



STATE OF HAWAII
DEPARTMENT OF HEALTH

P. O. BOX 3378
HONOLULU, HAWAII 96814

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GLASS CONTAINER ADVANCE DISPOSAL FEE
PROGRAM REGISTRATION FORM

Rev. 7/2012

In accordance with Hawaii Revised Statutes, Chapter 342, all glass container importers shall register with the Department of Health using this form. "Glass container importer" means any person who is engaged in the manufacture of glass containers within the State or who imports glass containers from outside the State for sale or use within the State.

Company Name: _____ Month/Year: _____

Mailing Address: _____
Street Address or P.O. Box City State Zip

Contact Person: _____
Name Phone Email

I hereby certify that my company is a glass container importer, as defined by Hawaii Revised Statutes, Chapter 342G, Part VII. Filing Status (please check one):

My company imports 5,000 or fewer glass containers per year. We are **exempt** from the reporting and payment requirements. I understand that any empty, imported glass container designed to hold not more than two and one-half fluid ounces of a product meant for human consumption shall be exempt from the fee. *If the number of containers my firm imports or manufactures exceeds 5,000 within any calendar year, I am responsible for payment of the Advance Disposal fee for each container.*

My company imports more than 5,000, but less than or equal to 100,000 glass containers per year. We will be reporting and paying the fee on an **annual** basis.

My company imports greater than 100,000 glass containers per year. We will be reporting and paying the fee on a **quarterly** basis.

I hereby certify that my company is not a glass container importer, as defined by Hawaii Revised Statutes, Chapter 342G, Part VII.

All glass container importers registered with the Department shall maintain records reflecting the manufacture of their glass containers as well as the importation and exportation of products packaged in glass. The records shall be made available, upon request, for inspection by the Department.

Signature of Authorized Representative

Date

Please Print Name

Title

Please mail registration form to:
Hawaii Department of Health
Office of Solid Waste Management
919 Ala Moana Blvd., Rm. 212
Honolulu, HI 96814

If you have any questions, please
contact the
Office of Solid Waste Management at:
Ph. (808) 586-4226
Fax (808) 586-7509

Hawaii Glass Container Advance Disposal Fee Program Filing Status Information

Exempt Status (indicated on the Glass Container ADF Registration Form)

Companies who import fewer than 5,000 glass containers within a one-year period are exempt from payment of the ADF. Any empty, imported glass container designed to hold not more than two and one-half fluid ounces of a product meant for human consumption shall be exempt from the fee. However, exempt filers are required to track the volume of containers imported. If the exempt filer ever imports 5,000 or more within a given calendar year, then their filing status will change, and they will be required to pay the ADF.

Annual Filing Status (glass container importers required to use the Annual Report Form)

Companies who import 5,000 or more, but less than or equal to 100,000 glass containers per year, are required to pay the ADF on an annual basis. The reporting period is based on the State fiscal year, July 1 through June 30. Payments are due by July 15th of each year.

Quarterly Filing Status (glass container importers required to use the Quarterly Report Form)

Companies who import more than 100,000 glass containers per year are required to pay the ADF on a quarterly basis. Quarterly periods are based on the State fiscal year as follows: July-September, October-December, January-March, and April-June. Payments are due by the fifteenth day of the month following the end of the previous calendar quarter.

NOTE: All glass container importers shall maintain records reflecting the manufacture of their glass containers as well as the importation and exportation of products packaged in glass. The records shall be made available, upon request, for inspection by the Department.