



Please note that all information shared in this application will be treated as confidential and will only be seen by the FRC. Please limit your proposal length to the space provided in the form. Questions? Please email [recyclefoam@fpi.org](mailto:recyclefoam@fpi.org). Submit completed applications to [recyclefoam@fpi.org](mailto:recyclefoam@fpi.org).

**CONTACT INFORMATION**

Organization		
Name and title of main contact		
Address		
Telephone	Cell phone	Fax number
E-mail address		

**RECYCLING FACILITY DESCRIPTION**

Owner of MRF	Operator of MRF
Location of facility	
Capacity of facility, TPY (tons/year)	Current throughput, TPY
Operating hours	Number of shifts
Residential tonnage processed/year	Commercial tonnage processed/year (if applicable)
Households served	Population served
Communities served	

**PROJECT DESCRIPTION**

Provide details about your operation, facility, and community, and the overall plan for adding/improving foam polystyrene recovery.



**PROJECT DESCRIPTION, CONTINUED**

**MATERIAL TARGETED FOR RECYCLING**

List the types of foam polystyrene products targeted by the recycling program (foodservice packaging must be one of the targeted materials to be eligible). Please also include a list of the other material accepted for recovery at the recycling facility.

**END MARKET PLAN**

Provide the name(s) of the company(ies) that has/have agreed to purchase the recycled foam and the terms.  
(TL/LTL quantities, FOB sellers dock, etc.)



### MEASUREMENT PLAN

Provide a description of how the facility collects and tracks data. This data would be used to track the weight, percent of overall material composition, and market value of the polystyrene foam that is processed and sold.

### OUTREACH PLAN

Provide a detailed description of plans for program promotion of post-consumer polystyrene foam recycling or current outreach methods for existing programs. How will the MRF operator and community work together to support and promote the program?



### IMPLEMENTATION TIMELINE

Provide an estimated timeline for the proposed grant project. The timeline should include the dates for planning, equipment testing and purchase, delivery, installation, equipment start-up, program promotion and outreach, and program kickoff.

### REQUEST GRANT AMOUNT AND PROGRAM BUDGET

Provide a detailed budget for the purchase and installation of the necessary equipment to collect, process and sell recycled polystyrene foam, or to improve existing recovery programs. Please include equipment supplier names, and indicate what portion of the budget would be funded by the FRC grant versus self-funded.

#### Sample Budget

ITEM	FRC FUNDED	SELF-FUNDED	TOTAL
High capacity blower, grinder and foam densifier (include supplier name)	\$45,000		\$45,000
Freight and installation	\$4,500		\$4,500
Conveyor system		\$10,500	\$10,500
Electrical Installation		\$5,000	\$5,000
<b>TOTAL PROJECT EXPENDITURES</b>	<b>\$49,500</b>	<b>\$15,500</b>	<b>\$65,000</b>

ITEM	FRC FUNDED	SELF-FUNDED	TOTAL
<b>TOTAL PROJECT EXPENDITURES</b>			



### SUPPORTING DOCUMENTATION

Make a list of any supporting documentation that will be provided as an additional attachment to your application submission email such as copies of quotes received for densifier systems, associated components, and installation.

A large, empty rectangular box with a thin blue border, intended for the applicant to list supporting documentation.