

Massachusetts Department of Environmental Protection

Beverage Container Redemption Center Initial Registration

NOTE: Under 301 CMR 4.06, any person may establish a redemption center and has the right to determine what type, size and brand of beverage containers the facility will accept. The owner or operator of a redemption center is required to notify the Department of Environmental Protection (MassDEP) at least ten (10) business days in advance of commencing operations. The regulation also requires redemption center owner/operators to provide MassDEP with updated information twice per year (by January 1 and July 1).

filling out forms on the computer,	Α.	A. Information About the Facility							
use only the tab key to move your cursor - do not	1.	Business or Organization:							
use the return key.									
tab		Street Address							
		City			State	Zip Code			
		Federal Employer ID # (FEIN) – NOTE: Please do not provide a Social Security Number.							
	2.	Owner:							
		Name							
		Street Address/P.O. Box							
		City			State	Zip Code			
		Telephone Number			Fax Number				
		Email Address							
	3.	Operator (if different than Owner):							
		Name							
		Street Address/P.O. Box							
		City			City	Zip Code			
		Telephone Number			Fax Number				
		Email Address							
	Durfarmation About the Operation								
	B. Information About the Operation								
		itial Date of peration:	(MM/DD/YYYY)	Estimated Average N Containers to be Red	Number of deemed Monthly:	Number			
	S			In the space below, poperation:	provide your redem	nption center's days and hours of			



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B. Information About the Operation (continued)

Indicate the container types accepted at your redemption center:

Brown Glass	🗌 Yes 🗌 No	Tin or Steel Cans	🗌 Yes 🗌 No
Clear Glass	🗌 Yes 🗌 No	#1 Plastic (PETE)	🗌 Yes 🗌 No
Green Glass	🗌 Yes 🗌 No	#2 Plastic (HDPE Clear)	🗌 Yes 🗌 No
Aluminum Cans	🗌 Yes 🗌 No	#2 Plastic (HPDE Colored)	🗌 Yes 🗌 No

MassDEP maintains a list of registered redemption centers on its web site and may also provide people with containers to recycle your redemption center's location, hours and containers accepted. You may opt out of this service by checking the box below.

I do not want information about my redemption center to be posted.

C. Certification Statement

"I attest under that I am fully authorized to submit this registration form on behalf of the facility described herein."

Signature

Printed Name

Title

Date (MM/DD/YYYY)

KEEP A COPY OF THIS COMPLETED FORM FOR YOUR FILES AND MAIL THE ORIGINAL TO:

MassDEP / BWP Consumer Programs Redemption Center Registration One Winter Street, 7th Floor Boston, MA 02108