

DEPARTMENT OF ENVIRONMENTAL SERVICES
CITY AND COUNTY OF HONOLULU

PETER CARLISLE
MAYOR

REFUSE DIVISION
1000 Uluohia Street, Suite 201, KAPOLEI, HAWAII 96707
Phone: (808) 768-3200 Fax: (808) 768-3434

TIMOTHY E. STEINBERGER, P.E.
DIRECTOR

GLASS RECYCLING COMPLIANCE FORM 2012

(Date Here)

Revised Ordinance of City & County of Honolulu, Sec. 9-3.1 requires all liquor-serving establishments to arrange and provide for the separate collection and recycling of glass containers. In so doing, liquor-serving establishments shall not place glass bottles and jars in the same containers as those holding refuse. City representatives conduct random inspections of businesses affected by this law.

To verify your compliance with this law, we must obtain information about your current **glass** recycling program. Please complete this form, including **signature by the owner or general manager** certifying its accuracy, and **return by** _____.

The majority of glass bottles from your business may be affected by the Beverage Container Deposit Program (e.g. beer, malt beverage, wine cooler, drink mix). However, to be in compliance with the City Ordinance, you must also recycle your non-deposit glass containers (e.g. wine, spirit, liqueur bottles).

Address (if different than above): _____

Contact person: _____ **Title:** _____

Phone number: _____ **E-mail:** _____

Check appropriate box:

- Business is in compliance – glass bottles and jars are not put in same containers as those holding refuse.

Approximate number of bottles recycled per month: deposit (**HI-5**) _____ non-deposit _____

Recycling Company: _____ Phone: _____

- Business is **not** in compliance and needs assistance.

Explain: _____

- Business is not subject to this ordinance. Reason: _____

If you have questions or need assistance with your glass recycling program, contact Eileen Helmstetter at mhelmstetter@honolulu.gov or 768-3426. Recycling information is also available online at www.opala.org.

If this form is not returned, an inspector may be dispatched to your establishment to verify compliance. Businesses not in compliance are subject to fines.

I certify that the foregoing statements are correct to the best of my knowledge.

Name (print)

Check one:

- Owner General Manager

Signature

Date

FAX to 768-3434 / MAIL by folding form in thirds / EMAIL to mhelmstetter@honolulu.gov

[To mail, fold page in thirds, tape at bottom and affix stamp.]

Return address:

Affix Stamp
Here

GLASS
2nd Notice

City and County of Honolulu
Environmental Services Department
Refuse Division - Recycling Office
1000 Uluohia Street, Suite 201
Kapolei, Hawaii 96707