



**RECYCLING SUPPLEMENT**  
(Include Acord application)

Applicant's Name \_\_\_\_\_ Location Address: \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Is applicant properly licensed where required by law?  Yes  No License Number \_\_\_\_\_  
Number of active owners/officers/partners: \_\_\_\_\_ Number of Employees \_\_\_\_\_  
Estimated annual: Payroll (excl. owner) \_\_\_\_\_ Receipts \_\_\_\_\_ Subs Costs \_\_\_\_\_

List percentage of operations under the following					
Aluminum	%	Oil Collections	%	Chemicals	%
Batteries	%	Paper/Newspaper	%	Glass	%
Cardboard/Chipboard	%	Plastics	%	Hazardous Materials	%
Styrofoam	%	Scrap Metal/Wire	%	Tires	%

Please detail all "yes" answers to the following questions below.

- Any guard dogs on premises?  Yes  No Is premises fully fenced?  Yes  No
- Are there fire safety precautions in place?  Yes  No
- Does applicant own or operate a landfill or dump?  Yes  No
- Does applicant use any process other than bailing, crushing, or shredding?  Yes  No
- Does applicant have a smelting or foundry exposure?  Yes  No
- Does applicant haul refuse or garbage for others?  Yes  No
- Does applicant provide receptacles for collection of materials?  Yes  No
- Does applicant engage in any salvage operations?  Yes  No
- Does applicant store any LPG, chemicals, or other flammable liquids on premises?  Yes  No
- Any security/watchman on duty?  Yes  No

If yes, please indicate how many: \_\_\_\_\_ Employed \_\_\_\_\_ Subcontracted \_\_\_\_\_ Armed \_\_\_\_\_ Unarmed  
How does applicant dispose of acids, chemicals, or hazardous materials? \_\_\_\_\_

EPA approved site?  Yes  No

Details:

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

**Attach a copy of the applicant's contract and last Workers Compensation audit.**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Producer's Signature

\_\_\_\_\_  
Date