FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* McMANUS JAMES P			Date of Event Requiring Stater Month/Day/Yea	nent	3. Issuer Name and Ticker or Trading Symbol CASELLA WASTE SYSTEMS INC [CWST]						
(Last)	(First)	(Middle)	08/30/2005			tionship of Reporting Pers all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)		
C/O CASELLA WASTE SYSTEMS, INC. 25 GREENS HILL LANE					X	Director Officer (give title below)	10% Own Other (spe below)	- [6	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) RUTLAND	VT	05701							Form filed by More than One Reporting Person		
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				1 =	Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable an Expiration Date (Month/Day/Year)		3. Title and Amount of Secu Underlying Derivative Secu 4)			4. Convei		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares			Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

No securities are beneficially owned.

/s/James P. McManus

09/01/2005

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).