

President James T. Mullin, District 1

Vice President Diana Broomell, District 4

Commissioner Tari Moore, District 2

Commissioner Michael W. Dunn, District 3

Commissioner Robert J. Hodge, District 5



Alfred C. Wein, Jr.
County Administrator

W. Scott Flanigan, P.E., Director
410.996.5259

Pete Bieniek, Chief
410.996.6275
Fax: 410.287.4608

CECIL COUNTY GOVERNMENT

Department of Public Works
Solid Waste Management Division

200 Chesapeake Boulevard, Suite 2400, Elkton, MD 21921

Municipality & Community Group Recycling Bin Loan Program

This program provides Municipalities and recognized Cecil County Community Groups with the ability to recycle at their community events. This program is first come first serve so please reserve the recycling bins ahead of time for your event. This program provides at no charge:

- Up to 20 recycling containers & bags for single stream recyclables to the municipality or group to use for recycling at a community event at no charge.
- A 15' recycling dumpster can also be requested for large events if available.

Please fill out the following information and sign the attached Hold Harmless Agreement.

Name of Municipality or Community Group: _____

Name of Event: _____

Date(s) of Event: _____

Address or Location of Event: _____

Contact Person: _____ Contact Phone: _____

Contact Cell: _____ Contact E-mail: _____

Number of Recycling Bins Requested: _____

Recycling Dumpster Requested?: yes/no (circle one)

- All set up, collection, and removal of the bins and recyclables must be done by the municipality or group requesting the bins.
- We suggest putting a recycling bin next to each trash bin and at food court areas.
- Recycling bins are labeled for bottles, cans, and cups to target event recyclables, but can have all single stream recyclables (mixed paper & cardboard also) put into them.
- The bins should be picked up at the Cecil County Central Landfill the day before the event and returned the day after the event.

Group or Municipality Contact Signature: _____

For more information contact:
Recycling Coordinator, Tanya M. Adams
Phone: 410-996-6275
Cell: 443-309-0573
Fax: 410-287-4608
E-mail: Tadams@ccgov.org

President James T. Mullin, District 1
Vice President Diana Broomell, District 4
Commissioner Tari Moore, District 2
Commissioner Michael W. Dunn, District 3
Commissioner Robert J. Hodge, District 5



Alfred C. Wein, Jr.
County Administrator

W. Scott Flanigan, P.E., Director
410.996.5259

Pete Bieniek, Chief
410.996.6275
Fax: 410.287.4608

CECIL COUNTY GOVERNMENT

Department of Public Works
Solid Waste Management Division
200 Chesapeake Boulevard, Suite 2400, Elkton, MD 21921

INDEMNITY / HOLD HARMLESS AGREEMENT

To the fullest extent permitted by law, the undersigned Organization agrees to indemnify and hold the Board of County Commissioners of Cecil County Maryland, its elected and appointed officials, employees, and volunteers and others working on behalf of the Board of County Commissioners of Cecil County Maryland, harmless from and against all loss, cost, expense, damage liability or claims, whether groundless or not, arising out of the bodily injury, sickness or disease (including death resulting at any time there from) which may be sustained or claimed by any person or persons, or the damage or destruction of any property, including the loss of use thereof, based on any act or omission, negligent or otherwise of the Organization, or anyone acting on its behalf in connection with or incident to **(Cecil County Government property, and or operations, including its Solid Waste Division)**; and the Organization shall, at its own cost and expense, defend any such claims and any suit, action, or proceeding which may be commenced there under, and the Organization shall pay any and all judgments which may be recovered in any suit, action or proceeding, and any and all expense including, but not limited to, costs, attorney's fees and settlement expenses, which may be incurred therein.

Print Name of Organization _____

Organization Phone Number _____

Print Authorized Signers Name _____

Authorized Signature _____

Address (street) _____

City, State, Zip Code _____

Date _____

For County Use Only: Agreement Number: _____