

## Composting Facility (CF) Permit Annual Reporting Survey

Calendar Year \_\_\_\_\_

Permittee: \_\_\_\_\_ CF Permit #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Please file a separate *CF Permit Annual Reporting Survey* for each CF Permit you possess. For questions or additional information, please contact Mr. Tariq Masood at 410-537-3314, or by email at [tariq.masood@maryland.gov](mailto:tariq.masood@maryland.gov). This report is due to the Maryland Department of the Environment by **January 31** of each year for the preceding year's data, each year the CF Permit is in effect.

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Facility Telephone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Facility E-mail Address: \_\_\_\_\_

CF Permit Type:  *Individual*  *General*

Facility Tier:  *Tier 1*  *Tier 2 – Small*  *Tier 2 - Large*

Please complete Tables 1 and 2 on the following pages. For Tier 1 facilities, quantities must be reported in weight. For Tier 2 facilities, quantities must be reported in both weight and volume.

**Please submit this form with a current copy of the  
Composting Facility Operations Plan to the:**

**Mr. Tariq Masood  
c/o Maryland Department of the Environment  
LMA/Resource Management Program  
1800 Washington Boulevard, Suite 610  
Baltimore, Maryland 21230-1719**

*By signing this form, I the permittee or duly authorized representative, do solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief. Information in this form is subject to audit by the Maryland Department of the Environment (the "Department"). I hereby authorize the representatives of the Department, upon request, to have access to any records supporting the information provided in this form.*

\_\_\_\_\_  
**Name (Print)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Email Address**

\_\_\_\_\_  
**Telephone Number**

**Table 1 – Feedstock Received**

County of Origin <sup>1</sup>	Feedstock <sup>2</sup>	Weight (tons) <sup>3</sup> (for Tier 1 and 2 facilities)	Volume (cubic yards) <sup>4</sup> (for Tier 2 facilities)
<b>TOTAL:</b>			

**Table 1 Instructions:**

1. Enter the county's origin for all feedstock received by the facility. For feedstock received from outside of Maryland, enter the name of the state.
2. Specify the feedstock received from each county (*e.g.*, food scraps, yard waste). List each feedstock on a separate line.
3. Enter the weight, in tons, of each feedstock received from within each county.
4. Tier 2 facilities must enter the volume in cubic yards of each feedstock received from within each county. Tier 1 facilities may leave this column blank.

Note: A facility may calculate approximate weight or volume using a method for converting volume to weight or weight to volume that is reasonably accurate, as determined by the Department. If a conversion factor is used, attach a brief explanation of how the factor was determined.

**Table 2 – Compost and Residuals Produced**

<b>Material to be Reported</b>	<b>Weight (tons) <sup>1</sup></b> (for Tier 1 and 2 facilities)	<b>Volume (cubic yards) <sup>2</sup></b> (for Tier 2 facilities)
Total quantity of <b>compost produced</b>		
Total quantity of <b>compost removed</b> from the composting facility		
Total quantity of <b>compost remaining</b> on site at the end of the calendar year		
Total quantity of <b>residuals generated</b> by the composting facility		
Total quantity of <b>residuals removed</b> from the composting facility		
Total quantity of <b>residuals remaining</b> on site at the end of the calendar year		

**Table 2 Instructions:**

1. Enter the weight, in tons, of compost produced from total feedstock received in Table 1. "Residuals" include non-compostable material that is removed from feedstock or compost before or after active composting, as well as any finished product that does not meet the compost standards under COMAR 15.18.04 or that is otherwise unmarketable.
2. Tier 2 facilities must enter the volume, in cubic yards, of compost produced from total feedstock received in Table 1. Tier 1 facilities may leave this column blank.

Note: A facility may calculate approximate weight or volume using a method for converting volume to weight or weight to volume that is reasonably accurate, as determined by the Department. If a conversion factor is used, attach a brief explanation of how the factor was determined.