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.

<table>
<thead>
<tr>
<th>SPONSOR</th>
<th>Municipality</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Street Address</td>
</tr>
<tr>
<td></td>
<td>City/State/Zip</td>
</tr>
<tr>
<td></td>
<td>Mail Address</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTACT 1</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Title</td>
</tr>
<tr>
<td></td>
<td>Phone</td>
</tr>
<tr>
<td></td>
<td>Email</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTACT 2</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Title</td>
</tr>
<tr>
<td></td>
<td>Phone</td>
</tr>
<tr>
<td></td>
<td>Email</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>SITE TYPE</th>
<th>☐ HHW Facility</th>
<th>☐ HHW Events - How many events per year?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

| STORAGE SPACE | How many cubic yard bins do you have space to store? (Each bin uses the floor space of a pallet, 3’x3’)| |
|---------------|----------------------------------------------------------------------------------------------------|
|               |                                                                                                   |

<table>
<thead>
<tr>
<th>PROGRAM DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please provide additional information about your program such as the months/days/hours that your HHW facility is open, the towns that may utilize your program, when and where you hold temporary HHW event, etc.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PROGRAM OPERATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you currently service businesses? ☐ YES ☐ NO</td>
</tr>
<tr>
<td>Do you currently accept latex? ☐ YES ☐ NO</td>
</tr>
<tr>
<td>How do you currently manage paint? ☐ BULK PAINT ☐ LOOSE PACK PAINT</td>
</tr>
<tr>
<td>Who is your current transportation service provider?</td>
</tr>
</tbody>
</table>

SEND COMPLETED FORM TO info@paint.org
(855) 385-2020 Fax
PaintCare, 901 New York Avenue NW, Washington DC 20001