

WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

Covered Electronic Device Manufacturer Annual Report Form

Due February 15th of the following year.

Reporting Period: **January 1, 2021**

To: **December 31, 2021**

Manufacturer Information	
Company Name:	
Contact Name:	Title:
Phone Number:	
Email:	
Company Web Address:	
Street Address:	
City:	State or Principal Subdivision:
Postal (Zip) Code:	Country (if outside U.S.):

Alternate Contact	
Contact Name:	Title:
Phone Number:	
Email:	

Authorized Representative in U.S. (if applicable)		
Company Name:		
Contact Name:	Title:	
Phone Number:		
Email:		
Company Web Address:		
Street Address:		
City:	State:	Zipcode:

COLLECTION INFORMATION		LBS	Units
A	Total weight or units of CEDs recovered in West Virginia by your program:		
B	Of the total amount recovered from West Virginia, how many CEDs were recycled or refurbished and reused?		
C	If reporting the number of units, how was this calculated? _____ Actual Count _____ Average Product Weights		

Provide a detailed description of the processes and methods used to collect, recycle, refurbish and reuse the CEDs received from WV. You may provide additional attachments if needed.

If the manufacturer plans to make significant changes to their program in 2022, please describe those changes. You may provide additional attachments if needed.

Signature of Manufacturer Representative

Print Name

Date