

DEPOT DAILY RECONCILIATION REPORT (BCP6)

Depot Name: _____

Date: _____

Note to depot: Fill out this form at the end of each operating day to summarize the number of empty beverage containers collected and money associated with the containers. You do not need to submit this form to the Department. If you do have a cash register, please attached the cash register daily summary/activity report to this form and keep this in your file for auditing purposes. If you do not have a cash register, please attached the Customer Receipt Forms to this form and keep in your file for auditing purposes.

		Container Material and/or Type	GNWT Code	A	B	C	D	E	F
				Refundable Deposit Per Container	Depot Handling Fee Per Container	Total Quantity Received From Public	Total Refundable Deposit (A x C)	Total Handling Fee (B x C)	Total (D + E)
NON-ALCOHOL BEVERAGES	< 1.0 Litre	Glass	100	\$0.10	\$0.035				
		Aluminum	101	\$0.10	\$0.022				
		Plastic	102	\$0.10	\$0.022				
		Tetra Pak and Drink Pouch	103	\$0.10	\$0.022				
		Gable Top	104	\$0.10	\$0.022				
		Bi-Metal	105	\$0.10	\$0.022				
	≥ 1.0 Litre	Glass	200	\$0.10	\$0.035				
		Aluminum	201	\$0.10	\$0.045				
		Plastic	202	\$0.10	\$0.045				
		Tetra Pak and Drink Pouch	203	\$0.10	\$0.045				
		Gable Top	204	\$0.10	\$0.045				
		Bi-Metal	205	\$0.10	\$0.045				
		Bag-in-a-Box	206	\$0.10	\$0.045				
ALCOHOL BEVERAGES	< 1.0 Litre	Glass - Refillable Bottle	300	\$0.10	\$0.035				
		Glass - Non Refillable Bottle	301	\$0.10	\$0.035				
		Aluminum	302	\$0.10	\$0.022				
		Other Material	303	\$0.10	\$0.022				
	≥ 1.0 Litre	Glass - Other Than Wine or Spirits	400	\$0.10	\$0.035				
		Other Material - Other Than Wine or Spirits	401	\$0.10	\$0.045				
	Any Size	Any Material - Wine or Spirits	500	\$0.25	\$0.035				
TOTAL (SUM OF COLUMNS)									

Prepared by (please print) _____

Signature _____

Title _____

Date (mm/dd/yy) _____