



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

801 K Street, MS 17-24 • Sacramento, California 95814

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CalRecycle 910-PMD2
(Rev. 2/18)

Plastic Market Development Payment Claim Form

Application for Calendar Quarter (check one): [] 1st [] 2nd [] 3rd [] 4th 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: