multi-family property associations or residential building owners may request reimbursement for recycling program start-up expenditures up to $2,000. Reimbursement payments will be made payable to a bona fide residential association or building owner. Checks cannot be issued to an individual.

Qualifying properties are required to register using the City’s **Vendor Self Service (VSS)** registration process. You will be given direction on completing VSS registration once approval for the reimbursement has been granted.

Please direct questions and requests for assistance to the Recycling Branch Staff at 768-3200 or **info@opala.org**. Tips and guidelines for “Condo Recycling” are available online at **www.opala.org**.

With the submission of the request form, the multi-family property association or building owner agrees to allow City personnel to inspect the facility’s recycling program for verification. The association or building owner also agrees to submit annual reports to the City’s Department of Environmental Services summarizing recovery rates, costs/benefits and program operations for 3 years following start-up date. See attached annual report form.

**Request for Pre-Approval**
To request pre-approval, complete all information on the following pages with the exception of the Request for reimbursement box. Pre-approval can be emailed to **info@opala.org**.

**Request for Reimbursement**
Once pre-approval is given, complete the information in the Request for reimbursement box and attach the following documentation:

- Proof of purchase receipts for recycling containers, equipment, printed materials
- Photos of recycling containers and equipment in operation at your facility
- Samples of tenant education materials
- Copy of collection service agreement

Mail the completed, signed request form to the following address:
City & County of Honolulu
Refuse Division-Recycling Branch,
1000 Uluohia Street, Suite 201
Kapolei, Hawaii 96707.
Reimbursement for Recycling Program Start-Up Cost
Condominium/Apartment Buildings

NAME OF MULTI-FAMILY ASSOCIATION / BUILDING: _______________________________________________________

Address: ____________________________________________________________________________________________

CONTACT PERSON: ________________________ TITLE/POSITION: _________________________

Telephone: ___________ (daytime) ___________ (cell)

E-mail: ________________________

ASSOCIATION PRESIDENT / BUILDING OWNER (circle one): ________________________________________________

TELEPHONE: ___________ (daytime) ___________ (cell)

EMAIL: ________________________

PROPERTY INFORMATION:

Number of units: _______  Square footage of building: _________

Square footage of property: _________

Date recycling program started: ______________

Request for pre-approval:

Amount of funds: $___________

Provide photos and cost of equipment/material intending to purchase.

Pre-approval granted by: _______________  Title: ________________________

Date: ______________

Request for reimbursement:

Amount of funds: $___________

Attach all required documentation.

Approval granted by: _______________  Title: ________________________

Date: ______________
Description of recycling program operations implemented, including the following:

- **Materials collected:**
  - ☐ aluminum cans – HI-5
  - ☐ aluminum cans – non-deposit
  - ☐ corrugated cardboard
  - ☐ glass bottles – HI-5
  - ☐ glass bottles – non-deposit
  - ☐ green waste
  - ☐ newspaper
  - ☐ office paper
  - ☐ plastic bottles – HI-5
  - ☐ plastic bottles – non-deposit

- **Types and locations of recycling containers and equipment:**
  
  ____________________________________________
  ____________________________________________
  ____________________________________________
  ____________________________________________
  ____________________________________________

- **Collection Service Agreement (company, organization, self haul):**
  
  ____________________________________________

- **Additional description of operations:**
  
  ____________________________________________
  ____________________________________________
  ____________________________________________
  ____________________________________________
  ____________________________________________

**Briefly describe tenant education and notification.**

__________________________________________
__________________________________________
__________________________________________
__________________________________________
__________________________________________

**How will your recycling program be sustained over the next five years?**

__________________________________________
__________________________________________
__________________________________________
__________________________________________
__________________________________________

**Other/Comments:**

__________________________________________
__________________________________________
__________________________________________
__________________________________________
__________________________________________
### DETAIL OF EXPENDITURES

<table>
<thead>
<tr>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recycling Containers:</td>
</tr>
<tr>
<td>Type / quantity</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Other Equipment:</td>
</tr>
<tr>
<td>Type / quantity</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Tenant education materials:</td>
</tr>
<tr>
<td>(brochures, signs, newsletter, poster)</td>
</tr>
<tr>
<td>Type / quantity</td>
</tr>
<tr>
<td></td>
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<tr>
<td>System Design and Coordination:</td>
</tr>
<tr>
<td>Company, staff position, hourly rate, number of hours and scope of work. Work must be specifically related to designing a recycling program for this property.</td>
</tr>
</tbody>
</table>

**Total amount of funds requested:** $__________________

### SUBMITTED BY:

Print Name: ____________________________

Current Association President / Building Owner

Signature: ____________________________

Date: ______________