



Participant name _____

Street address _____

City _____ Zip _____

Telephone: (_____) _____ No. of households represented: _____

Do you have any:

Sharps

Medical waste

(we cannot accept controlled substances)

Declaration of origin:

I hereby certify that the following waste was generated in Alameda County, through household use:

Signature: _____ Date: _____

Packaging Instructions

- No individual item or container may be greater than 5 gallons or 50 pounds in size.
- All materials must be packaged in sturdy, non-leaking, closed containers. If you have a leaking container, place it in a larger container (such as a plastic bucket available from paint stores); include the original label or a note with as much information as possible about the material and its ingredients.
- Do not mix different wastes in the same container
- Place the materials upright in your vehicle; for safety, we recommend placing materials in boxes in your vehicle's trunk. Pack the materials so they will not slide, tip over, spill or break during transport

Limits

- State Regulations limit the amount of waste you may transport to 15 gallons" of liquid waste, or 125 lbs solid waste. Individual items/containers must be no larger than 5 gallons or weigh no more than 50 lbs.

* 15 gallons refers to the actual contents of the containers, not the container size.

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SHADED AREA FOR STAFF USE ONLY

Min S M L XL XXL E-Waste

Received by: _____ ID checked Sharps Med Waste

Date: _____ Time: _____ Hay Oak Liv

**Please help us understand our customers better
by answering the following questions:**

Do you have any comments or suggestions to improve our service?

How did you hear about the program? (Check all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> Been here before | <input type="checkbox"/> Friend or neighbor |
| <input type="checkbox"/> Website: stopwaste.org/hhw | <input type="checkbox"/> Google search |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> Postcard in the mail |
| <input type="checkbox"/> Website other _____ | <input type="checkbox"/> Flyer or postcard at event |
| <input type="checkbox"/> Recycling Hotline | <input type="checkbox"/> Phone book/yellow page listing |
| <input type="checkbox"/> Garbage company/transfer station/landfill referral | <input type="checkbox"/> City newsletter |
| <input type="checkbox"/> Other _____ | |

What do you think is the best way to reach your neighbors with the information about the program?
