



APPENDIX Z

Donation & Supply Request Form

Requests of \$1,000 and above will be presented to the Board for consideration quarterly beginning each January. **All other donation requests should be made at least two (2) weeks in advance of requested date of donation, and staff recommends one (1) month in advance for events.** Applicant will receive a written response as to the disposition of CVSan concerning the request. Any representations other than CVSan's written response are not to be considered the official response of CVSan. The submission of a request form does not guarantee that the request will be fulfilled.

Individual/Group/Business/School Name: _____

Contact Name: _____ Phone Number: () _____

Email Address: _____

Mailing Address: _____

City: _____ State: CA Zip Code: _____

Date Required: _____ Number of People Impacted: _____

Please describe the purpose of the donation as it applies to CVSan's Mission Statement
"We are committed to safe, efficient and effective wastewater and solid waste management. We promote waste diversion and recycling, education and practices. We strive for public satisfaction through quality service, reasonable rates and proper stewardship of our resources and the environment."

For items not listed on the back, please attach supporting documentation that may help in the evaluation of this donation request. Supporting documentation may include recycled content verification, solid waste diversion estimates, etc. Supporting documentation attached? Yes No

The above information is correct to the best of my knowledge. If the donation is approved, I will use the donated goods for the purposes listed above. I have read and accept CVSan's Donation Policy No. 3095.

X _____
Signature (Principal if for a school) Date

I have received all items outlined in this Donation Request Form.

X _____
Signature Date



Return items (applies to borrowed materials/supplies).

X _____
Signature Date

NOTE: Donation Request Forms/Supporting Documentation can be mailed to or faxed to CVSan at 510-537-1312

Castro Valley Sanitary District - Donation & Supply Request Form – Item List

Indoor Containers		Qty.	Value	Total Value
	0.75-1.75 gal Garbage Sidesaddle - black		\$9.00	
	3 gal Recycle – blue		\$7.00	
	7 gal Recycle – blue		\$7.00	
	11 gal Recycle - blue		\$10.00	
	3 gal Organics – green		\$7.00	
	7 gal Organics – green		\$7.00	
	11 gal Organics - green		\$10.00	
	23 gal Square Recycle - blue		\$65.00	
	23 gal Slim Jim - blue		\$36.00	
	23 gal Slim Jim Lid – mixed recyclables		\$33.00	
	23 gal Slim Jim Lid – paper only		\$33.00	
	Multi-Family Recycling Tote Bag		\$4.00	
	0.75 Organics Sidesaddle green		\$6.00	
	2.4 gal Organics w/lid & handle - green		\$7.00	
	6 gal Organics w/ handle - green		\$7.00	
	23 gal Slim Jim - gray		\$36.00	
	Slim Jim Lid - 2-hole, green		\$33.00	
	23 gal Organics Slim Jim - green		\$36.00	
	Slim Jim Lid - 1-hole, green		\$33.00	
	Other			

Portable Event Containers (Clearstreams)		Qty	Value	Total Value	Loan (Check if borrowing)
	Recycling – blue		\$45.00		
	Recycling Bags – clear		\$1.00		
	Recycling Decal Options (incl.) – please select one: <input type="checkbox"/> Paper & Beverage Containers <input type="checkbox"/> Bottles & Cans				
	Organics – green w/ decal		\$45.00		
	Organics Bags - compostable		\$2.00		

Signs		Qty.	Value	Total Value
	Recycle – 11x17		\$1.00	
	Recycle – 8.5x11		\$1.00	
	Decal Recycle – 8x8		\$1.00	
	Organics – 11x17		\$1.00	
	Organics – 8.5x11		\$1.00	
	Decal-Organics – 8x8		\$1.00	
	Garbage – 11x17		\$1.00	
	Garbage – 8.5x11		\$1.00	
	Decal-Garbage – 1-5x5		\$1.00	
	Multi-Family Recycling, Organics, & Garbage – 8.5x11 (dbl. sided)		\$0.35	
	Plastic Bag/Wrap Recycling – 8.5x5.5		\$1.00	
	Paper Towel Composting – 8.5x5.5		\$1.00	
	Shredded Paper Composting – 8.5x5.5		\$1.00	
	Pencil Shavings Composting – 8.5x5.5		\$1.00	
	Where Does This Go? Flyer (various items) – 8.5x11		\$1.00	

For CVSan Staff Use Only

Approved Rejected Initial: _____
 Reason (if rejected): _____
 Total Donation Value: _____
 Notes: _____
 Board Meeting Date: _____