Environmental Protection

THE CITY OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL PROTECTION

Bureau of Environmental Compliance
59-17 Junction Boulevard, 9th Floor, Flushing, New York 11373

LOCAL LAW 40: DEP COMPLIANCE REPORTING FORM

SOLID WASTE OR RECYCLABLE MATERIAL CONTRACTOR'S NAME:		REPRESENTATIVE NAME:		PHONE NUMBER:
ADDRESS:		CITY / BOROUGH:	STATE:	ZIP:
REPORT NUMBER:	COVERING MONTH / YEAR OF:	DATE CONTRACT AWARDED: FROM: TO:	TOTAL ***ON ROAD*** AND ***OFF ROAD*** VEHICLE / EQUIPMENT ON SITE:	
DSNY CONTRACT NUMBER:	DSNY REPRESENTATIVE'S NAME:			PHONE NUMBER:

VEHICLE DESCRIPTION								**EPA/CARB VERIFIED BART** (Best Available Retrofit Technology) **INSTALLED** *(DEP Decal must be applied to vehicle indicating BART type and date installed)*						
No.	Vehicle ID #	Type of Vehicle	Make	Model	Year	VIN #	HP	Date Installed	Make	Model	Classification Level 4, 3, 2,1	*CCFS Installed Yes / No	**DEP Waiver Required	***DEP Decal Number

*Closed Crankcase Filtration System
**DEP Waiver Required (YES or NO)
***DEP Decal will be issued upon satisfactory DEP inspection.

I certify that the information provided is accurate as per the requirements of Local Law 40 of 2005 (LL 40). The installed Best Available Retrofit Technology (BART) is a Verified System meeting EPA/CARB standards and satisfies all the terms and conditions as set forth in the verification documents.

PRINT NAME _____ TITLE _____

SIGNATURE _____ DATE _____