

### Proof of Designation

*Must be received by CalRecycle 30 days in advance of any designated collection activity.*

#### I. Designation Participants Information

Designating Local Government:	
Designated Approved Collector:	CEWID#:

#### II. Designation Collection Activity Details

Designation Beginning Date:	Designation End Date:
Geographic Area of Service:	
Specific Site(s) for Permanent Drop-off Services: Specific Address(es) of Permanent Drop-off Services: <input type="checkbox"/> Check if attachment(s) are provided.	
Method and Description of Collection Activities (check all boxes that apply): <input type="checkbox"/> Permanent Drop-off <input type="checkbox"/> Curbside Service <input type="checkbox"/> Illegal Disposal Clean-up <input type="checkbox"/> Temporary Special Events <input type="checkbox"/> Other (specify):	
Description of Authorized Collection(s):	

#### III. Signed Certification Statements

Name of Designating Authority Representative:	
Title:	
Phone:	E-Mail:
Mailing address:	
As required under Title 14 CCR § 18660.49(b)(6): I am a designating authority authorized to execute agreements or contracts related to waste management on behalf of the Local Government. I have read and understand all applicable laws and regulations governing the Electronic Waste Recovery and Recycling Program. I agree that the Local Government shall operate in compliance with those applicable laws and regulations. I certify that the Proof of Designation contains true and correct information to the best of the designating authority's knowledge.	
Signature:	Date Signed:

Name of Local Government Point of Contact <i>(if different from above)</i> :	
Title:	
Phone:	E-Mail:
Mailing address:	

Name of Authorized Collector Signatory:	
Title:	
Phone:	E-Mail:
Mailing address:	
As required under Title 14 CCR § 18660.49(b)(9): I am an authorized signatory listed in the application for approval, and agrees to operate in compliance with the requirements of the Electronic Waste Recovery and Recycling Program and all applicable laws and regulations.	
Signature:	Date Signed:

#### FOR CALRECYCLE USE ONLY

Transmitted by	Mail Received by	Date Transmitted	Date Eligible for Use
<input type="checkbox"/> Mail <input type="checkbox"/> Electronic Mail			