



TOWN OF ISLIP
 401 Main St., Islip, NY 11751

Department of Environmental Control

2024 SOLID WASTE & RECYCLABLES SERVICES PERMIT
(Includes C&D and Municipally Contracted Services)
FILING INFORMATION

Fees for 2024 Permits*:

Must be submitted in the form of check or money order payable to Town of Islip.

Separate check or money order: Application Processing Fee - \$250.00

**Separate check or money order
 for combined permit fees:**

- **Permit Fee including First Truck - \$750.00**
 - **Each Additional Truck - \$250.00**
 - **Container Permit Decal - \$ 10.00**
- (All containers/roll off used in the Town)**

**If applicable, separate check or
 money order:**

**Applications remaining incomplete/late after the below
 dates are subject to the following fees:**

- **After January 15, 2024: \$100.00**
- **After February 1, 2024: \$200.00**

- 1) Completed applications should be typed or printed and **MUST** be submitted for review by **November 6, 2023**.
- 2) Applicants must attest that all services will be compliant with Chapter 21 of the Islip Town Code, including but not limited to those listed on page 6. NOTE: Chapter 21 was modified in November 2020.
- 3) For each vehicle submitted: **copies of current registration; insurance card; Board of Health Certificate for applicable vehicles (e.g., front or rear loaders, compactors) is required.**
- 4) Provide current proof of **Workers' Compensation and Disability Insurance, OR NYS Affidavit CE 200** – Completed and **SIGNED** – waiving company requirement to provide coverage under these Laws. (Form can be found on www.wcb.ny.gov)
- 5) **Customer List Requirements** – See CHECK LIST for information and required specifics FOR EACH CUSTOMER. Incomplete customer lists and modifications not submitted within 30 days shall be considered in violation of Chapter 21-9(B)(8) and subject to a \$100 to \$500.00 fine.
- 6) **If setting up a billing account** - Applicant must submit a Surety Bond (MUST use attached Bond Form with Corporate and Surety Seals affixed and Notarized Acknowledgement) or Certified Check payable to Town of Islip. Surety amount is determined by the Commissioner and subject to change, call the DEC office at (631)224-5645 prior to submission of application. Any permittee who fails to pay a tip fee invoice prior to the issuance of a subsequent invoice twice in a twelve month period or whose outstanding balance exceeds the Surety Bond/Certified Check amount, shall be denied entrance to Town facilities, and is subject to suspension or revocation of said permit.

*Fees subject to change.

APPLICANT CHECKLIST FOR SOLID WASTE SERVICES PERMIT
IF A QUESTION DOES NOT APPLY, ANSWER WITH N/A.

BE SURE YOU HAVE INCLUDED ALL OF THE FOLLOWING:

- One original **completed** application, pages 1-7 (with pages 6 & 7 notarized) submitted by November 6, 2023. **Commercial account service providers** must also complete and submit the required documents for pages 8-11 (pages 8 & 9 submitted no later than 45 days after Permit approval). **Billing account applicants** must submit the attached Bond Form (pages 12 & 13) with notarized acknowledgement and corporate and surety seals affixed, **or** certified check payable to Town of Islip.

- Current Motor Vehicle Registration and Insurance card for each permitted vehicle.

- Current Year Board of Health Certificate listing **EACH** permitted vehicle for which a certificate is required (e.g. front or rear loaders, compactors).

- Notarized Fee Responsibility Letter (see example on page 14) – Required if motor vehicle registration is in a name other than applicant company, stating that applicant company is responsible for any tipping fees incurred by truck owner (name as stated on motor vehicle registration).

- Certificate showing Proof of Worker’s Comp. AND Disability Coverage **OR** NYS Affidavit CE 200 completed and **SIGNED** – waiving requirement. The form can be found online at www.wcb.ny.gov, choose “FORM CE200”. Then choose – Request “WC/DB Exemption Form CE 200” – follow instructions.

- CUSTOMER LIST REQUIREMENT** – A Customer List must be provided by the applicant for all customers in Islip receiving regular commercial municipal solid waste collection service from the applicant. (Information regarding customers receiving intermittent or temporary service for collection of construction and demolition debris, or customers served through contracts with the Town’s special garbage and refuse districts **need not be provided**). **All data must be provided in electronic format** (comma delimited ASCII file – CSV or Microsoft Excel compatible) and separated as shown. File can be emailed to cwilson@islipny.gov. **PLEASE SEE CUSTOMER LIST SAMPLE on page 11**. A notarized letter on company letterhead attesting to current customer list for all Islip customers receiving routine commercial solid waste and recyclables collection services from the applicant must be submitted with the application. **PLEASE SEE CUSTOMER LIST SAMPLE LETTER on page 10**.

Signature _____

Date _____

Completed applications with required documents and payment may be brought to the DEC administration office (room 302), mailed, or placed in a sealed envelope and left in the **DEC Drop Box** located in the lobby of Town Hall West:

TOWN HALL WEST
DEPARTMENT OF ENVIRONMENTAL CONTROL
401 MAIN STREET
ISLIP, NY 11751



TOWN OF ISLIP
401 Main St., Islip, NY 11751

Department of Environmental Control

2024 APPLICATION FOR SOLID WASTE AND RECYCLABLES SERVICES PERMIT
THIS INCLUDES CONSTRUCTION & DEMOLITION DEBRIS

The issuance of a permit shall bind the applicant to comply with all conditions, rules and regulations of Chapter 21, Solid Waste of the Code of the Town of Islip as in effect during the period covered by said permit. The applicant company further acknowledges the right of the Commissioner of Environmental Control to enforce the provisions of said Code and Section 2046-t (3) of the Public Authorities Law, and understands that compliance with same is a condition of the said permit.

COMPANY NAME (Applicant): _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

STREET ADDRESS: _____

(If different from Mailing Address)

CITY _____ **STATE** _____ **ZIP** _____

CONTACT PERSON: _____ **TITLE:** _____

(full name)

OFFICE PHONE: (____) _____ **HOME PHONE:**(____) _____

FAX: (____) _____ **CELL PHONE:** (____) _____

E-MAIL ADDRESS: _____

GARAGE LOCATION(S): _____

ADDITIONAL CONTAINER STORAGE YARD(S): _____

SERVICES PROVIDED: (Check All That Apply)

TOWN RESIDENTIAL CONTRACTS COMMERCIAL ACCOUNTS C&D RECYCLING MATERIAL

OTHER (briefly explain) _____

LIST MUNICIPALITIES WHERE YOUR COMPANY IS LICENSED TO PROVIDE COLLECTION SERVICES:

Has any individual applicant, partnership, officer, director, member or any person holding 5% or more financial interest in said business or corporation, ever been convicted of a crime, or committed any violation of any federal or state environmental law or regulation for which a civil sanction, penalty or judgment was imposed, or is currently charged with the commission of any crime, other than a traffic violation? YES NO If yes, indicate details (date, location, disposition).

Do any individuals associated with the company have unsatisfied default judgements issued by the Town for failure to appear in court? YES NO If yes, all default judgements must be satisfied prior to submission. To do so, please contact Law Enforcement at (631) 224-5375.

List all officers by name and title, and all persons with a financial interest in the company, as follows: If a partnership, corporation, or LLC, list the names of all partners, officers, directors, or managing members as well as all individuals with a 5% interest or more in the applicant. **If a publicly traded corporation or wholly owned subsidiary thereof, submit a copy of the corporation's most recent Annual Report or SEC filing indicating the ownership of the corporation and subsidiary.**

NOTE: If a change of Officer, Director or other Holder of 5% interest occurs during the permit year, this information must be disclosed to the Town of Islip within ten (10) days of the change.

Name and Title of Officer/Owner/Director	SS#	Date of Birth	Home Address	% of Interest Held
1.				
2.				
3.				
4.				

Name and Title of Other Holder of 5% or More Interest	SS#	Date of Birth	Home Address	% of Interest Held
1.				
2.				
3.				
4.				

Is the applicant corporation or partnership wholly or partially owned by another entity?

YES NO

If yes, please list and identify the parent entity and list the officers, directors and/or managers on a separate sheet of paper.

FOR COMMERCIAL CARTERS ONLY
RECYCLING ACTIVITIES ANNUAL REPORT

Pursuant to §21-3 of the Islip Town Code, the Commissioner has designated corrugated cardboard-OCC, newspapers-ONP: glass jars and bottles; plastics- PET HDPE; cans-Fe; Bulk Metals and Aluminum-AL as materials capable of being re-used or recycled pursuant to General Municipal Law §120-aa.

The applicant hereby acknowledges the designation of these materials as recyclable pursuant to Islip Town Code §21-3, and, as a condition of the applicant's authorization to use the alternate disposal Facilities identified above, the applicant hereby represents that i) separate collection service for said recyclables shall be provided on commercially reasonable terms to all **commercial customers** requesting same, and ii) the applicant shall submit, **not later than 45 days after the effective date of this permit**, an Annual Report, setting forth the recycling activities of the applicant in the previous year. The Annual Report shall summarize the amounts of all source-separated recyclables collected by the applicant in the prior year, and the amounts of all recyclables recovered from any facility utilized to recover recyclables that are commingled with other solid wastes. **The Annual Report shall be substantially in the sample form annexed hereto (pages 8 & 9).**

(For Town Use Only)

Special Conditions of Permit

_____Approved

_____Denied

Martin J. Bellew, Commissioner

Company Name: _____

Address: _____

COMPLIANCE LETTER

DATE: _____

Town of Islip
Department of Environmental Control
401 Main Street
Islip, New York 11751

Re: 2024 Solid Waste Services Permit

This is to certify that all services provided in the Town of Islip will be in accordance with the ordinances of Chapter 21, which includes but is not limited to:

INITIAL NEXT TO EACH STATEMENT

_____ ALL PERMITTED VEHICLES AND CONTAINERS WILL BE LABELED WITH COMPANY NAME & TELEPHONE NUMBER. *Violation fine up to \$1,000.00 per offense.*

_____ ALL CONTAINERS PROVIDED TO CUSTOMERS WILL HAVE TOWN-ISSUED CONTAINER PERMIT STICKER AFFIXED TO THE FRONT RIGHT SIDE PRIOR TO SERVICE. *Violation fine up to \$1,000.00 per offense.*

_____ ALL CONTAINERS PROVIDED TO CUSTOMERS WILL BE PLACED ONLY ON A CUSTOMER'S PRIVATE PROPERTY AND NO LESS THAN 4 FEET FROM ADJACENT PROPERTY. CONTAINERS WILL NOT BE PLACED ON PUBLIC ROADWAYS OR SIDEWALKS. *Violation fine up to \$1,000.00 per offense.*

_____ ACCESS TO APPLICANT'S YARD AND/OR OFFICES WITHIN THE TOWN OF ISLIP WILL BE GRANTED TO ANY EMPLOYEE OF ISLIP DEC DURING OPERATING HOURS.

_____ ALL FULL CONTAINERS WILL BE BROUGHT FROM THE COLLECTION LOCATION DIRECTLY TO A WASTE DISPOSAL FACILITY. WASTE OF ANY KIND IS NOT ALLOWED IN COMPANY STORAGE YARD. *Violation fine up to \$5,000.00*

_____ VIOLATIONS OF CHAPTER 21 MAY RESULT IN FINE, CONTAINER IMPOUND(S), AND REVOCATION OF PERMIT.

(Sign) _____

(Print Name) _____

(Title) _____

Sworn to before me on this ____ day of _____, 20____.

NOTARY PUBLIC: _____

STATE OF NEW YORK)

: S.S.

COUNTY OF)

_____, being duly sworn, deposes and says that he/she is the _____ of _____, the applicant herein; that all the information submitted with this application is true; that the applicant agrees to comply with all provisions of Chapter 21 of the Code of the Town of Islip, which regulates the collection and disposal of solid waste and recyclables; that the applicant understands that failure to comply with the rules and regulations of the Town of Islip or any false statements made on any part of this application shall be grounds for denial and/or revocation of this permit.

SIGNATURE

PRINTED NAME

SWORN TO BEFORE ME THIS _____
DAY OF _____, 20____

NOTARY PUBLIC: _____

ACTION BY TOWN CLERK:

(B) Approved:
Permit No. _____ expires: December 31, 20____

(B) Disapproved: _____

COMMERCIAL CARTERS MUST KEEP PAGES 8 AND 9

To be completed and submitted with a notarized customer list certification letter (sample on p.10), and an electronic customer list in Excel format, sample on p.11, and emailed to Cwilson@islipny.gov no later than 45 days after permit approval.

COMPANY NAME: _____

**ANNUAL REPORT ON RECYCLING ACTIVITY
MATERIALS RECOVERED - PRIOR YEAR**

TYPE OF MATERIAL RECOVERED (for Prior Permit Year)	TOTAL TONS FOR YEAR 20_____
Cardboard (OCC)	
Newspapers (ONP)	
Glass Bottles/Jars (Glass)	
Plastic (PET/HDPE)	
Bulk Metals	
Other – (Specify)	

SECTION I (A)-Provide information for recyclables ***collected separately*** from solid waste for the **PRIOR PERMIT YEAR. For each type of solid waste recovered, provide the weight in tons.**

SECTION I (B) As required pursuant to Chapter 21-10(B)(1)(c), please identify the buyers or markets who purchase the separately collected materials listed above.

Materials Extracted

Buyers/Markets

Cardboard

Newspaper

Glass

Metals

Plastic

Other

COMMERCIAL CARTER REQUIREMENTS (cont'd)

SECTION II (A) List all commercial customers for which services are routinely provided and/or hold accounts.

CUSTOMER LIST REQUIREMENT – A Customer List must be provided by the applicant for all customers in Islip receiving regular commercial municipal solid waste collection service from the applicant. (Information regarding customers receiving intermittent or temporary service for collection of construction and demolition debris, or customers served through contracts with the Town’s special garbage and refuse districts **need not be provided**). **All data must be provided in electronic format** (comma delimited ASCII file – CSV or Microsoft Excel compatible) and separated as shown. File can be emailed to cwilson@islipny.gov. **PLEASE SEE CUSTOMER LIST SAMPLE on page 11.** A notarized letter on company letterhead attesting to current customer list for all Islip customers receiving routine commercial solid waste and recyclables collection services from the applicant must be submitted with application. **PLEASE SEE CUSTOMER LIST SAMPLE LETTER on page 10.**

SECTION II (B) As required pursuant to Chapter 21-10(B)(1)(d), please identify the facility and method to be employed to extract the recyclables from the solid waste collected.

Facility Name and Address	NYSDEC Permit	Extraction Method

Please attach additional pages if needed.

COMPANY NAME: _____ DATE: _____

SIGNATURE: _____ PRINT NAME: _____

SAMPLE

CUSTOMER LIST COVER LETTER

TO BE PROVIDED BY COMMERCIAL CARTERS ONLY

Letter should be on Company letterhead, signed and notarized.

Date

Town of Islip
Department of Environmental Control
401 Main Street
Islip, New York 11751

RE: 2024 Solid Waste Services Permit

This is to certify that to the best of my knowledge, the customer list submitted in electronic format, represents the customers that we service within the Town of Islip.

I understand that:

- Modifications throughout the permit year must be supplied to the Town in a revised format of the original submission within 30 days of said change.
- Incomplete customer lists shall be considered in violation of Chapter 21 and subject to a fine up to \$500.

Your Signature
Name
Title

NOTARIZED

COMPANY NAME: _____

FORM COMPLETED BY: _____ PHONE NUMBER: _____
 (Please Print Name)

2024 CUSTOMER LIST – TOWN OF ISLIP

Customer Name	Street Address	Town	Zip	Number, Size & Type Container	Frequency Of Pick-up	# of Units if Condo, Trailer, Apt., etc	Separate Collection Recyclables Y/N	Total Yards Collected	Total Tons Collected
Tom Jones Deli	234 Main St	Islip	11751	5 – 20 yds	1 x wk		N	433	43.3
JFK Kennedy Sch	34 Timber Road	East Islip	11730	2-30 comp	EOW		Y	60	18
Bay View Apts	1645 Burn Ave	Bay Shore	11706	cans	2 x wk	31	N		4
<i>SAMPLE CUSTOMER LIST</i>									
MUST BE SUBMITTED IN ELECTRONIC FORMAT (MICROSOFT EXCEL COMPATIBLE) & EMAILED TO CWILSON@ISLIPNY.GOV									
					TOTAL ANNUAL VOLUME & TONNAGE				

CUSTOMER LIST MUST PROVIDE TOTAL VOLUME AND TONNAGE

(Note: Disclose the requested information for all locations at which you provide service, whether through direct agreement with the owner/occupant, or via a subcontract with a parent organization, broker, or other entity.)

Give actual address, not billing address.

Conversion:

Regular container - yards times 200 lbs - divided by 2,000 for tons.

Compactor container - yards times 600 lbs - divided by 2,000 for tons.

On Call = 1.5 times per month

Condo Units/Town Houses, Trailer Parks – cans = 1.8 tons/year per unit

SURETY BOND FORM

BOND NO. _____

KNOW ALL MEN BY THESE PRESENTS: That we, the undersigned _____ as Principal, and _____, a _____ corporation, having an office at _____, as Surety, are held and firmly bound unto the Town of Islip, 401 Main Street, Islip, New York, 11751, as obligee in the penal sum of _____ (\$ _____) Dollars, lawful money of the United States of America, to be paid to the said Town of Islip for which payment well and truly to be made, we bind ourselves, or heirs, executors, and administrators, successors and assigns jointly and severally firmly by these presents.

SIGNED, sealed and dated this _____ day of _____

WHEREAS, the above Principal has been or is about to be granted permission to maintain a monthly account with the Town of Islip in the payment of fees for use of Town solid waste disposal facilities, which permission is to be granted conditioned that the Principal should furnish and file with the Town of Islip a bond in the sum of _____ (\$ _____) Dollars for the payment of all fees assessed by the Town of Islip in consideration for the Principal's use of such place or places designated as disposal sites within the Town of Islip, (and as financial security pursuant to Chapter 21 - 10(B)(1)(a)(5) for the period January 1, _____ to December 31, _____ inclusive.

NOW, THEREFORE, the condition of this obligation is such that if the Principal shall well and truly make due and timely payment to the Town of Islip the amount of assessed fees as promulgated by the Town of Islip for use of such place or places designated as disposal sites, then this obligation shall be null and void, otherwise to remain in full force and effect. In order to be considered timely, payment must be made within thirty (30) days of the billing date.

*Affix
Corporate Seal*

BY _____
(PRINCIPAL)

*Affix
Surety Seal*

BY _____
(SURETY)

INDIVIDUAL ACKNOWLEDGMENT

State of _____ } ss.
County of _____

On this _____ day of _____, 20____, before me personally came _____ to me known, and known to me to be the individual described in and who executed the foregoing instrument, and acknowledged to me that he executed the same.

My commission expires _____

Notary Public

FIRM ACKNOWLEDGMENT

State of _____ } ss.
County of _____

On this _____ day of _____, 20____, before me personally came _____ to me known, and known to me to be a member of the firm of _____ described in and who executed the foregoing instrument, and he thereupon acknowledged to me that he executed the same as and for the act and deed of said firm.

My commission expires _____

Notary Public

CORPORATION ACKNOWLEDGMENT

State of _____ } ss.
County of _____

On this _____ day of _____, 20____, before me personally came _____ to me known, who being by me duly sworn, did depose and say that he is the _____ of _____ the corporation described in and which executed the above instrument; that he knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation, and that he signed his name thereto by like order.

My commission expires _____

Notary Public

SURETY ACKNOWLEDGMENT

State of _____ } ss.
County of _____

On this _____ day of _____, 20____, before me personally came _____ to me known, who, being by me duly sworn, did depose and say that he is an attorney-in-fact of _____ the corporation described in and which executed the within instrument; that he knows the corporate seal of said corporation; that the seal affixed to the within instrument is such corporate seal, and that he signed said instrument and affixed the said seal as Attorney-in-Fact by authority of the Board of Directors of said corporation and by authority of this office under the Standing Resolutions thereof.

My commission expires _____

Notary Public

SAMPLE

FEE RESPONSIBILITY LETTER

This letter should be submitted when an applicant is permitting trucks registered in a name other than that of the Company Applicant.

Letter should be on Company letterhead, signed and notarized.

Date

Town of Islip
Department of Environmental Control
401 Main Street
Islip, New York 11751

RE: 2024 Solid Waste Services Permit

This is to certify that _____ (your company name) _____ will be responsible for all tipping fees incurred by the following trucks registered to _____ (truck registrant's name) _____:

Year and Make of Truck

License Plate No.

Your Signature
Name
Title

NOTARIZED

PLEASE KEEP COPIES OF THIS FORM

2024 VEHICLE LIST MODIFICATION FORM

USE TO ADD OR DELETE TRUCKS FROM YOUR PERMIT THROUGHOUT THE YEAR

DATE SUBMITTED: _____

NAME OF COMPANY: _____ CLIENT #: _____

TELEPHONE NUMBER: _____

LIST VEHICLES TO BE ADDED

Year	Body Type	Make & Model	License Plate #	Vehicle I.D. #	2024 ISLIP DECAL #

VEHICLES TO BE REMOVED

Year	Body Type	Make & Model	License Plate #	Vehicle I.D. #	2024 ISLIP DECAL #

FEES:

ADD'L. TRUCKS – (number of additional trucks) _____ @ \$250 each \$ _____

FEE ATTACHED \$ _____

THERE IS NO CHARGE TO REMOVE OR SUBSTITUTE A VEHICLE

Signature

Date

You must provide a current registration and insurance card for each truck addition or change. A new responsibility letter for tip fees, on Company letterhead signed and notarized, must also be submitted if added trucks are registered in a name other than permitted company.