



Public Utilities Department
Solid & Hazardous Waste Management Division

Temporary Special Event Recycling Plan

Please Print Clearly

1. Event Title: _____ Phone #: _____

2. Contact: _____ Email: _____

3. Mailing Address: _____ City: _____ Zip: _____

4. Event Start Date: _____ Start Time: _____ a.m. /p.m.

5. Event Finish Date: _____ Finish Time: _____ a.m. /p.m.

6. Event Location (Attach site map if available): _____

7. Event setting: Indoors Outdoors Both

8. Estimated Number of Participants *per day*: _____ Total Estimated Number of Participants: _____

9. Briefly describe the nature of the event (e.g., craft fair, workshop, dog show, run, etc.) _____

10. Number of trash containers: _____ Number of recycling containers: _____

(Note: Ordinance No. 2009-56 requires you to provide one recycling container for each trash container. The recycling containers must be clearly marked and placed in the same locations as the trash containers.)

11. Materials targeted: Beverage Containers (plastic bottles and cans) Cardboard Clean Paper

12. Number of staffing and/or volunteers for managing recycling at event: _____

(Keeping trash and recycling from overflowing during your event is important to a successful recycling plan.)

13. Briefly describe your plan for managing solid waste during the event. Be sure to include, at a minimum, the frequency containers will be checked and emptied, and the location where trash and recycling will be stored during the event. _____

14. How will Recyclables be disposed of?

Contracted with hauler (attach contract)

a) Email Receipt within 30 days to Recycling@colliercountyfl.gov

With on site containers, must receive property owner approval

a) Name and number _____

Self-haul to recycle facilities

a) email receipt within 30 days to Recycling@colliercountyfl.gov

For additional information and assistance, please contact the Collier County Waste Reduction and Recycling Section by phone at (239) 252-7575, or email recycling@colliercountyfl.gov