



## CELL PHONE DATA COLLECTION FORMS for the CENTRALIZED DATA REPOSITORY for electronics recycling related information

### The Problem

During the past decade, dozens of public and private organizations have created programs and pilot projects to collect and recycle end-of-life (EOL) consumer electronics. Although these programs and pilots have yielded good data and provided insight into the volumes, long-term costs and challenges associated with collecting and recycling EOL electronics, analyzing these results across independent electronics recycling efforts has proven difficult.

### The Solution

In response to this growing problem, the MARCEE (Mid-Atlantic Recycling Center for End-of-Life Electronics) Project along with EPA's Plug-In to eCycling Partners and the Polymer Alliance Zone of West Virginia (PAZ) have compiled a set of standard data elements to be used for the collection of electronics recycling related information. These data standards have been incorporated into the Centralized Data Repository's Data Collection forms, both web-based and printable versions. This Repository is an open, collaborative public/private data sharing project which is addressing the need for up-to-date information on the collection and recycling of electronic waste.

### What Happens Next?

Gather your data using all or some of the forms found on the following pages. Instructions are included along with definitions for each data element found on the forms. Once the forms are completed, please submit them to the Centralized Data Repository.

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## Cell Phone Collection Program Sponsor Information

(Page 1 of 1)

<b>P1 Program/Pilot Sponsor Name:</b>					
<b>P2 City:</b>		<b>P3 State:</b>		<b>P4 Zip:</b>	
<b>P5 Sponsor Organization Type:</b>	<input type="checkbox"/> Coalition <input type="checkbox"/> Non-Profit <input type="checkbox"/> State Government <input type="checkbox"/> Federal Government <input type="checkbox"/> Recycler <input type="checkbox"/> Regional Authority	<input type="checkbox"/> Retailer <input type="checkbox"/> Manufacturer <input type="checkbox"/> School <input type="checkbox"/> Transporter <input type="checkbox"/> Local/County Government			
<b>P6 Program/Pilot Point of Contact</b>					
<b>First Name:</b>		<b>Last Name:</b>			
<b>Email:</b>					
<b>Address:</b>					
<b>City:</b>		<b>State:</b>		<b>Zip:</b>	
<b>Country:</b>					
<b>Phone:</b>				<b>Extension:</b>	
<b>P7 Program/Pilot Start Date:</b>	(m/d/yyyy)				
<b>P8 Program/Pilot End Date:</b>	(m/d/yyyy)				

## Cell Phone Collection Program/Pilot Data

(Page 1 of 1)

<b>PD1 Reporting Period Start Date:</b>		
<b>PD2 Reporting Period End Date:</b>		
<b>PD3 Where does the financing for this program come from (how was it paid for)? (select all that apply):</b>	<input type="checkbox"/> Drop Off Fee <input type="checkbox"/> Government Funds <input type="checkbox"/> Grants	<input type="checkbox"/> Manufacturer <input type="checkbox"/> Point of Purchase <input type="checkbox"/> Retailer
<b>PD4 What are the promotional techniques used to promote this program/pilot? (select all that apply):</b>	<input type="checkbox"/> Brochures <input type="checkbox"/> Fliers <input type="checkbox"/> Government Newsletter <input type="checkbox"/> Internet <input type="checkbox"/> Movie Theater <input type="checkbox"/> Newspaper	<input type="checkbox"/> Other Print <input type="checkbox"/> Radio <input type="checkbox"/> Recycler Bill <input type="checkbox"/> TV <input type="checkbox"/> Other (specify)
<b>PD5 Total Promotional Cost for this Program/Pilot:</b>		
<b>PD6 Program Setup Cost:</b>		
<b>PD7 Other Recurring Program Cost:</b>		
<b>PD8 Other Recurring Program Cost Type:</b>		
<b>PD9 Regulatory or legislative context in which pilot/program is being implemented:</b>	<input type="checkbox"/> Advance Recycling Fee Mandated <input type="checkbox"/> Disposal Ban in Place <input type="checkbox"/> Mandated Producer Responsibility <input type="checkbox"/> None	
<b>PD10 Unique Program/Pilot Features:</b>		

## Cell Phone Collection Collection Location Information

(Page 1 of 1)

<b>Cell Phone Collection Collection Location Information</b>					
(Page 1 of 1)					
<b>C1 PROGRAM/PILOT NAME:</b>					
<b>C2 COLLECTION LOCATION NAME:</b>					
<b>C3 COLLECTION START DATE:</b>			<b>C4 END DATE:</b>		
<b>C5 Collection Location Point of Contact</b>					
<b>First Name:</b>				<b>Last Name:</b>	
<b>Email:</b>					
<b>Address:</b>					
<b>City:</b>		<b>State:</b>		<b>Zip:</b>	
<b>Country:</b>					
<b>Phone + Extension:</b>					
<b>Location Information</b>					
<b>C6 Collection Location Name:</b>					
<b>C7 Address:</b>					
<b>City:</b>		<b>State:</b>		<b>Zip:</b>	
<b>C8 Frequency of Collection:</b>		<input type="checkbox"/> One-Time Event <input type="checkbox"/> Ongoing, Limited Duration <input type="checkbox"/> Ongoing, Indefinite Duration			
<b>C9 Consolidation Point:</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>C10 Days and Hours of Operation:</b>					
<b>C11 Access to Service:</b>		<input type="checkbox"/> Individuals <input type="checkbox"/> Schools <input type="checkbox"/> Businesses		<input type="checkbox"/> Non-profits <input type="checkbox"/> County Residents <input type="checkbox"/> Open to All	
<b>C12 Political Jurisdiction served by this program/activity:</b>		<input type="checkbox"/> Municipality <input type="checkbox"/> County/Parish <input type="checkbox"/> State <input type="checkbox"/> Country (Nationwide Program)			

## Cell Phone Collection Activity

(Page 1 of 1)

<b>A1 PROGRAM/PILOT NAME:</b>			
<b>A2 COLLECTION LOCATION NAME:</b>			
<b>A3 COLLECTION START DATE:</b>		<b>A4 END DATE:</b>	
<b>Collection Activity Information</b>			
<b>A5 Reporting Period Start Date:</b>			
<b>A6 Reporting Period End Date:</b>			
<b>A7 Was Backhauling used from this collection location?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Products Collected</b>			
<b>Product</b>	<b>A8 Actual Units</b>	<b>A9 User Fees</b>	<b>A10 Fee Per Unit</b>
<b>Batteries</b>			
<b>Cell Phones/PDAs and Accessories</b>			
<b>A11 TOTAL:</b>			
<b>Recycler Fees to the Sponsor</b>			
<b>A12 Does Cost Include Shipping:</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>A13 Additional Fees:</b>			
<b>A14 Additional Fee Types:</b>	<input type="checkbox"/> Gaylord Boxes <input type="checkbox"/> Battery Removal <input type="checkbox"/> Shrink Wrap <input type="checkbox"/> Toner Cartridges <input type="checkbox"/> On-Site Labor	<input type="checkbox"/> Reporting <input type="checkbox"/> Information <input type="checkbox"/> Destruction Management <input type="checkbox"/> Trailer Rental	

## Cell Phone Collection Recycling Information

(Page 1 of 1)

<b>R1 PROGRAM/PILOT NAME:</b>					
<b>R2 COLLECTION LOCATION NAME:</b>					
<b>R3 COLLECTION START DATE:</b>			<b>R4 END DATE:</b>		
<b>Recycler Information</b>					
<b>R5 Recycler Name:</b>					
<b>R6 City:</b>		<b>State:</b>	<b>Zip:</b>		
<b>R7 Recycler Point of Contact</b>					
<b>First Name:</b>			<b>Last Name:</b>		
<b>Email:</b>					
<b>Address:</b>					
<b>City:</b>		<b>State:</b>	<b>Zip:</b>		
<b>Country:</b>					
<b>Phone:</b>			<b>Extension:</b>		
<b>Material Handling</b>					
<b>R8 Total Units Reused:</b>					
<b>R9 Total Pounds Recycled:</b>					
<b>R10 Total Pounds Disposed:</b>					
<b>R11 Total Pounds Processed for Waste-to-Energy:</b>					
<b>R12 Brokering:</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>R13 Recycling Processes Employed:</b>		<input type="checkbox"/> Automated Shredding with Material Separation <input type="checkbox"/> Automated Shredding without Material Separation <input type="checkbox"/> Manual Demanufacturing			

## Cell Phone Collection Transporter Information

(Page 1 of 1)

<b>Cell Phone Collection Transporter Information</b>					
(Page 1 of 1)					
<b>T1 PROGRAM/PILOT NAME:</b>					
<b>T2 COLLECTION LOCATION NAME:</b>					
<b>T3 COLLECTION START DATE:</b>				<b>T4 END DATE:</b>	
<b>T5 Transporter Name:</b>					
<b>T6 City:</b>				<b>State:</b>	<b>Zip:</b>
<b>T7 Transporter Point of Contact</b>					
<b>Point of Contact:</b>				<b>Last Name:</b>	
<b>Email:</b>					
<b>Address:</b>					
<b>City:</b>				<b>State:</b>	<b>Zip:</b>
<b>Country:</b>					
<b>Phone:</b>				<b>Extension:</b>	
<b>Bulk Transport Costs</b>					
<b>T8 Total Shipping Cost:</b>					
<b>T9 Number of Trips:</b>					
<b>T10 Average Load Per Trip:</b>					
<b>T11 Number of Miles Shipped:</b>					

## Cell Phone Collection Program Partner Information

(Page 1 of 1)

<b>Cell Phone Collection Program Partner Information</b>					
(Page 1 of 1)					
<b>P1 PROGRAM/PILOT NAME:</b>					
<b>P2 COLLECTION LOCATION NAME:</b>					
<b>P3 COLLECTION START DATE:</b>			<b>P4 END DATE:</b>		
<b>Partner Information</b>					
<b>P5 Partner Name:</b>					
<b>P6 City:</b>			<b>State:</b>		<b>Zip:</b>
<b>P7 Partner Organization Role for this Program:</b>	<input type="checkbox"/> Coalition	<input type="checkbox"/> Local/County Government			
	<input type="checkbox"/> Non-Profit	<input type="checkbox"/> Retailer			
	<input type="checkbox"/> State Government	<input type="checkbox"/> Manufacturer			
	<input type="checkbox"/> Federal Government	<input type="checkbox"/> School			
	<input type="checkbox"/> Recycler	<input type="checkbox"/> Transporter			
	<input type="checkbox"/> Regional Authority				
	<b>P8 Partner Point of Contact</b>				
<b>First Name:</b>			<b>Last Name:</b>		
<b>Email:</b>					
<b>Address:</b>					
<b>City:</b>			<b>State:</b>		<b>Zip:</b>
<b>Country:</b>					
<b>Phone + Extension:</b>					
<b>Partner Contribution</b>					
<b>P9 Contribution Type (select all that apply):</b>	<input type="checkbox"/> Financial/Monetary				
	<input type="checkbox"/> In-Kind (specify below):				
	<input type="checkbox"/> Advertising				
	<input type="checkbox"/> Equipment				
	<input type="checkbox"/> Labor				
	<input type="checkbox"/> Space				
	<input type="checkbox"/> Transportation				
<input type="checkbox"/> Other					
<b>P10 Contribution Amount:</b>					

## Instructions for Cell Phone Data Collection Forms

Below are general instructions for filling out the Centralized Data Repository forms. You will also find definitions for each data element included on the forms. Each data element is identified by a unique label consisting of a letter, which indicates the particular form the data element is found on, and a number. Where applicable, data elements were grouped together and not labeled separately (e.g. Collection Location Point of Contact has one label (P5) which includes name, address, phone and email).

<b>PROGRAM/PILOT NAME:</b>			
<b>COLLECTION LOCATION NAME:</b>			
<b>COLLECTION START DATE (m/d/yyyy):</b>		<b>END DATE:</b>	

Above is pictured the header information that you will see at the top of each form (except the Program Sponsor Information form). The data elements in this header should contain the same information on each and every form. This is simply to identify which program and data reporting period each form belongs to. If you would like to report data and the Program Sponsor Information form and a Collection Location Information form have already been completed, then the Collection Activity form is all you need to fill out along with Transporter and Recycler Information.

<p><b>Program Sponsor Information</b></p> <p>Program Pilot Start Date: <b>1/1/2004</b></p> <p>Program Pilot End Date: <b>12/31/2004</b></p>
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Fill out one **Program Sponsor Information** form for each Program. Indicate the start and end date for the program. If you do not know when the program will end, enter an end date that you think is reasonable for your program.

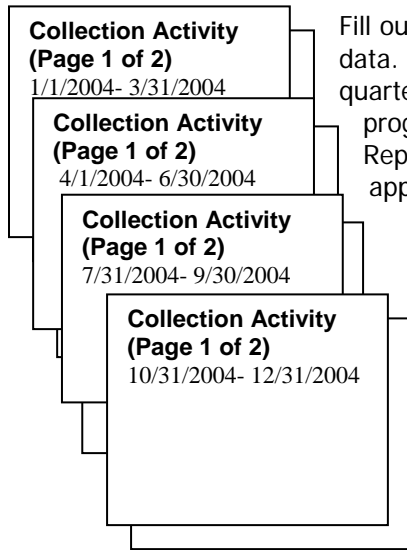
<p><b>Program Data</b></p> <p>Reporting Period Start Date: <b>1/1/2004</b></p> <p>Reporting Period End Date: <b>12/31/2004</b></p>
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The **Program Data** form is used to report data about the program on a periodic basis. For example, the program may be a three-year effort but you may want to report program costs, etc. on a yearly basis.

<p><b>Collection Location Information</b> <b>Page 1</b></p> <p><b>Collection Location Name</b></p>
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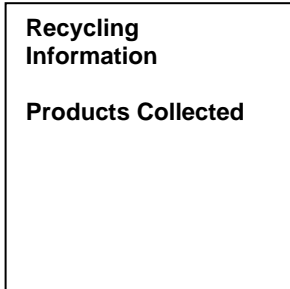
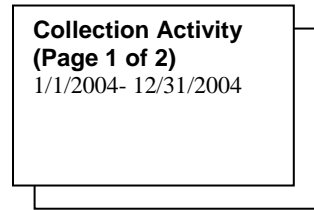
Fill out one **Collection Location Information** form for each Collection Location.

# Instructions for Data Collection Forms



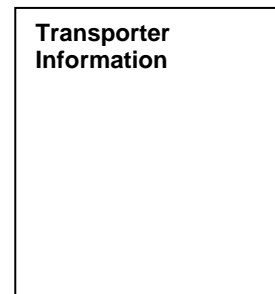
Fill out Page 1 and 2 of the **Collection Activity** form each time you report data. For example, if you have a one-year program and you report data quarterly, you will have 4 sets of Collection Activity forms by the end of the program. On each Collection Activity form, make sure you include the Reporting Period Start and End Date in Box A5 and A6. These dates will appear at the top of each and every form.

If you choose to report data only one time – at the end of the program – the Reporting Period Start Date (A5) and Reporting Period End Date (A6) will be the same as the Program Start and End Date (P11 and P12).



Fill out one **Recycling Information** form for each recycler. The Products Collected section of the Recycling Information form refers to the products collected and sent to this recycler during the reporting period.

Fill out one **Transporter Information** form for each transporter who participated during the Reporting Period (A5 – A6). If transporter costs are included in the recycler fee (A20), do not report any Total Shipping Costs on the Transporter Information form (T8).



Fill out one **Partner Information** form for each Partner. Indicate the role the partner is serving for this program (P7).

## Data Element Definitions

Program Sponsor Information – Form Instructions		
No.	Data Element Name	Data Element Definition
<b>P1</b>	Program Sponsor Name	Name of program or pilot sponsor – the name of a government unit, coalition, company, non-profit, or other institution managing the program or pilot
<b>P2</b>	Program Sponsor City	Program Sponsor Organization's City
<b>P3</b>	Program Sponsor State	Program Sponsor Organization's State
<b>P4</b>	Program Sponsor Zip	Program Sponsor Organization's Zip
<b>P5</b>	Sponsor Organization Type	Sponsor's organization type. Valid values include Retailer, Manufacturer, Local/County Government, State Government, Federal Government, Recycler, Coalition, Non-Profit or School
<b>P6</b>	Sponsor POC First Name	First name of program point of contact
	Sponsor POC Last Name	Last name of program point of contact
	Sponsor POC Email	Email address for the program point of contact
	Mailing Address	The exact address where a mail piece is intended to be delivered, including urban-style street address, rural route, and PO Box.
	Mailing Address City Name	The name of the city, town, or village where the mail is delivered.
	Mailing Address State Code	The alphabetic code that represents the name of a principal administrative subdivision of the United States.
	Mailing Address Zip Code	The combination of the five-digit Zone Improvement Plan (ZIP) code and the four-digit extension code (if available) that represents the geographic segment that is a subunit of the ZIP code, assigned by the U.S. Postal Service to a geographic location to facilitate mail delivery; or the postal zone specific to the country, other than the U.S., where the mail is delivered.
	Telephone Number	The number that identifies a particular telephone connection.
	Telephone Extension Number	The number assigned within an organization to an individual telephone that extends the external telephone number.
<b>P7</b>	Program/Pilot Start Date	The start date for the overall program and not any particular collection activity.
<b>P8</b>	Program/Pilot End Date	The end date for the overall program and not any particular collection activity.

**Program/Pilot Data – Form Instructions**

No.	Data Element Name	Data Element Definition
<b>PD1</b>	Reporting Period Start Date	Calendar date for starting of a program/pilot reporting period.
<b>PD2</b>	Reporting Period End Date	Calendar date for ending of a program/pilot reporting period.
<b>PD3</b>	Financing	How is the program financed: grants, government funds, manufacturer, retailer, point of purchase, or end-of-life fee. Select all that apply.
<b>PD4</b>	Promotional Technique	Technique used to promote a recycling program/pilot. Valid values include flier, brochure, TV, radio, movie theater, newspaper, internet, government newsletter, recycler bill, other print, and other. Select all that apply.
<b>PD5</b>	Total Promotional Cost	The total cost of promoting a program/pilot.
<b>PD6</b>	Program Set Up Cost	One-time cost that applies to ongoing programs/pilots and one-time events. This number does not include staffing costs, promotional costs, or any other costs already reported on these data collection forms.
<b>PD7</b>	Other Recurring Program Cost	Dollar value of total other recurring program/pilot cost.
<b>PD8</b>	Other Recurring Program Cost Type	The type of recurring program cost noted in P13 – Other Recurring Program Cost.
<b>PD9</b>	Regulatory or Legislative Context	Regulatory or legislative context in which the pilot/program is being implemented. Valid values include “Disposal Ban in Place”, “Advance Recycling Fee Mandated”, “Mandated Producer Responsibility”.
<b>PD10</b>	Unique Program/Pilot Features	Description of unique attributes of a program/pilot which sets it apart from others.

**Collection Location Information – Form Instructions**

No.	Data Element Name	Data Element Definition
<b>C1-4</b>	<b>Items 1 - 4 make up the page header and should be the same on every form.</b>	
<b>C1</b>	Program/Pilot Name	Name of the program or pilot.
<b>C2</b>	Collection Location Name	Name of the drop off location. For curbside note geographic area - curbside (e.g., Hennepin County – curbside)
<b>C3</b>	Collection Start Date	Calendar date for starting of a program/pilot reporting period. (The first day for which data is being reported for this collection activity.)
<b>C4</b>	Collection End Date	Calendar date for ending of a program/pilot reporting period. (The last day for which data is being reported for this collection activity.)
<b>C5</b>	Collection Location POC First Name	Collection Location point of contact's first name.
	Collection Location POC Last Name	Collection Location point of contact's last name.
	Collection Location Email	Collection Location point of contact's email address.
	Mailing Address	The exact address where a mail piece is intended to be delivered, including urban-style street address, rural route, and PO Box.
	Mailing Address City Name	The name of the city, town, or village where the mail is delivered.
	Mailing Address State Code	The alphabetic code that represents the name of a principal administrative subdivision of the United States, Canada, or Mexico.
	Mailing Address Country Code	The alphabetic code that represents the name of a country where mail is delivered to an individual or organization.
	Mailing Address Zip Code	The combination of the five-digit Zone Improvement Plan (ZIP) code and the four-digit extension code (if available) that represents the geographic segment that is a subunit of the ZIP code, assigned by the U.S. Postal Service to a geographic location to facilitate mail delivery; or the postal zone specific to the country, other than the U.S., where the mail is delivered.
<b>C6</b>	Collection Location Name	Name of the business, transfer station or other area where collection is taking place.
<b>C7</b>	Collection Location Street Address	Street address where the collection takes place.
	Collection Location City	City in which the collection is taking place
	Collection Location State	State in which the collection is taking place.
	Collection Location Zip Code	Zip Code for the collection location.
<b>C8</b>	Frequency	The frequency of the collection activity (e.g., one-time event; ongoing, limited duration, ongoing, indefinite duration)
<b>C9</b>	Consolidation Point	Is this collection location exclusively or also a consolidation point? A consolidation point is a location where collected items are brought from various collection locations to be shipped to a recycler, another consolidation point, or other location.
<b>C10</b>	Days and Hours of Operation	Days of the week and hours of the day when collection is taking place at this collection location.

**Collection Location Information – Form Instructions**

<b>No.</b>	<b>Data Element Name</b>	<b>Data Element Definition</b>
<b>C11</b>	Access to Service	Description of who is invited to take advantage of this service (e.g. residents of X jurisdiction, open to all, only open to businesses, etc).
<b>C12</b>	Political Jurisdiction	Political Jurisdiction served by this program/activity (Municipality, County/Parish or State).

**Collection Activity – Form Instructions**

No.	Data Element Name	Data Element Definition
<b>A1-4</b>	<b>Items 1 - 4 make up the page header and should be the same on every form.</b>	
<b>A1</b>	Program/Pilot Name	Name of the program or pilot.
<b>A2</b>	Collection Location Name	Name of the drop off location. For curbside note geographic area - curbside (e.g., Hennepin County – curbside)
<b>A3</b>	Collection Start Date	Calendar date for starting of a program/pilot reporting period. (The first day for which data is being reported for this collection activity.)
<b>A4</b>	Collection End Date	Calendar date for ending of a program/pilot reporting period. (The last day for which data is being reported for this collection activity.)
<b>A5</b>	Reporting Period Start Date	Calendar date for starting of a program/pilot reporting period.
<b>A6</b>	Reporting Period End Date	Calendar date for ending of a program/pilot reporting period.
<b>A7</b>	Backhauling	A yes or no indicating whether backhauling (using empty product delivery truck to take recyclable electronics to the consolidation point and/or Collection Location) is used from this collection location.
<b>A8</b>	Actual Units	The number of units of each product type collected as actually counted.
<b>A9</b>	User Fees	Dollar amount charged to the consumer for each product type dropped off.
<b>A10</b>	Recycling Contractor Fee Per Unit of Material	Recycler's fee per unit of material. This is a flat fee applied to all product types collected.
<b>A11</b>	Total Units Collected	Enter total units collected at this collection location. These boxes can be used to record total pounds or units collected even if no product detail was given. (i.e. C23 and C24)
<b>A12</b>	Recycling Contractor Cost Include Shipping?	A yes or no indication of whether the recycler's stated cost includes shipping or not.
<b>A13</b>	Additional Fees	Additional fees to the recycler.
<b>A14</b>	Additional Fee Types	Additional fee types include gaylord boxes, battery removal, shrink wrap, toner cartridges, on-site labor, reporting, information destruction/management and trailer rental.

**Recycling Information – Form Instructions**

No.	Data Element Name	Data Element Definition
<b>R1-4</b>	<b>Items 1 - 4 make up the page header and should be the same on every form.</b>	
<b>R1</b>	Program/Pilot Name	Name of the program or pilot.
<b>R2</b>	Collection Location Name	Name of the drop off location. For curbside note geographic area - curbside (e.g., Hennepin County – curbside)
<b>R3</b>	Collection Start Date	Calendar date for starting of a program/pilot reporting period. (The first day for which data is being reported for this collection activity.)
<b>R4</b>	Collection End Date	Calendar date for ending of a program/pilot reporting period. (The last day for which data is being reported for this collection activity.)
<b>R5</b>	Recycler Organization Name	Recycling company name.
<b>R6</b>	Recycler Organization's City, State, Zip	Recycler Organization's address, including city state and zip where recycler organization is located and material will be processed if different than mailing address
<b>R7</b>	Recycler POC First Name	Recycler point of contact's first name.
	Recycler POC Last Name	Recycler point of contact's last name.
	Recycler Email	Recycler point of contact's email address.
	Mailing Address	The exact address where a mail piece is intended to be delivered, including urban-style street address, rural route, and PO Box.
	Mailing Address City Name	The name of the city, town, or village where the mail is delivered.
	Mailing Address State Code	The alphabetic code that represents the name of a principal administrative subdivision of the United States, Canada, or Mexico.
	Mailing Address Country Code	The alphabetic code that represents the name of a country where mail is delivered to an individual or organization.
	Mailing Address Zip Code	The combination of the five-digit Zone Improvement Plan (ZIP) code and the four-digit extension code (if available) that represents the geographic segment that is a subunit of the ZIP code, assigned by the U.S. Postal Service to a geographic location to facilitate mail delivery; or the postal zone specific to the country, other than the U.S., where the mail is delivered.
	Telephone Number	The number that identifies a particular telephone connection.
Telephone Extension Number	The number assigned within an organization to an individual telephone that extends the external telephone number.	
<b>R8</b>	Total Units Reused	Total units of products reused as original product use intended.
<b>R9</b>	Total Pounds Recycled	Pounds of product collected destined for recycling.
<b>R10</b>	Total Pounds Disposed	Pounds of product collected destined for disposal.
<b>R11</b>	Total Pounds Processed for Waste-to-Energy	Pounds of product collected destined for waste to energy.
<b>R12</b>	Brokering	A yes or no indicating that some or all collected material is being brokered (i.e. sent to a third party without any processing).

**Recycling Information – Form Instructions**

<b>No.</b>	<b>Data Element Name</b>	<b>Data Element Definition</b>
<b>R13</b>	Recycling Processes Employed	Process employed by the recycler. Valid values include manual demanufacturing, automated shredding with material separation, automated shredding without material separation. Select all that apply.
<b>R14</b>	Actual Units	Actual, counted units sent to this recycler.
<b>R15</b>	Pounds	Pounds sent to this particular recycler.
<b>R16</b>	Average Weight	The average weight for each product type used to calculate the number units collected as reported to (or by) this recycler.
<b>R17</b>	Calculated Units	The pounds sent to this recycler divided by the average weight.
<b>R18</b>	Fee Per Pound	The fee this recycler charges per pound for a particular product type.
<b>R19</b>	Fee Per Unit	The fee this recycler charges per unit for a particular product type.

**Transporter Information – Form Instructions**

No.	Data Element Name	Data Element Definition
<b>T1-4</b>	<b>Items 1 - 4 make up the page header and should be the same on every form.</b>	
<b>T1</b>	Program/Pilot Name	Name of the program or pilot.
<b>T2</b>	Collection Location Name	Name of the drop off location. For curbside note geographic area - curbside (e.g., Hennepin County – curbside)
<b>T3</b>	Collection Start Date	Calendar date for starting of a program/pilot reporting period. (The first day for which data is being reported for this collection activity.)
<b>T4</b>	Collection End Date	Calendar date for ending of a program/pilot reporting period. (The last day for which data is being reported for this collection activity.)
<b>T5</b>	Transporter Organization Name	Transporter company name.
<b>T6</b>	Transporter Organization City, State, zip	Transporter's address.
<b>T7</b>	Transporter POC First Name	First name of the transporter point of contact.
	Transporter POC Last Name	Last name of the transporter point of contact.
	Transporter POC Email	Email address for the transporter point of contact.
	Mailing Address	The exact address where a mail piece is intended to be delivered, including urban-style street address, rural route, and PO Box.
	Mailing Address City Name	The name of the city, town, or village where the mail is delivered.
	Mailing Address State Code	The alphabetic code that represents the name of a principal administrative subdivision of the United States, Canada, or Mexico.
	Mailing Address Zip Code	The combination of the five-digit Zone Improvement Plan (ZIP) code and the four-digit extension code (if available) that represents the geographic segment that is a subunit of the ZIP code, assigned by the U.S. Postal Service to a geographic location to facilitate mail delivery; or the postal zone specific to the country, other than the U.S., where the mail is delivered.
	Mailing Address Country Code	The alphabetic code that represents the name of a country where mail is delivered to an individual or organization.
	Telephone Number	The number that identifies a particular telephone connection.
	Telephone Extension Number	The number assigned within an organization to an individual telephone that extends the external telephone number.
<b>T8</b>	Total Shipping Cost	Total cost in dollars to ship all material from a collection location.
<b>T9</b>	Number of Trips	Number of trips required to transport all material from a collection location to a recycler.
<b>T10</b>	Average Load Per Trip	Average pounds of material shipped per trip (i.e., per shipment) from a collection location to a recycler.
<b>T11</b>	Number of Miles Shipped	Total number of miles traveled to transport all material from a collection location to a recycler.

**Program Partner Information – Form Instructions**

No.	Data Element Name	Data Element Definition
<b>P1-4</b>	<b>Items 1 - 4 make up the page header and should be the same on every form.</b>	
<b>P1</b>	Program/Pilot Name	Name of the program or pilot.
<b>P2</b>	Collection Location Name	Name of the drop off location. For curbside note geographic area - curbside (e.g., Hennepin County – curbside)
<b>P3</b>	Collection Start Date	Calendar date for starting of a program/pilot reporting period. (The first day for which data is being reported for this collection activity.)
<b>P4</b>	Collection End Date	Calendar date for ending of a program/pilot reporting period. (The last day for which data is being reported for this collection activity.)
<b>P5</b>	Partner Organization Name	Name of company, organization or government agency that is not the sponsor but contributes financially or in-kind to the program/pilot.
<b>P6</b>	Partner Organization City, State, Zip	Partner Organization's City, State, and Zip.
<b>P7</b>	Partner Organization Type	Partner organization type. Valid values include Retailer, Manufacturer, Local/County Government, State Government, Federal Government, Recycler, Coalition, Non-Profit or School
<b>P8</b>	Partner POC First Name	First name of Partner Organization point of contact.
	Partner POC Last Name	Last name of Partner Organization point of contact.
	Partner POC Email	Email address of Partner Organization point of contact.
	Partner Mailing Address	The exact address where a mail piece is intended to be delivered, including urban-style street address, rural route, and PO Box.
	Partner Mailing Address City Name	The name of the city, town, or village where the mail is delivered.
	Partner Mailing Address State Code	The alphabetic code that represents the name of a principal administrative subdivision of the United States, Canada, or Mexico.
	Partner Mailing Address Zip Code	The combination of the five-digit Zone Improvement Plan (ZIP) code and the four-digit extension code (if available) that represents the geographic segment that is a subunit of the ZIP code, assigned by the U.S. Postal Service to a geographic location to facilitate mail delivery; or the postal zone specific to the country, other than the U.S., where the mail is delivered.
	Partner Mailing Address Country Code	The alphabetic code that represents the name of a country where mail is delivered to an individual or organization.
	Partner Telephone Number	The number that identifies a particular telephone connection.
	Partner Telephone Extension Number	The number assigned within an organization to an individual telephone that extends the external telephone number.
<b>P9</b>	Partner Contribution Type	Type of contribution partner has given. Valid values include Financial/Monetary and In-kind. In-kind contributions include advertising, equipment, labor, space, transportation and other. Multiple values are allowed.
<b>P10</b>	Partner Contribution Amount	Total dollar value of partner's contribution.