

## **Massachusetts Department of Environmental Protection** Bureau of Air & Waste **Mercury-Added Lamp Manufacturer Registration** (310 CMR 75.00)

A. Business Information

Registration for Calendar Year

Filing Deadline: Submit this form to MassDEP by March 1 following the calendar year for which you are registering.

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





Manufacturer Name		
Street Address		
City/Town	State	Zip Code
Contact Person Name		
Contact Person Email	Contact Person Telephone	
Federal Employer Identification Number (FEIN/TIN	I) – Please do NO	T provide a Social Security Number.
Mailing Address (if different)		
Street Address/P.O. Box		
City/Town	State	Zip Code
3. Applicability		
Do you manufacture or import directly or dom sold, offered for sale or distribution in Massac		
Yes	□ No	,
If you answered <b>YES</b> , continue to Section C below.	on the next pag lamps in Massa	d <b>NO</b> , skip to Section D Certification Statement e. NOTE: If you sell or distribute mercury-added achusetts in any future year you will be required stration form covering that year's sales.
C. Compliance Method		
Check the appropriate box below and provide intend to comply with the requirements of 310		nation if requested to indicate how you
☐ 1. Develop & Implement a Mercury Lan	np Collection 8	Recycling Plan
Pursuant to 310 CMR 75.04, you agree containment of mercury-added product of-life mercury-added lamps. This plan convenient and accessible for those will distribute. You must submit this plan to	e to submit a plats and/or compo must describe ho purchase and the Massachus	an for the collection, storage (including nents), transportation, and recycling of end- collection and recycling methods that are duse the lamps you manufacture, import, or

year thereafter, you must submit an annual compliance certification to MassDEP.

If you checked Box 1 above, skip to Section D. Certification Statement. Otherwise, complete the rest of Section C. Compliance Method.

Continue to Next Page ▶



## **Massachusetts Department of Environmental Protection**

Bureau of Air & Waste

## Mercury-Added Lamp Manufacturer Registration (310 CMR 75.00)

## C. Compliance Method (continued) ☐ 2. Pay an Annual Registration Fee In lieu of developing and implementing a plan for collection, storage, transportation, and recycling of mercury-added lamps, you agree to pay an annual registration fee - calculated on the basis of mercury-added lamp sales in Massachusetts - to comply with 310 CMR 75.05. If you select this option, you must answer the questions and follow the instructions below. How many mercury-added lamps did your company sell or distribute for sale in Massachusetts in the year covered by the certification? [310 CMR 75.05(5)(b)] Number of Units Are you claiming that the number of units sold or distributed for sale is confidential business information pursuant to 310 CMR 3.00 and/or the state public records act? □ No If you answered YES to Question b., you must submit, in addition to this registration form, a completed confidentiality form that explains the rationale for the confidentiality claim based on the criteria set out in 310 CMR 3.23. You may obtain the confidentiality form at: https://www.mass.gov/media/1410331 Enclose the two forms together in a sealed envelope marked "Mercury-Added Lamp Manufacturer Registration Form Confidential Business Information." Place this sealed envelope inside the envelope used to mail the form. Information asserted to be confidential as well as documents MassDEP creates using that information will be separated from the public files and held as confidential until a public record request is made to review that information, whereupon MassDEP will make a formal confidentiality determination pursuant to 310 CMR 3.00. Regardless of how you answered Question b., complete Section D. Certification Statement below. **D. Certification Statement** I attest under pains and penalties of perjury: Authorized Signature of Responsible Official I. That I have personally examined and am familiar with the information contained in Printed Name this submittal, including any and all documents accompanying this certification Title statement; II. That, based on my inquiry of those Date Signed (MM/DD/YYYY) individuals responsible for obtaining the information, the information contained in **Required Responsible Official:** this submittal is, to the best of my knowledge, true, accurate, and complete; If a Corporation: President Secretary Treasurer III. That I am fully authorized to make this ☐ Vice President ☐ Representative of the above\* attestation on behalf of facility or unit \*Authorized by corporate vote and responsible for overall operation of the facility. IV. I am aware that there are significant penalties, including, but not limited to, If a Partnership: ☐ General Partner possible fines and imprisonment, for submitting false, inaccurate, incomplete or If a Sole Proprietorship: Proprietor misleading information.

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

MassDEP Mercury Products Program 100 Cambridge St., Suite 900 Boston, MA 02114