

NORTH CAROLINA ALCOHOLIC BEVERAGE CONTROL COMMISSION

4307 Mail Service Center

Raleigh, NC 27699-4307

(919) 779-0700 FAX: (919) 662-3583

RECYCLING COMPLIANCE FORM

(Self Hauling)

North Carolina General Statute 18B-902 requires applicants for on-premises malt beverage permits, on-premises unfortified wine permits, on-premises fortified wine permits or mixed beverages permits to prepare and submit with the application packet a plan for the collection and recycling of all recyclable beverage containers for all beverages sold for consumption on the licensed premises.

This form is to be completed by a business that plans to separate recyclable beverage containers as required by NCGS 18B-1006.1 and the business itself transport those containers to a facility for recycling. (Do not use this form if recycle pickup will be by the city, county or other service provider.)

For information on recycling services available in your area, go to abc.nc.gov, click on "Mandatory container recycling effective Jan. 2008" and then "Click here for detailed guidelines". You may obtain an Exemption Request Form at abc.nc.gov or by calling 919-779-0700.

Name of Applicant: Esam Algarali

Trade name of business: Super Save

Address of business: 8242 NC 27 West

City/State/Zip: Charlotte/NC/27546 County: Harnett

Contact person: Esam Algarali

Phone Number: 252-218-0071 Fax Number: _____

Permit number: _____

Facility where recyclable materials will be taken: _____

Address of facility: _____

City/State/Zip: _____ County: _____

I certify under oath or affirmation that the information herewith provided is true and accurate to the best of my knowledge. That pursuant to NCGS 18B-1006.1, recyclable beverage containers will be separated and collected at the business named on this form and that those containers will be taken to a facility that recycles the material.

Signature: _____ Date: _____

Print name: _____ Title: _____

Sworn to and subscribed before me this the _____ Day _____ Month _____ Year

My commission expires _____

Notary or other person qualified to administer oaths

Note: Must be stamped or sealed by notary

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**RECYCLING COMPLIANCE FORM
(Private Hauler or Government Pick Up)**

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This form is to be completed by a business when a private hauler or a city/county (government) will pick up the required containers for recycling.

For information on recycling services available in your area, go to abc.nc.gov, click on "Mandatory container recycling effective Jan. 2008" and then "Click here for detailed guidelines". You may obtain an Exemption Request Form at abc.nc.gov or by calling 919-779-0700.

Name of Applicant: Esam Algazali

Trade name of business: Super Save

Address of business: 8262 NC 27 West

City/State/Zip: Lillington/NC/27546 County Harnett

Recycling service provider: _____

Contact person: _____ Title: _____

Address: _____

Phone Number: _____ Fax Number: _____

Email: _____

Materials collected: _____

ATTACH A COPY OF YOUR CONTRACT FOR RECYCLING SERVICE

I certify that the information herewith provided is true and accurate to the best of my knowledge and realize that the reporting of false information can result in a violation of NCGS 18B-902(c)

Signature: _____ Date: _____

Print name: _____ Title: _____