

**WV Department of Environmental Protection
Recycling Assistance Grant**

Grantee Name _____

2022 Final Comprehensive Report

Recycling Assistance Grant Comprehensive Report Check-off List

The Comprehensive Report must include the following:

- Comprehensive Report Cover Sheet (Page 1)
- Costs and Analysis Sheet (Page 2)
- Waste Diversion and Continuing Operations (Page 3)
- Expenditure Sheets for Entire Grant Period (RG-3B) (Jan 1, 2022 - Feb 28, 2023)
- Individual Expenditures During Closing Period (Expenditure cover sheet, invoice)
- Bank Statements for Closing Period (Jan 1, 2023 to closing of account)
- Any additional supporting information; Copies of Class II ads, bids, specs, etc.
- Solid Waste Authorities must include copies of monthly meeting minutes

Equipment purchases of \$1,000.00 or more must include the following:

- Notarized Security Agreement(s) for each piece of equipment
- WVDEP-REAP listed as the first lien holder for equipment titled through the DMV
- Itemized Certificate of Insurance listing equipment and WVDEP-REAP as the holder

COMPREHENSIVE REPORT

NAME _____

ADDRESS _____

CONTACT PERSON _____ PHONE _____

PROJECT NAME _____

Provide a summary of your project/operation. Describe your collection, processing, and marketing procedures.

Provide a summary describing the successes and failures in implementing your grant project.

Provide actual or estimated costs associated with the project during the grant year.

Personnel Costs	\$	_____
Office Expense	\$	_____
Repairs/Maintenance	\$	_____
Utilities	\$	_____
Rent/Lease	\$	_____
Fuel Costs	\$	_____
Supplies	\$	_____
Other _____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
TOTAL	\$	_____

Provide an evaluation of community support for the project.

Estimated Total Population of Area Currently Served by the Project _____

Estimated Number of People Participating in the Project _____

Provide an analysis of economic development achievements, such as job creation.

Provide the amount of waste that this project diverted from the solid waste stream during the project period. List by material.					
Batteries		Non-Ferrous Metals			
Building Materials		Paper			
Cardboard		Plastics 1-2			
Co-Mingled		Plastics 3-7			
Electronics		Textiles			
Glass		Tires			
Houshold Materials		Yard Waste			
Ferrous Metals					
Total:					

Calculate the cost per ton to recycle that volume. Do not factor in any revenues generated through recycling.

Total Cost During Grant Period	divided by	Total Tonnage Recycled	equals	Cost Per Ton
_____	/	_____	=	_____

Discuss the future of your recycling project. Explain how it will continue to operate after the grant period if it is not subsidized by grants.

Attach a complete accounting of the grant funds. You should attach the quarterly expenditure sheets from the past four quarterly reports and complete a new expenditure sheet for the period from January 1, 2023 to February 28, 2023 with the supporting documentation. To summarize, you must account for every grant expenditure from January 1, 2022, to February 28, 2023.

Expenditure Statements for the entire grant period attached? Yes No

Authorized Signature

Date

RG-3B Expenditures for the Quarter

Check here if additional Expenditure Sheet is attached.

For the Period Of: _____

Interest Earned This Quarter on Grant Account =

Original Budget						
Remaining Budgeted Amounts						

Check Number	Check Date	Paid To	Check Amount	Ck O/S					
		Totals							
		Remaining Budgeted Amounts Carried Forward							

Attach copies of invoices, canceled checks, titles to equipment, bidding information, payroll sheets, and grant account bank statements to support the expenditures listed above.

I certify that the above expenditures were made in carrying out the purposes and objectives of the WV Recycling Act and that such expenditures are true costs of the approved grant project.

Name of Grant Recipient (Please Print)

Authorized Signature

Date

RECYCLING ASSISTANCE GRANT EXPENDITURE COVER SHEET

Grantee	<input type="text"/>	Grant No.	<input type="text"/>
Paid To	<input type="text"/>		
Check #	<input type="text"/>	Amount	<input type="text"/>
		Date	<input type="text"/>
Purpose	<input type="text"/>		
	<input type="text"/>		
Budget Line Item	<input type="text"/>		

Photocopy or tape/paste copy of check below or attach electronic check imaging. This may be a copy of the returned check from the bank, or a copy prior to mailing. If the check is a reimbursement to another account, please include original payment check as well. Invoice(s) must be attached to the back of this sheet to provide reason for expenditure.

