

Do not claim DOT hourly use expenses for any item for which you claim depreciation expenses.

Responsible Unit Name	County	Municipal Code
		<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> — <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>

SCHEDULE I: RECYCLING EQUIPMENT USE

	A Description of equipment used in recycling	B Date of Purchase	C DOT approved hourly rate	D Actual recycling hours of use	E ACTUAL COST OF USING EQUIPMENT FOR RECYCLING
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Line 13: Actual recycling equipment use cost for **2008**:

SCHEDULE II: YARD WASTE EQUIPMENT USE

	A Description of equipment used for yard waste	B Date of Purchase	C DOT approved hourly rate	D Yard waste hours of use	E ACTUAL COST OF USING EQUIPMENT FOR YARD WASTE
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					

Line 26: Actual yard waste equipment use cost for **2008**:

Line 27: **Total Actual Equipment Use Costs:** (Please add line 13 of Schedule I and line 26 of Schedule II. Enter sum on Form 4A, Line 15.)