**SCRAP RECYCLING SUPPLEMENTAL APPLICATION**

|  |  |
| --- | --- |
| **COMPANY NAME:**  | **EFFECTIVE DATE:**  |
| **ADDRESS:**  | **YEAR BUSINESS STARTED:**  |
|        | **MANAGEMENT EXPERIENCE****IN INDUSTRY:** **years** |
| **PHONE NUMBER: (****)**  |
| **FEDERAL ID#:**  |
| **CONTACT NAME:**  |
|   |
| **TRADE ASSOCIATION MEMBERSHIPS / AFFILIATIONS:**  | **NUMBER OF EMPLOYEES:**  |

**OPERATIONS**

**RECYCLING AND PROCESSING MATERIAL – (INDICATE % OF ANNUAL SALES / REVENUE):**

|  |  |  |  |
| --- | --- | --- | --- |
| **METAL:** |   | **OTHER:** |   |
| **ALUMINUM** | **%** | **PLASTIC** | **%** |
| **BRASS** | **%** | **RUBBER** | **%** |
| **CHROMIUM** | **%** | **PAPER** | **%** |
| **COPPER** | **%** | **GLASS** | **%** |
| **IRON/STEEL** | **%** | **CLOTH** | **%** |
| **LEAD** | **%** | **CHEMICAL** | **%** |
| **NICKEL** | **%** | **OTHER NON-METAL** | **%** |
| **ZINC** | **%** |   |   |
| **OTHER** | **%** |   |   |

**ANNUAL VOLUME FOR 3 YEARS**

|  |  |  |
| --- | --- | --- |
| **YEAR** | **TOTAL ANNUAL SALES / REVENUE** | **TOTAL ANNUAL TONNAGE** |
| PROJECTED FOR NEXT YEAR |  |  |
| ANNUAL CURRENT YEAR |  |  |
| ACTUAL PRIOR YEAR |  |  |

**MAJOR SOURCES OF RECYCLE MATERIAL**

|  |  |
| --- | --- |
| **MAJOR SOURCES** | **PERCENTAGE (%) OF MATERIALS RECEIVED FROM SOURCES** |
| MAUNFACTURERS |  |
| MUNICIPALITIES |  |
| DISMANTLERS |  |
| CONTRACTORS |  |
| PUBLIC CUSTOMERS |  |

**SCRAP RECYCLING SUPPLEMENTAL APPLICATION**

**DO YOU OWN OR OPERATE A LANDFILL?** **[ ]  YES** **[ ]  NO**

**IF YES, PLEASE DESCRIBE OPERATIONS, MATERIALS ACCEPTED AND PROVIDE ADDRESS:**

**DO YOU OWN OR OPERATE A RECYCLING COLLECTION CENTER? [ ]  YES [ ]  NO**

**IF YES, PLEASE DESCRIBE OPERATIONS, MATERIALS ACCEPTED AND PROVIDE ADDRESS:**

**DO YOU OWN OR OPERATE AN AUTOMOBILE DISMANTLING OPERATION? [ ]  YES [ ]  NO**

**IF YES, PLEASE DESCRIBE OPERATIONS AND PROVIDE ADDRESS:**

**DO YOU ALLOW THE GENERAL PUBLIC ON YOUR PREMISES? [ ]  YES [ ]  NO**

**IF YES, PLEASE ANSWER THE FOLLOWING QUESTIONS:**

**AVERAGE NUMBER OF DAILY AND WEEKLY VISITORS**

**DESCRIBE ALL AREAS THAT THE PUBLIC IS PERMITTED**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   |   |   |   |   |
| **DO YOU ACCEPT ANY OF THE FOLLOWING MATERIALS?** |   |   |   |
| **TRANSFORMERS** | **[ ]  YES [ ]  NO** |  |  |  |
| **ELECTRICAL CAPACITORS** | **[ ]  YES [ ]  NO** |  |  |  |
| **AUTO AIR BAGS** | **[ ]  YES [ ]  NO** |  |  |  |
| **BATTERIES** | **[ ]  YES [ ]  NO** |  |  |  |
| **OIL** | **[ ]  YES [ ]  NO** |  |  |  |
| **LEAD PAINT** | **[ ]  YES [ ]  NO** |  |  |  |
| **FREON** | **[ ]  YES [ ]  NO** |  |  |  |
| **ANTIFREEZE** | **[ ]  YES [ ]  NO** |  |  |  |
| **APPLIANCES CONTAINING PCB’s** | **[ ]  YES [ ]  NO** |  |  |  |
| **SYSTEMS CONTAINING CFC’s** | **[ ]  YES [ ]  NO** |  |  |  |

**IF YES TO ANY OF THE ABOVE, PLEASE DESCRIBE PROCEDURES FOR IDENTIFYING AND DISCARDING ANY HAZARDOUS SUBSTANCES**

**DO YOU HAVE THE FOLLOWING PREMISES PROTECTION?**

**FENCED YARD [ ]  YES [ ]  NO**

**ALARM SYSTEM [ ]  YES [ ]  NO**

**GUARD DOGS [ ]  YES [ ]  NO**

**DO YOU PERFORM ANY OF THE FOLLOWING OFFSITE WORK?**

**COLLECTION [ ]  YES [ ]  NO**

**CONTAINERS / DUMPSTERS [ ]  YES [ ]  NO**

**DISMANTLING [ ]  YES [ ]  NO**

**DEMOLITION [ ]  YES [ ]  NO**

**WRECKING [ ]  YES [ ]  NO**

**SALVAGE [ ]  YES [ ]  NO**

**OTHER** **[ ]  YES [ ]  NO IF YES, DESCRIBE WORK**

**PAGE 2 OF 4**

**SCRAP RECYCLING SUPPLEMENTAL APPLICATION**

**HAVE YOU EVER BEEN CITED BY THE ENVIRONMENTAL PROTECTION AGENCY? [ ]  YES [ ]  NO**

**IF YES, PLEASE PROVIDE DETAILS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|   |  |   |   |   | **EQUIPMENT** |
|  | **DO YOU OWN ANY OF THE FOLLOWING TYPES OF EQUIPMENT?** |   |   |
| **AUTOMOBILE SHREDDER** |  | **[ ]  YES [ ]  NO** |  |
| **HYDRAULIC SHEARS** | **[ ]  YES [ ]  NO** |  |
| **BALING PRESS** | **[ ]  YES [ ]  NO** |  |
| **SWEAT FURNACE / INCINERATOR** | **[ ]  YES [ ]  NO** |  |
| **CRANES** | **[ ]  YES [ ]  NO** |  |
| **CONVEYORS** | **[ ]  YES [ ]  NO** |  |
| **RADIATION DETECTION** | **[ ]  YES [ ]  NO** |  |
| **ALLOY SORTERS** | **[ ]  YES [ ]  NO** |  |
| **MAGNETIC SEPARATORS** |  |  |

**DO YOU EVER RENT OR LEASE EQUIPMENT TO OTHERS? [ ]  YES [ ]  NO**

**IF YES, DO YOU PROVIDE OPERATORS? [ ]  YES [ ]  NO**

**DESCRIBE TYPE OF EQUIPMENT**

**DO YOU HAVE FULL-TIME EQUIPMENT MAINTENANCE STAFF? [ ]  YES [ ]  NO**

**HOW OFTEN IS EQUIPMENT MAINTENANCE PERFORMED?**

**OTHER**

**PROVIDE ADDITIONAL INFORMATION:**

**COMPANY POLICY AND PROCEDURES FOR THE FOLLOWING**

**HAZARDOUS MATERIAL IDENTIFICATION**

**RADIOACTIVE MATERIAL IDENTIFICATION**

**SAFETY**

**TRAINING**

**PAGE 3 OF 4**

**SCRAP RECYCLING SUPPLEMENTAL APPLICATION**

**FRAUD WARNING AND SIGNATURE**

**WARNING –** Any person who with intent to defraud to knowing that he is facilitating a fraud against an insurer, submits an application containing a false or deceptive statement is guilty of insurance fraud**.**

THE SIGNATURE OF THE APPLICANT VERIFIED THAT THE INFORMATION CONTAINED ON THIS APPLICATION IS CORRECT AND NO MISREPRENSTATIONS HAVE BEEN MADE.

**Insured’s Signature       Date:**

**Agent/Producer Signature      Date:**

**PAGE 4 OF 4**