

WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION

REAP PROGRAM
601 57th Street, S.E.
Charleston, WV 25304

West Virginia Electronic Manufacturer Registration Form

For Program Year 2021

(due January 1, 2021)

Registration applies to a manufacturer that manufactured an average of more than 1,000 covered electronic devices (CED) per year in the immediately preceding 3-year period.

Manufacturer means a person that is the brand owner of the CED brand sold or offered for sale in the state, by any means, including transactions conducted through sales outlets, catalogs, or the internet.

Covered Electronic Device means a computer, television, or other video display device (VDD) with a screen that is greater than 4 inches measured diagonally.

For more detail, contact the REAP Office Programs Supervisor at the West Virginia Department of Environmental Protection (WVDEP) at REAPCEDInfo@wv.gov or 1-800-322-5530.

MANUFACTURER INFORMATION

COMPANY NAME:	REG. NO. (if renewal):
CONTACT NAME:	TITLE:
PHONE NUMBER:	FAX NUMBER:
EMAIL ADDRESS:	WEB ADDRESS:
COUNTRY (if outside the U.S):	
STREET ADDRESS:	CITY:
STATE or PRINCIPLE SUBDIVISION:	POSTAL (ZIP) CODE:

BILLING ADDRESS (if different than mailing address)

COUNTRY (if outside the U.S):	
STREET ADDRESS:	CITY:
STATE or PRINCIPLE SUBDIVISION:	POSTAL (ZIP) CODE:

RESIDENT AGENT or AUTHORIZED AGENT in U.S. (if applicable)

COMPANY NAME:		
CONTACT NAME:	TITLE:	
PHONE NUMBER:	FAX NUMBER:	
EMAIL:	WEB ADDRESS:	
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:

REGISTRATION INFORMATION

1. Date of application: _____
2. Describe the type of registration:
Does not have approved takeback program: RENEWAL (\$5,000) NEW (\$10,000)
Does have an approved takeback program: RENEWAL (\$500) NEW (\$3,000)
3. Manufacturer's brand name & types (Ex: TV, Laptop): _____

WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION

COMPANY NAME: _____

REG. NO.: (if renewal) _____

CED INFORMATION

1. Provide the number of CEDs Manufactured in the previous 3 calendar years.

Year 1: _____ Year 2: _____ Year 3: _____

2. Do you offer a WVDEP approved CED takeback program? YES NO

3. If so, describe the takeback program (include attachments if necessary):

Implementation Date: _____

Takeback Toll-free Number: _____

Takeback Website Address: _____

SIGNATURES

I certify, to the best of my knowledge, that the information provided on this form is accurate and complete and based on the actual records maintained by this company. The records will be made available to the West Virginia Department of Environmental Protection for auditing purposes, if requested.

Signature: _____ Title: _____ Date: _____

Make checks payable to: WVDEP - REAP Program
Mail to: West Virginia Department of Environmental Protection
Attn: REAP Program
601 57th Street, S.E.
Charleston, WV 25304

FOR STATE USE ONLY

Date Received:

Reg. for Calendar Year: _____

Last Reg. Year: _____

Check No.: _____

Amount of Fee Included: _____

3-Year CED Manufactured Average: _____

Application Complete? Yes No

Takeback Program Adequately Described? Yes No

Implementation Report Included? Yes No

Additional Information Needed:

Reg. Number: _____

Reviewer Initials: _____

Notes: