



Mattress Recycling Council

Funding for Illegally Dumped Mattress Pilot Studies

APPLICATION FORM

Respondent Name

Date



1. *A description of the Applicant's qualifications and experience with illegal dumping mitigation and/or enforcement.*

2. *Identify the names, titles, and organizations of all parties that will be involved in this project.*

3. *Provide a project description.*



4. **Identify how each of the following will be addressed during this project:**
- ***Decrease in the number of mattresses that could be prevented from becoming illegally dumped, please provide an estimated decrease***
 - ***Improved awareness and enforcement of illegal dumping laws***
 - ***Improved education around proper disposal of mattresses***

5. **Historical baseline data of illegally dumped mattresses that will be used for the analysis of this study. Please provide as an attachment with the proposal.**



Qualifications / Experience of Organization

- Relevant Staff List
- Qualifications/Experience
- Consultant Name and Qualifications (if applicable)

1. Staff Member, Qualification/Experience, Project Role

2. Staff Member, Qualification/Experience, Project Role

3. Staff Member, Qualification/Experience, Project Role



Proposed Implementation, Methodology and Approach

Provide the following information:

- Project Approach and Methodology to Prevent Illegal Dumping of Mattresses
- Project Impact and Estimated Decrease in Illegally Dumped Mattresses
- Project Timeline, Deliverables and Funding

1. Project Approach and Methodology to Prevent Illegal Dumping of Mattresses

2. Project Impact and Estimated Decrease in Illegally Dumped Mattresses

