



State of California - Department of Resources Recycling and Recovery (CalRecycle)

Division of Recycling

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CalRecycle 910-PMD2  
(Rev. 02/2018)

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## Plastic Market Development Payment Claim Form

Application for Calendar Quarter (check one): ☐ 1<sup>st</sup> ☐ 2<sup>nd</sup> ☐ 3<sup>rd</sup> ☐ 4<sup>th</sup> Year:

Certification/Identification Number:

Facility Name:

Mailing Address:

Contact Person:

Telephone Number:

Type of Material: ☐ Flake ☐ Pellet ☐ Other:

Weight of Material Shipped (Tenth of Tons, include decimal point)

#1 PET:

#2 HDPE:

#3 PVC:

#4 LDPE:

#5 PP:

#6 PS:

#7 Other:

(check one) ☐ As a certified entity, I certify under penalty of perjury that the plastic materials herein were sold to a California product manufacturer.

☐ As a California product manufacturer, I certify under penalty of perjury that the plastic product(s) identified below was made in California from plastic purchased from a certified entity in California:

*I certify under penalty of perjury that the facts presented herein are true and correct to the best of my knowledge*

Signature and Title of Authorized Representative:

Date: