

**New Jersey Department of Environmental Protection  
Division of Solid & Hazardous Waste**

**Certificate of Public Convenience and Necessity (CPCN) Annual Report for Solid Waste  
Collectors/Transporters and Brokers  
Fillable PDF Instructions**

**Section 1 (Downloading the Form):**

Save a local copy of the PDF file “2019 CPCN Annual Collector Transporter Utility Report.pdf”

In order to use all of the features the file will need to be opened in Adobe Acrobat Reader with a version of Adobe Reader XI or higher. It is a free software available for download at <https://get.adobe.com/reader/>.

**\*\* Please note – Do not print out this form to complete by hand. This form will be read electronically. It is strongly recommended to save your form after each page that is completed. \*\***

**Section 2 (New Features):**

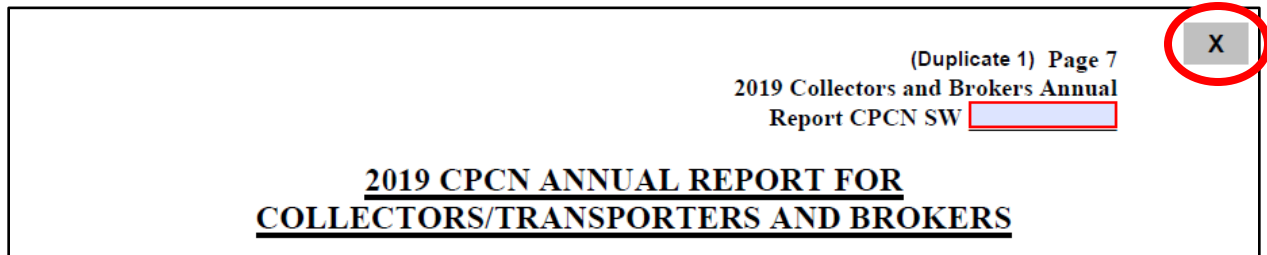
New features of the fillable form include the ability to duplicate pages, attach files, calculate buttons, and submit digital signatures.

**Section 2A (Duplicating Pages):**

On some pages, you may need additional space to provide all the required information. If you need additional space on a page, click on the “Duplicate This Page” button at the bottom of the screen. A blank copy of that page will be added to the end of the document.

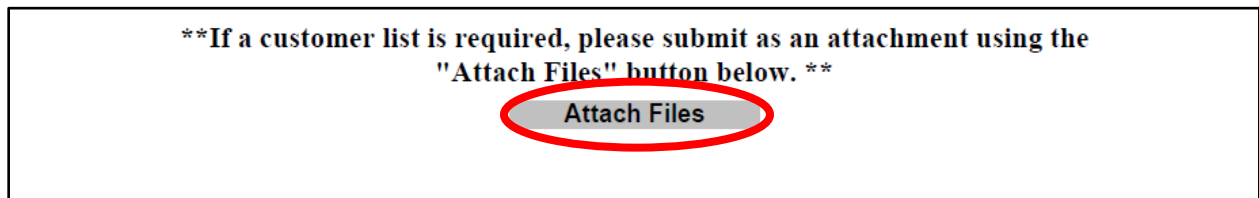
<b>2. LIST OFFICERS AND EQUITY HOLDERS:</b>					
*Name	<input type="text"/>	*Title	<input type="text"/>	*Equity	<input type="text"/>
Name	<input type="text"/>	Title	<input type="text"/>	Equity	<input type="text"/>
Name	<input type="text"/>	Title	<input type="text"/>	Equity	<input type="text"/>
<b>3. NAME OF REGISTERED AGENT(Out of State Companies) :</b> <input type="text"/>					
STREET ADDRESS: <input type="text"/>					
CITY, STATE, ZIP		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TELEPHONE: <input type="text"/>					
CELL PHONE: <input type="text"/>		FAX NUMBER: <input type="text"/>			
					<input type="button" value="Duplicate This Page"/>

If a page was accidentally duplicated or is no longer needed, it may be deleted where there is an “X” button at the top right. Clicking this “X” will delete the page from the document.

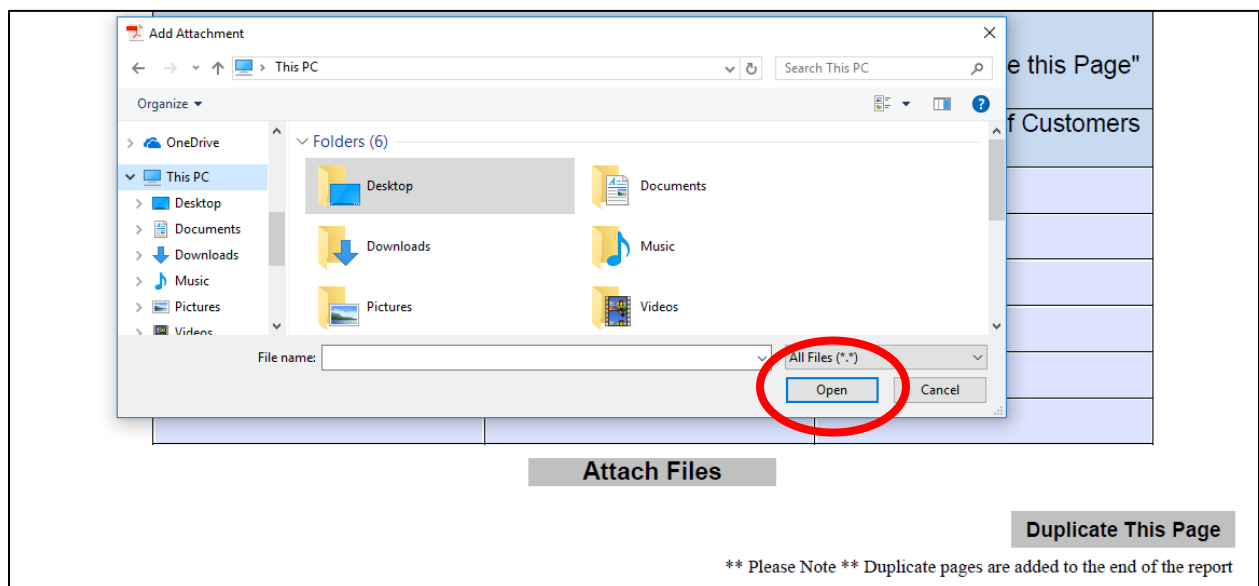


### Section 2B (Attaching Documents):

Additional documents that are required to be submitted must be attached directly to the PDF. Pages that request additional documents contain an “Attach Files” button.



Clicking the “Attach Files” button will bring up a “File Explorer” window. Browse to the location on your computer where the file you wish to attach is located. Select the file and click “Open”. The file is now attached to the document.



**Section 2C (Customer List):**

If you are required to attach a customer list based on the information you've added on page 15 of the report (Customer Service Area Inventory), please note that the list will be treated as a confidential document and will not be subject to public review pursuant to N.J.A.C. 7:26H-5.9(c)(4).

**Section 2D (Calculate Totals):**

“Calculate Totals” buttons have been added to pages that require calculations (20, 22 & 27). Clicking the “Calculate Totals” buttons will calculate the totals on all pages that require calculations. Please note that calculations may take a few seconds to complete.

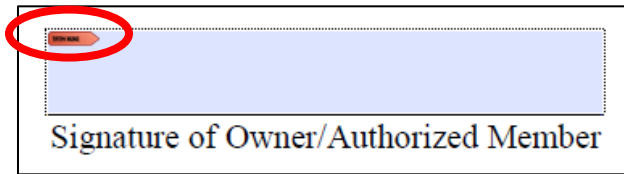
County	2019 Collector Gross Revenue
Atlantic	0.00
Bergen	0.00
Burlington	0.00
Camden	0.00
Cape May	0.00
Cumberland	0.00
Essex	0.00
Gloucester	0.00
Hudson	0.00
Hunterdon	0.00
Mercer	0.00
Middlesex	0.00
Monmouth	0.00
Morris	0.00
Ocean	0.00
Passaic	0.00
Salem	0.00
Somerset	0.00
Sussex	0.00
Union	0.00
Warren	0.00
Subcontracts (from pg 9)	0.00

**Total Gross Operating Revenue**  
During Calendar Year 2019: \$ 0.00  
Collector Total

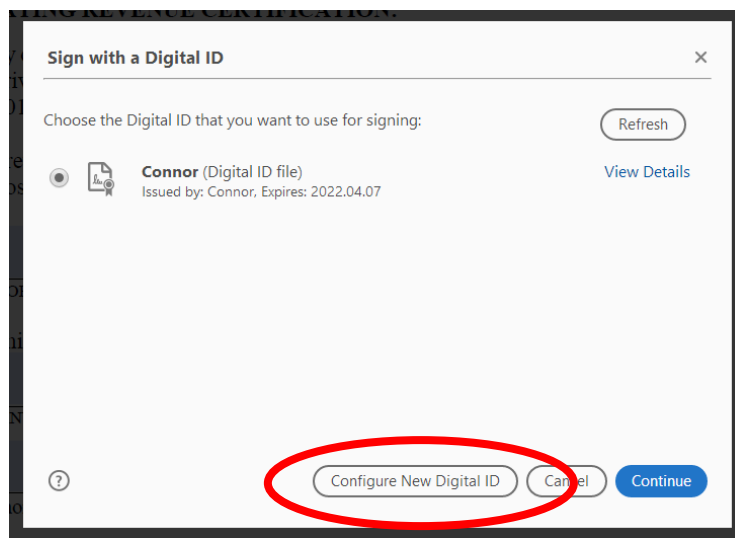
**Calculate Totals**

## Section 2E (Digital Signatures):

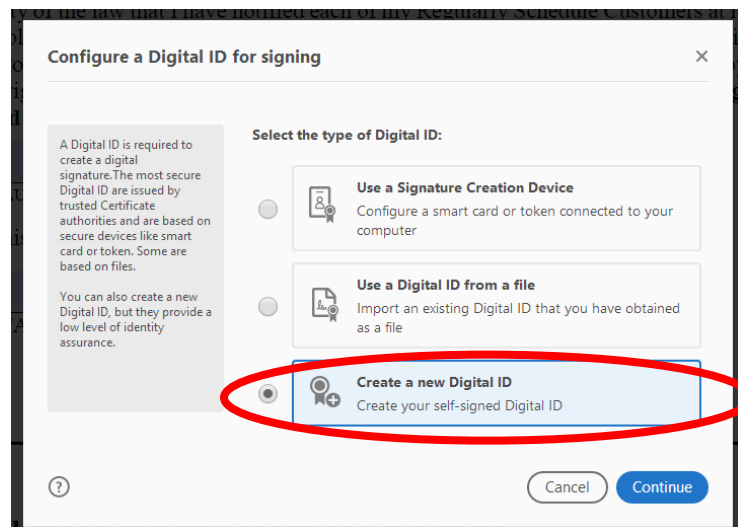
The form contains the ability to use digital signatures. Both the Owner/Authorized Member signature and the notary signature referenced in Section 3 below are required digital signatures. A signature field will be denoted by having a red mark in the top left corner of the field (see below).



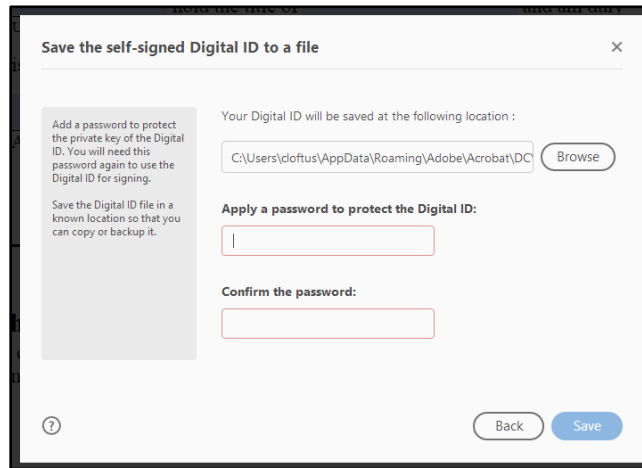
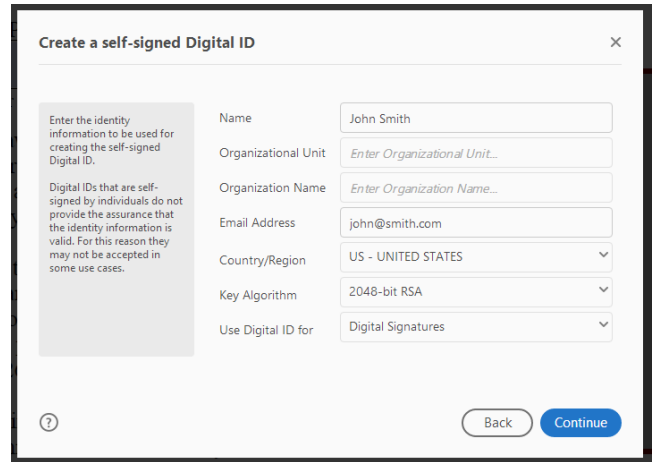
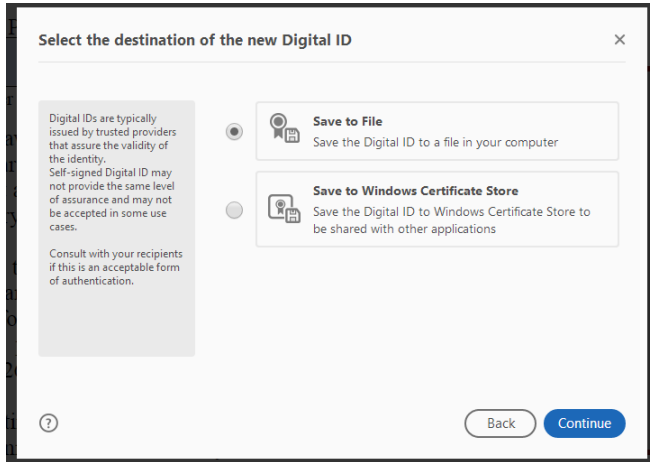
Clicking on the signature field will bring up a prompt with steps instructing users to sign with a digital ID. The first step is to click the “Configure New Digital ID” button.



If you do not already have a Digital ID file on your computer then select the third option, “Create a new Digital ID” and click continue.



Select the “Save to File” option and click continue. Then enter your information and create a password



The digital ID that was created in the previous steps should now be selected. You will be prompted for your password. After entering your password click on the sign button in the bottom right of the window. The field will now be digitally signed.



(OFFICIAL COMP  
John Smith Digitally signed by John Smith  
Date: 2017.04.10 07:58:01 -04'00'  
Signature of Owner/Authorized Member

**\*\* Please note – Page 31 must not be signed until you are in the presence of a notary (See Section 3 below for instructions on the notary signature page). \*\***

**Section 3 (Notary Signature):**

Page 31 of the form must be filled out in the presence of a notary. Additionally, please note that all applicable pages must be completed prior to the affixation of signatures on the notary page.

**After the form is signed by a notary it will become locked for editing.**

Please email or bring a saved copy to your notary on a flash drive. Once you are in the presence of your notary please fill out the fields and signature on page 31. After all the fields have been completed, have the notary to fill out the box.

**\*\* Please note – If any signatures or required fields have not been completed at this point the PDF will display an error message with the missing fields. Please complete all missing fields before the notary signs. \*\***

**VERIFICATION AND OATH FOR 2019 ANNUAL REPORT FILING**

NAME OF PERSON COMPLETING THIS FORM:

RELATIONSHIP TO BUSINESS:

CONTACT NUMBER:

The 2019 Annual Utility Report for Solid Waste Collectors/Transporters and Brokers must be verified and certified by the oath of the President or another principal general officer if other than the respondent and must be approved as a "key employee" as defined by N.J.S.A. 13:1E-127(d).

**Oath** To be made by the Proprietor, Partner, President or other principal officer of the utility:

(Insert name of Owner or Officer and Title)

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment" N.J.A.C. 7:26H-5.9(d)

I acknowledge that submitting false information to the Department of Environmental Protection may subject my company to potential enforcement actions, penalties and/or revocation of the A-901 license and CPCN.

[Click Here to Sign Document](#)

(Signature of Owner or Officer)

**\*Please note notary must be present when signing\***

State of _____ County of _____
Sworn to and subscribed before me
this _____ day of _____ 20 _____
_____ Print Name of Notary Public or Officer Authorized to Administer Oath
_____ Signature of Notary Public or Officer Authorized to Administer Oath
My Commission expires: _____

The notary must complete all the fields that appear after the box disappears. Once the fields are complete the signature button can be clicked to unlock the signature field. The steps to sign the notary are the same as above in section 2E.

State of _____ County of _____
Sworn to and subscribed before me
this _____ day of _____ 20_____
_____ Print Name of Notary Public or Officer Authorized to Administer Oath
_____ Signature of Notary Public or Officer Authorized to Administer Oath
My Commission expires: _____

**Once the form has been signed by the notary it will be locked from editing.** Please save the form at a convenient location on the PC or flash drive. The form is now ready to submit (See section 4 below). Please have the notary send you a copy of the completed form by email or placed back on your flash drive.

**Section 4 (Submission to the DEP):**

**After completing the report, save the filled-out form and send it as an attachment to [swutility@dep.nj.gov](mailto:swutility@dep.nj.gov).** Additionally, to facilitate an increase in performance and ease of use include any suggestions, questions or concerns in regard to this new submission method. Please remember to save all work with the form to maintain accurate records.