



**Processor Qualification Program  
Processor Application Form A**

<b>APPLICANT PROCESSOR INFORMATION</b>			
<b>Applicant Company Name:</b>		<b>Phone No.:</b>	<b>Fax No.:</b>
<b>Address:</b>		<b>City:</b>	<b>Province:</b> <b>Postal Code:</b>
<b>Contact Name:</b>	<b>E-Mail:</b>	<b>Company Website:</b>	
<b>Monthly Capacity (Metric Tonnes):</b>			
<b>PROCESS INFORMATION</b>			
Please provide a description of how you process each of the electronic products which are eligible under the Program.			
<b>Materials Processed</b>	<b>How are the materials processed? Describe the process and the materials produced from the process, including processing residues</b>	<b>Destination of the materials produced from processing of the eligible product. List the company and location in this form and describe further processing of the material in Form C Identify disposal location, where applicable, in this form</b>	
<input type="checkbox"/> Televisions – wood console			
<input type="checkbox"/> Televisions (CRT)			
<input type="checkbox"/> Televisions (flat screen)			
<input type="checkbox"/> Rear Projection Televisions			
<input type="checkbox"/> Computer Monitors (CRT)			
<input type="checkbox"/> Computer Monitors (LCD)			
<input type="checkbox"/> CPU/Server			
<input type="checkbox"/> Mice			

Materials Processed	How are the materials processed? Describe the process and the materials produced from the process, including processing residues	Destination of the materials produced from processing of the eligible product. List the company and location in this form , and describe what the company does with the material in Form C Identify disposal location where applicable in this form
<input type="checkbox"/> Keyboards		
<input type="checkbox"/> Cables		
<input type="checkbox"/> Speakers		
<input type="checkbox"/> Laptop Computers		
<input type="checkbox"/> Notebook Computers		
<input type="checkbox"/> Printers		
<input type="checkbox"/> Printer combination machines such as printer/ scanner or printer/fax		

I certify that all of the information contained within this application form is complete and accurate. I understand the information I provide to Electronics Recycling is subject to review and audit. The detailed records which substantiate the information here are available upon request.

I acknowledge that I have read and agree to be bound by the Recycler Qualification Application terms and conditions.

\_\_\_\_\_  
[Name]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Date]

**APPLICANT PROCESSOR INFORMATION**

Applicant Company Name:		Phone No.:	Fax No.:
Address:		City:	Province: Postal Code:
Contact Name:	E-Mail:	Company Website:	
Monthly Capacity (Metric Tonnes):			

**PROCESS INFORMATION**

Where your process produces any of the materials listed below, fill in the details requested.

Materials Generated	How are the materials processed or disposed? Describe how these materials are prepared for market and the market specifications which are required	Material final destination. List company name and location, and fill in details of what the company does with the material in Form C. Identify disposal location where applicable
<input type="checkbox"/> Circuit Board Material		
<input type="checkbox"/> Aluminum		
<input type="checkbox"/> Mixed metals		
<input type="checkbox"/> Copper		
<input type="checkbox"/> CRT Yokes		
<input type="checkbox"/> CRT Tubes (whole)		
<input type="checkbox"/> CRT Glass (crushed)		
<input type="checkbox"/> Mercury Bulbs		
<input type="checkbox"/> Mercury Switches		
<input type="checkbox"/> Transformers		
<input type="checkbox"/> Batteries		

Materials Generated	How are the materials processed or disposed? Describe how these materials are prepared for market and the market specifications which are required	Material final destination. List company name and location, and fill in details of what the company does with the material in Form C. Identify disposal location where applicable
<input type="checkbox"/> Plastics		
<input type="checkbox"/> Wires and Cables		
<input type="checkbox"/> Wood		
<input type="checkbox"/> Unrecyclable Material (Specify)		
<input type="checkbox"/> Other (specify)		
<b>Waste Permits:</b>	<input type="checkbox"/> Copies attached – <i>please list</i> <input type="checkbox"/> N/A - <i>please explain:</i>	
<b>Air Emission Permits:</b>	<input type="checkbox"/> Copies attached – <i>please list:</i> <input type="checkbox"/> N/A - <i>please explain:</i>	
<b>Insurance Coverage:</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i>	
<b>Workers Compensation Coverage:</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>	
<b>COR</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>	
<b>Environmental Management System</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i>	
<b>Legal Infractions, Fines or Charges</b>	<input type="checkbox"/> List incidents: <input type="checkbox"/> N/A - <i>please explain:</i>	

I certify that all of the information contained within this application form is complete and accurate. I understand the information I provide to Electronics Recycling is subject to review and audit. The detailed records which substantiate the information here are available upon request.

I acknowledge that I have read and agree to be bound by the Recycler Qualification Application terms and conditions.

\_\_\_\_\_  
[Name]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Date]



<b>Waste Permits:</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>
<b>Air Emission Permits:</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>
<b>Insurance Coverage:</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>
<b>Workers Compensation Coverage:</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>
<b>Workplace Health and Safety Certification (e.g. COR)</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>
<b>Environmental Management System</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>
<b>Legal Infractions, Fines or Charges</b>	<input type="checkbox"/> Copies attached – <i>please describe:</i> <input type="checkbox"/> N/A - <i>please explain:</i>

**TRANSPORTATION INFORMATION**

Please indicate all the companies used to transport materials to your facility from the applicant processor.  
Please attach copies of certificates of insurance. If the company is used to transport hazardous waste, please attach copies of transportation permits.

<i>Company Name:</i>	<i>Contact Name:</i>	<i>Phone:</i>	<i>Transport Hazardous Waste?</i>
			<input type="checkbox"/> No <input type="checkbox"/> Yes-attach permits
			<input type="checkbox"/> No <input type="checkbox"/> Yes-attach permits
			<input type="checkbox"/> No <input type="checkbox"/> Yes-attach permits
			<input type="checkbox"/> No <input type="checkbox"/> Yes-attach permits

I certify that all of the information contained within this application form is complete and accurate. I understand the information I provide to Electronics Recycling is subject to review and audit. The detailed records which substantiate the information here are available upon request.

I acknowledge that I have read and agree to be bound by the Recycler Qualification Application terms and conditions.

\_\_\_\_\_  
[Print Name]

\_\_\_\_\_  
[Signature] Applicant

\_\_\_\_\_  
[Date]

\_\_\_\_\_  
[Print Name]

\_\_\_\_\_  
[Signature] Downstream Processor

\_\_\_\_\_  
[Date]