

## **Interest Form**

## Household Hazardous Waste Programs To Be a PaintCare Partner for Paint Collection

Use this form to let us know that your program is interested in becoming a PaintCare drop-off site. PaintCare has published fact sheets for each state where we have a paint stewardship program to explain details about working with PaintCare to become a paint drop-off site. Please visit www.paintcare.org or call (855) 724-6809 to request a state-specific fact sheet.

Note: This form is designed in Word using tables. If you are using the electronic version, just start typing. The boxes will expand to fit.

SPONSOR	Municipality		
31 ONSON	Street Address		
City/State/Zip			
Mail Address			
	Mail Address		
CONTACT 1	Name		
	Title		
	Phone		
	Email		
CONTACT 2	Name		
	Title		
	Phone		
	Email		
SITE TYPE		☐ HHW Facility	☐ HHW Events - How many events per year?
		,	= 11.1.1 Evente view many evente per year.
STORAGE SPACE		How many cubic y	vard bins do you have space to store?
		(Each bin uses the	floor space of a pallet, 3'x3')
PROGRAM DESC	RIPTION		
			n such as the months/days/hours that your HHW facility is open,
the towns that may	utilize your progra	m, when and wher	e you hold temporary HHW event, etc.
PROGRAM OPER	RATIONS		
Do you currently ser	vice businesses?	☐ YES ☐ NO	Are you interested in serving businesses? $\ \square$ YES $\ \square$ NO
Do you currently accept latex? $\ \square$ YES $\ \square$ NO			Are you interested in accepting latex? $\ \square$ YES $\ \square$ NO
How do you currentl	ly manage paint?	☐ BULK PAINT [	□ LOOSE PACK PAINT
Who is your current transportation service provider?			
SEND COMPLETE	ED FORM TO	info@paint.org (855) 385-2020 Fa	IX

PaintCare, 901 New York Avenue NW, Washington DC 20001