



Event Recycling Application

This application must be completed and returned to CVWMA as soon as possible so that your event can be placed on the schedule. The equipment loan is not guaranteed until the application is approved and the \$100 deposit is received. *Application and deposit must be received at least 14 days prior to the event date.*

Mail: CVWMA Event Recycling Program, 2100 W Laburnum Ave, Suite 105, Richmond, VA 23227

Fax: (804) 359-8421 **Phone:** (804) 359-8413

EVENT INFORMATION

Event Name _____

Location _____
 Name of Location (i.e. facility, park) County or City (political jurisdiction, not mailing city)

Address _____
 Street Address City State Zip

Date _____ / _____ / _____
 Day of the week Month Day Year

Time _____ _____ _____ _____
 Exhibitor/Vendor Setup Time Event Start Time Event End Time Exhibitor/Vendor Breakdown Time

For Office Use

Delivery Date/Time
 ____/____/____
 ____:____ am/pm

Pickup Date/Time
 ____/____/____
 ____:____ am/pm

Quantity _____

ORGANIZATION INFORMATION

Organization Name _____

Contact Person _____

Organization Address _____
 Street Address City State Zip

Phone/Fax/Email () () _____
 Phone Fax Email

EVENT DETAILS

Types of Recyclables Aluminum cans Plastic bottles Cardboard Other _____

Estimated Attendance _____
 Provide actual attendance of previous year if event is annual

Number of trash receptacles _____
 The number of trash receptacles you plan to provide will help us determine the number of recycling containers to loan.

For Office Use

Application Received ____/____/____ Staff Review By _____

Approved ____ Denied ____ Reason _____ Notified ____/____/____

Deposit Received ____/____/____ Amount _____ Amount Returned _____ Date ____/____/____