

**Building Division**

675 Wildwood Avenue

Rio Dell, CA 95562

(707) 764-5642

cityofriodell.ca.gov

Construction Waste Management (CWM) Plan

Newly constructed buildings and demolition projects shall divert from landfills at least 65% of the construction materials generated during the project. All additions and alterations to non-residential and residential buildings or structures shall divert from landfills at least 65% of nonhazardous construction and demolition materials.

Note: A construction waste management plan must be submitted to the Building Division prior to permit issuance.

Project Address:					
Permit Number:					
Project Manager:					
WASTE MATERIAL TYPE	REUSE	RECYCLE	DISPOSAL	HAULER	MATERIAL DESTINATION
Asphalt					
Concrete					
Shotcrete					
Metals					
Wood					
Rigid insulation					
Fiberglass insulation					
Acoustic ceiling tile					
Gypsum drywall					
Carpet/carpet pad					
Plastic buckets					
Plastic					
Hardiplank siding and boards					
Glass					
Pallets					
Job office trash, paper, glass & plastic bottles, cans, plastic					
Alkaline and rechargeable batteries, toner cartridges, and electronic devices					
Other:					
EXAMPLE: Metal		X		ACME Hauling	Top Flight Recycling



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Construction Waste Management Acknowledgment

- Save **ALL** weight receipts from jobsite waste materials that were hauled away for reuse, recycling or disposal.
- Final Report must be submitted to the Building Division prior to Final Inspection. Final Report must include all hauling weight tickets/receipts.
- Notify ALL subcontractors of the project's waste management plan.
- ☐ I understand that 65% of the waste material from this project must be recycled. I will save all landfill and recycling center weight receipts from hauling construction and demolition debris.
- ☐ I will put forth a good faith effort to ensure that a minimum of 65% of the debris from this project will be recycled.
- ☐ I will submit a Final Report with weight receipts to the City before scheduling the final inspection.

Name: _____

Signature: _____

Date: _____