

Readiness Plan

Application Voucher# _____

Name on Application: _____

Registry ID# _____

START UP COST CALCULATION

<i>Cost Category</i>	<i>Estimated Cost</i>	
Licenses and Fees		
Business licenses and taxes	\$	_____
Local land use permits	\$	_____
Other	\$	_____
	Subtotal	\$ _____

Land/Location of Business		
Purchase price, including closing costs	\$	_____
Initial rental expense, including security deposits	\$	_____
Other	\$	_____
	Subtotal	\$ _____

Construction Costs		
Building and shelters	\$	_____
Storage areas	\$	_____
Sorting rooms and shelters	\$	_____
Other	\$	_____
	Subtotal	\$ _____

Equipment Costs		
Material-handling equipment	\$	_____
Office equipment	\$	_____
Transportation equipment	\$	_____
Other	\$	_____
	Subtotal	\$ _____

Initial Operations Funding		
Cost to operate the business for the first 3 months	\$	_____
	Subtotal	\$ _____
		Total Start-up Costs \$ _____

PROJECTED MONTHLY EXPENSES

<i>Cost Category</i>	<i>Estimated Cost</i>	
Labor		
Recycling location wages and benefits	\$	_____
Maintenance wages and benefits	\$	_____
Transportation labor	\$	_____
Other	\$	_____
	Subtotal	\$ _____

Taxes and Fees		
Property taxes	\$	_____
Business license fees	\$	_____
Payroll taxes	\$	_____
State income taxes	\$	_____
Other	\$	_____
	Subtotal	\$ _____

Equipment and Capital

Recycling location site rental or lease payments	\$ _____	
Equipment, tools or machinery	\$ _____	
Supplies	\$ _____	
Transportation vehicles	\$ _____	
Capital asset purchase costs	\$ _____	
Maintenance of capital assets	\$ _____	
Interest	\$ _____	
Other	\$ _____	
	Subtotal	\$ _____

Overhead

Utilities	\$ _____	
Advertising and promotion	\$ _____	
Insurance	\$ _____	
Transportation fuel	\$ _____	
General, administrative, and overhead	\$ _____	
Other	\$ _____	
	Subtotal	\$ _____

Total Monthly Expenses \$ _____

PROJECTED MONTHLY REVENUES

<i>Revenue Type</i>	<i>Estimate</i>	
Sale of Scrap		
Sale of scrap aluminum	\$ _____	
Sale of scrap glass	\$ _____	
Sale of scrap plastic	\$ _____	
Sale of other scrap (paper, cardboard, etc.)	\$ _____	
	Subtotal	\$ _____
Payments from Processors in addition to CRV Payments		
Administrative fees from processors	\$ _____	
State processing fees	\$ _____	
	Subtotal	\$ _____
Other		
Grants and awards	\$ _____	
Other	\$ _____	
	Subtotal	\$ _____
Total Projected Monthly Revenue		\$ _____

I declare under penalty of perjury under the laws of the State of California that all information submitted on this Readiness Plan is true and correct and that I am authorized to sign this Readiness Plan.

Executed at: _____ on _____
City County State Date

Signature: _____ Title: _____

Printed Name: _____ Phone: _____

*Social Security Number: _____ - _____ - _____ CDL/ID: _____