WAIVER PETITION

Food Donation and Food Scraps Recycling Law

This form is to be used by any entity required to comply with the Food Donation and Food Scraps Recycling law and would like to apply for a waiver from a portion or all requirements of the law for the 2027 calendar year. Please complete and submit this form and all required supporting documentation and information **to FoodScrapsLaw@dec.ny.gov**.

Note: To petition for a waiver from provisions of the law that are not listed below (food donation, etc), please contact FoodScrapsLaw@dec.ny.gov.

REQUEST TYPE

◯ New ◯ Renewal ◯ Emergency*

*Emergency Wavier: A designated food scraps generator may petition the department to obtain a waiver outside of the annual request time frame for situations that require immediate relief (such as unexpected closure of an organics recycler, emergency response event, etc.). An emergency waiver request may be submitted at any time of the year.

CONTACT INFORMATION

Business Name: Generator Code: DFSG-

Contact Person: Title:

Email:` Phone Number:

Designated Food Scraps Generator Location

Address:

City/Town: Zip Code:

WAIVER JUSTIFICATION

Please check all applicable waiver justifications below. For each one, **please include the additional documentation** or information outlined below each justification statement in your waiver petition.

☐ **Justification: The total cost of organics recycling is at least 10% greater than the total cost of landfilling or combustion.**

☐ An analysis of the cost of disposal including documentation (email, invoice, etc.) from the transporter or other verified source that indicates the total cost for disposal of all solid waste removed from the generator for the previous year

☐ An analysis for the cost of recycling of food scraps including documentation (email, invoice, etc.) from all food scraps transporters available to the generator, indicating average monthly cost as measured over a calendar year, for recycling of food scraps and managing the remainder of the waste stream removed from the generator. The analysis must include:

a. An evaluation of the amount of waste reduced and cost savings through increased food donation.
b. An evaluation of the cost savings by reducing the frequency of waste collection and reduce the cost of waste disposal since food scraps are removed from the waste stream.

☐ An analysis with supporting calculations showing the cost of food scraps recycling compared to the cost of disposing of the food scraps as solid waste for the generator.

☐ **Justification: There are no organics recycler(s) within 50 miles (as specified by DEC) with sufficient capacity.**

☐ Documentation (email, etc.) from any transporter and/or organics recycler contacted by the generator indicating why the organics recycler cannot accept the generator's food scraps at the present time and whether they will be able to do so during the coming calendar year when the waiver would be in effect.

☐ Other relevant information.

☐ **Justification: A food scraps transporter is not available to service the generator.**

☐ Documentation (email, etc.) from the transporter currently used by the generator indicating that they do not provide food scraps transport.

☐ Documentation (email, etc.) from each food scraps transporter available in the generator's area indicating that they cannot provide food scraps transport for the generator during the coming calendar year when the waiver would be in effect.

☐ Other relevant information.

☐ **Justification: Unique circumstances that apply to the generator.**

☐ A detailed explanation of the unique circumstances, and why the generator is seeking a waiver from compliance.

CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision. Based on my inquiry of the person or persons directly responsible for gathering the information required to complete this application, I believe the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Signature:

Name (print):

Title:

Date:

Please make sure your waiver petition includes all supporting documentation. Requests submitted without supporting documentation cannot be approved. Send completed waiver petition form and supporting documentation to FoodScrapsLaw@dec.ny.gov .