



Bureau of Recycling & Solid Waste

ClearStream Request Form



Special events can generate a significant amount of trash and recycling. The City of Allentown, Bureau of Recycling & Solid Waste, offers the use of trash and recycling ClearStream frames and lids to collect recyclables and trash generated at special events held within the city limits of Allentown.

1. Please complete and submit this form at least two weeks prior to the event via email to samantha.jackson@allentownpa.gov.
2. Event organizers are responsible for the ClearStream racks and lids while in their possession and will be required to pay for replacements if any containers and/or lids are lost, stolen, or damaged. **Replacement costs: \$48.00 per frame; \$17 per lid.**
3. All material must be collected and appropriately disposed of by event personnel as approved by the Bureau of Recycling and Solid Waste. ClearStream containers are to be placed side by side during the event. Please indicate below your plan for the trash and recycling post event. Dependent upon plan, the City reserves the right to request an alternate plan for trash and recycling— i.e. requesting planner to contract a private hauler for trash and/or recycling.

| | |
|---------------------------|-----------------------------|
| Event Name: _____ | Event Date(s): _____ |
| Event Location: _____ | Estimated Attendance: _____ |
| Event Organization: _____ | Event Contact: _____ |
| Email: _____ | Phone Number: _____ |

The ClearStreams are checked-out and checked-in by Bureau of Recycling and Solid Waste personnel at the **Allentown Yard Waste Site located at 1401 Oxford Drive.**

No. of ClearStreams Requested: # _____ Recycling # _____ Trash

ClearStream Containers are available for pick-up and drop-off during the following days/times:

Wednesday 8:00 a.m. - 4:00 p.m.

Saturday 9:00 a.m. - 3:00 p.m.

If your event date is between December and March, please call 610-437-8729 ext. 2585 to coordinate pick up and return dates and times.

Pickup Date: _____ Time: _____ Return Date: _____ Time: _____

Recycling Plan: _____
(where, when, and how will you recycle the recyclable materials generated at your event)
 After your event: **Recyclables ONLY** may be taken to the City's Drop-Off Center located at 1400 Martin Luther King Jr. Drive and placed in the labeled "Commingled" green dumpster.

Trash Plan: _____
(where, when, and how will you dispose of the trash generated at your event)
Trash is not accepted at the Drop-Off Center. Fines will be issued to violators.

Events with an estimated attendance of over 1,000 people must contract for on-site trash and recycling dumpsters. See the Special Event Planning Guide on the reverse side of this page.

Contracted Trash Dumpster Yes No Company: _____
 Contracted Recycling Dumpster Yes No Company: _____

Signature: _____ Date: _____

Special Event Planning Guide

| Projected Attendance | Event Duration | # Food/Beverage Vendors | # Trash ClearStreams | # Recycling ClearStreams | # Trash Dumpsters | Size Each; Cumulative | # Recycling Dumpsters | Size Each; Cumulative | Trash/Recycling Personnel |
|-------------------------|----------------------------|-------------------------|----------------------|--------------------------|-------------------|-----------------------------|-----------------------|----------------------------|---------------------------|
| </= 200 | < 3 hrs | 0 | 2 | 0 | 0 | N/A | 0 | N/A | 0 |
| 201-500 | 3-4 hrs | 1-2 | 5 | 5 | 0 | N/A | 0 | N/A | 1 |
| 501-1,000 | 3-4 hrs | 3-6 | 10 | 10 | 0 | N/A | 0 | N/A | 1 |
| 1,001-4,000 | 4-6 hrs | 7-10 | 12-20 | 12-20 | 2-4 | 4 Cu. Yd.; 8-16 Cu. Yd. | 1 | 6 Cu. Yd.; 6 Cu. Yds. | 2 |
| | 6-8 hrs; or multiple days | | | | | | | | |
| 4,001-10,000 | 9-12 hrs; or multiple days | >10 | 22-50 | 22-50 | 5-8 | 4 Cu. Yd.; 20-32 Cu. Yd. | 2-4 | 10 Cu. Yd.; 20-40 Cu. Yds. | 3-6 |
| >10,000 | | >10 | | | | | | | |
| TO BE DETERMINED | | | | | | | | | |

Official Use Only

P/U Date: _____ RSW: _____ # Trash _____ # Recycling _____ # Black Bags _____ # Clear Bags _____

Returned: _____ RSW: _____ # Trash _____ # Recycling _____

of Racks Missing _____ # of Lids Missing _____ RSW: _____ Notified: _____

Replacement: _____ Amount \$ _____ Cash Check (Check #: _____) Date: _____