

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 opala@honolulu.gov. 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 opala@honolulu.gov.

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 green waste _____
- aluminum cans – non-deposit newspaper
- corrugated cardboard office paper _____
- glass bottles – HI-5 plastic bottles – HI-5
- glass bottles – non-deposit 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

Cost

Recycling Containers:
Type / quantity

\$ _____

Other Equipment:
Type / quantity

\$ _____

Tenant education materials:
(brochures, signs, newsletter, poster)
Type / quantity

\$ _____

System Design and Coordination:
Company, staff position, hourly rate, number of hours
and scope of work. Staff hours not to exceed \$200.
Work must be specifically related to designing a recycling
program for this property.

\$ _____

Total amount of funds requested:

\$ _____

SUBMITTED BY:

Print Name: _____
Current Association President / Building Owner

Signature: _____

Date: _____