



# Used Oil Grant Quarterly Progress Report

S.C. Department of Health And Environmental Control  
Office of Solid Waste Reduction and Recycling, 2600 Bull Street, Columbia, SC 29201  
Email: [swgrants@dhec.sc.gov](mailto:swgrants@dhec.sc.gov)

## SECTION A: Grant and Contact Information

Grantee: \_\_\_\_\_ Grant Number: \_\_\_\_\_

Please check one.  July 1 through September 30  October 1 through December 31  
 January 1 through March 31  April 1 through June 30

Is the project complete?  No  Yes If yes, please answer additional questions in Section C.

Name of Person Preparing Report: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Used Oil, Oil/Gasoline Vendor: \_\_\_\_\_

Current Oil Bottle Vendor: \_\_\_\_\_

Current Oil Filter Vendor: \_\_\_\_\_

Provide the total amount of used oil and/or oil/gasoline mixtures recycled and the number of used oil filters and used oil bottles recycled for each quarter using used oil grant funds.

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTALS
Used Oil or Oil/Gasoline Mixtures					
Used Oil Filters					
Used Oil Bottles					

## SECTION B: Project Summary

1. Describe activities and accomplishments that took place on this grant during this reporting period.

\_\_\_\_\_  
\_\_\_\_\_

a. Describe any equipment and supplies installed/purchased and the name and address of the site where it was placed.

\_\_\_\_\_  
\_\_\_\_\_

b. Describe any educational materials developed/purchased. Describe any educational materials (e.g., brochure, video, newspaper ad, billboard) developed/purchased to promote program.

\_\_\_\_\_  
\_\_\_\_\_

c. Describe any other activities that took place during this reporting period. Include workshops and/or conferences attended.

\_\_\_\_\_  
\_\_\_\_\_

2. If no activity occurred during the reporting period, please explain why.

\_\_\_\_\_  
\_\_\_\_\_

3. Describe any problems encountered during this reporting period.

\_\_\_\_\_  
\_\_\_\_\_

4. Provide a quarterly timetable for what you expect to accomplish on this project during the remainder of the grant period.

QUARTER	TIME TABLE
1	
2	
3	
4	

5. At the current level of operation, when do you expect the grant obligations to be fulfilled?

---

---

6. Describe any technical assistance needed.

---

---

---

---

7. List any comments or concerns.

---

---

---

---

**SECTION C: Used Oil Grant Final Report**

8. Provide a detailed account of all activities and accomplishments that occurred while completing this project. Be specific and provide any supporting documentation (e.g., pictures). Attach additional pages if necessary.

---

---

---

---

---

---

9. Explain in detail any activities that were not completed as described in the scope of work. Attach additional pages if necessary.

---

---

---

---

---

---

10. Describe future plans for this project. Will it continue after the grant year is over and what will be the funding source? Be specific. Attach additional pages if necessary.

---

---

---

---

---

---

# Used Oil Quarterly Report Instructions

## SECTION A: Grant and Contact Information

**Grantee:** Provide the name of the local government receiving the grant.

**Grant Number:** Provide the grant number assigned to the grant. Number can be found on the grant agreement.

**Please check one.** Check the box next to the date that reflects the reporting quarter.

**Is the project complete?** Check "No" if the project is not complete. Check "Yes" if the project is complete and then answer additional questions in Section C.

**Name of Person Preparing Report:** Provide the name of person preparing the report.

**Telephone Number and Email Address:** Provide the telephone number and email address of person preparing the report.

**Signature and Date:** The person preparing the report must sign and date the report.

**Used Oil, Oil/Gasoline Vendor:** Provide the name of this vendor.

**Current Oil Bottle Vendor:** Provide the name of this vendor.

**Current Oil Filter Vendor:** Provide the name of this vendor.

**Chart:** Provide information on amount of used oil, mixtures, filters and bottled collected for each quarter.

## SECTION B: Project Summary

The following questions should provide detailed information about the project and what occurred during the reporting quarter.

1. Describe activities and accomplishments that took place on this grant during this reporting period.
  - a. Describe equipment and supplies purchased and where they were installed. Provide name address of sites.
  - b. Describe all public education that was developed or purchased during the reporting period. Provide copies of materials (e.g., brochures, newspaper ad, picture of billboards).
  - c. Describe any other activities that took place during the reporting period, including conferences, workshops and trainings attended.
2. Explain why no activity occurred during the reporting period.
3. Describe problems encountered during the reporting period.
4. Complete the quarterly timetable for what you expect to accomplish during the grant period.
5. State whether the grant will be completed by the end of the grant period.
6. Describe any technical assistance that is needed to complete the grant.
7. List any comments and concerns.

## SECTION C: Used Oil Grant Final Report

Answer questions 8 through 10 if the grant is complete.

8. Provide a detailed account of all grant activities that occurred during the grant period. Be specific and provide any supporting documentation (e.g., pictures).
9. Explain in detail any activities that were not completed as described in the scope of work.
10. Describe future plans for this project. Describe if the project will continue and how it will be funded.