

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF MATERIALS MANAGEMENT
 625 Broadway, 9th Floor, Albany, NY 12233-7251

WASTE TRANSPORTER REGISTRATION ANNUAL REPORT

Pursuant to Article 27, Titles 3 and 15 of the Environmental Conservation Law, 6 NYCRR Part 364

MUST TYPE OR PRINT LEGIBLY

Transporter Name: _____	Registration No. _____
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WASTE COLLECTION FORM

For Reporting Period January 1, 2024 – December 31, 2024

**ANNUAL REPORTS MAY BE RETURNED TO THE DEPARTMENT BY
 MAIL, E-MAIL (TRANSPORT@DEC.NY.GOV) OR FAX (518-402-9034)**

**** Units MUST be indicated in tons ONLY****

Waste picked up outside of NYS and transported to a facility outside of NYS should not be reported.

Type of Waste	Amount of waste picked up			
	Within NYS		Outside of NYS	
Commercial Solid Waste [364-3.1(c)]		Tons		Tons
Construction and Demolition Debris [364-3.1(d)]		Tons		Tons
Household Hazardous Waste [364-3.1(b)]		Tons		Tons
Regulated Medical Waste [364-3.1(a)]		Tons		Tons
Sharps [364-2.1(e)]		Tons		Tons
Waste Oil (364-3.1(g))		Gallons		Gallons
Waste Tires [364-3.1(f)]		Tons		Tons

I certify, under penalty of law, that the data and other information identified in this report have been prepared under my direction and supervision in compliance with the system designed to ensure that qualified personnel properly and accurately gather and evaluate this information. I am aware that any false statement I make in such report is punishable pursuant to section 210.45 of the Penal Law.

Signature _____ Title _____

Print _____ Date _____