

2025 ICC TIP FEE WAIVER AUTHORIZATION FORM - MUNICIPAL

**MUNICIPALITY NAME**:

**NAME OF MUNICIPAL ORGANIZER AND SIGNATOR**:

This form confirms that the above-mentioned municipality is authorized to deliver this load of solid waste generated from the International Coastal Cleanup (ICC) to the Rhode Island Resource Recovery Corporation (Resource Recovery) Central Landfill at no charge for up to 10 tons, no later than one week from the date of the last cleanup. These tons, up to 10, will also not count against the municipality’s Municipal Solid Waste (MSW) cap. Tons in excess of the 10-ton limit will be applied to the MSW cap and charged the applicable municipal disposal fee. Non-solid waste items or materials will be charged at their applicable disposal fees listed on the most current [Fee Schedule](https://rirrc.org/about/accepted-materials-pricing).

* **The municipal organizer’s signature** below certifies that the cleanups listed did take place for the International Coastal Cleanup on/around September 20, 2025; that they were registered through Save The Bay; that they did not cover areas that normally fall under the municipality’s or the state’s responsibility; that this material is not the result of a special waste collection; and that these cleanup groups are not normally charged with the task of litter cleanup nor have the funding to do so.
* **The driver’s signature** below certifies that the content of this load is the same material and only that material generated from the International Coastal Cleanup(s) listed here or, if mixed, an attachment has been included showing an estimate of the weight of the cleanup material.

Resource Recovery reserves the right to deny the waiver and charge the load as municipal solid waste if any of the listed cleanups from that load are found to be non-compliant with the above certified statements.

### Municipal Organizer’s Signature Date

### Hauler/Driver Signature Date

Please see page 2 of this form to fill in the required cleanup event information. You may also submit the required information as a separate document by attaching it to this authorization form or emailing it to municipal@rirrc.org.

**MUNICIPALITY**: **DATE:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CLEANUP DATE** | **CLEANUP LOCATION** | **ORGANIZATION** | **CONTACT NAME\*** | **EMAIL/PHONE** |
| Date  | Location | Organization | Contact Name | Email/ Phone |
| Date  | Location | Organization | Contact Name | Email/ Phone |
| Date  | Location | Organization | Contact Name | Email/ Phone |
| Date | Location | Organization | Contact Name | Email/ Phone |
| Date | Location | Organization | Contact Name | Email/ Phone |
| Date | Location | Organization | Contact Name | Email/ Phone |
| Date | Location | Organization | Contact Name | Email/ Phone |
| Date | Location | Organization | Contact Name | Email/ Phone |
| Date | Location | Organization | Contact Name | Email/ Phone |
| Date | Location | Organization | Contact Name | Email/ Phone |
| Date | Location | Organization | Contact Name | Email/ Phone |

\*Contact name and email/phone is for the on-the-ground contact, who is any organizer/participant that is present at the cleanup site for the event.