

# Operational Plan

## Pilot Project Recycler

**Organization Name:** \_\_\_\_\_  
**Contact Person Name:** \_\_\_\_\_  
**Contact Person Phone:** \_\_\_\_\_  
**Contact Person Email:** \_\_\_\_\_

### Type

Pilot Project Recycler Type (check all that apply):

- Mobile Unit
  - Truck
  - Pick Up Service
  - Other Mobile Unit: (brief description): \_\_\_\_\_  
\_\_\_\_\_
  
- Stationary Location
  - Drop Service
  - Buyback, including staffed and stationary reverse vending machines
  - Other Stationary Location (brief description): \_\_\_\_\_  
\_\_\_\_\_
  
- Other (brief description): \_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

### Program Overview

Provide an overview of how your proposed business will operate the pilot project recycler.

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## Operational Details

Please describe (use additional pages as necessary) how the pilot project recycler will:

1. Inspect beverage containers and prevent payment for ineligible material.

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2. Segregate rejected, line breakage, previously baled, and out-of-state materials.

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3. Collect and store beverage containers, including odd-sized containers.

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4. Ensure that material is only redeemed within pilot jurisdiction.

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5. Ensure consumers do not exceed the consumer volume limits for redemption.

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6. Handle customers' complaints, for example, CRV non-payment or underpayment concerns.

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**Complete the Following Only If Applicable to Your Pilot Project Recycler:**

7. Identify each customer's material when the customer is not present at the time of redemption, inspection, or weighing.

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8. Handle loose materials, for example due to accidental bag breaks.

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9. Handle ineligible material when the customer is not present at the time of inspection (this includes whether the pilot project recycler will pay scrap value for the material and how the recycler will notify the consumer of the ineligible materials).

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### Staffing

10. Provide the names, titles, and roles of all responsible or managing employees.  
(Attach additional pages as necessary)

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11. Identify the estimated total number of staff involved in the pilot project recycler. \_\_\_\_\_

12. Describe the staffing for the pilot project recycler (for example, will the pilot project recycler be staffed or unstaffed, will the driver of the truck also serve as attendant, will there be off-site staff customers can contact if concerns arise at unstaffed locations, etc.).

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### **Mobile Unit Pilot Project Recyclers Only:**

13. **Driver Information**

\_\_\_\_\_  
Driver's Name (First, Last)

\_\_\_\_\_  
Driver License Number (*Attach a copy*)

( ) \_\_\_\_\_

Cell Phone

\_\_\_\_\_  
E-mail Address

14. **Vehicle Information**

\_\_\_\_\_  
Registered Owner's Name (First, Last)

\_\_\_\_\_  
License Plate Number

\_\_\_\_\_  
Make

\_\_\_\_\_  
Model

\_\_\_\_\_  
Year

***NOTE:*** *If you have multiple vehicles and/or drivers for a single route, you must include additional sheet(s) with the vehicle information (if available) and/or driver information.*

**Technology**

15. List the electronic methods used to communicate with customers, including websites or smartphone applications. If using smartphone applications, include the names of the platforms used and distribution methods for the application.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Payments and Fees**

16. Describe your method of payment. For all non-cash forms of payment, provide a detailed description, including the method(s) and timeframe from receipt of material to issuing of payment.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Complete the Following Only If Applicable to Your Pilot Project Recycler:**

17. Provide the cost of bags, boxes, or other receptacles consumers will be required to use for redemption (e.g., both the cost to the recycler and any cost to the consumer).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18. Provide the transaction fee cost, if applicable, consumers will be required to pay. Include how the pilot project recycler will charge consumers the fee.

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\_\_\_\_\_  
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