

**Application for Approval: Covered Electronic Waste Recycler**

Entities seeking to participate in California's Covered Electronic Waste (CEW) Recycling Program (Program) as approved CEW recyclers must submit this application form pursuant to Title 14 California Code of Regulations (CCR) sections 18660.11 and 18660.13. Applicants must comply with the applicable Title 22 CCR sections enforced by the Department of Toxic Substances Control (DTSC) in Section VI, below, prior to approval.

This form is best viewed and completed using a portable document format (PDF) reader. Complete the form fields and signature block below using the fillable PDF features or print and sign legibly in permanent ink. Complete, signed application forms and any supporting documentation must be emailed to [ewasteapplications@calrecycle.ca.gov](mailto:ewasteapplications@calrecycle.ca.gov). Beginning April 1, 2026, applications and any supporting documentation shall be submitted to CalRecycle using its designated electronic information submittal system, pursuant to 14 CCR section 18660.7(e).

CalRecycle will review applications pursuant to the requirements set forth in 14 CCR section 18660.15. Approval terms are specified in 14 CCR section 18660.16. Approved recyclers seeking to submit changes to information contained in an approved application shall comply with the requirements set forth in 14 CCR section 18660.18. Participants must comply with the requirements in 14 CCR section 18660.21 once the application has been approved.

**I. Applicant Information**

Organization Name: _____	
<input type="checkbox"/> New Applicant <u>or</u>	
<input type="checkbox"/> Application from previously approved participant (CEWID number: _____)	
Check appropriate box:	<input type="checkbox"/> Information update prior to renewal (see 14 CCR section 18660.18)
	<input type="checkbox"/> Biennial Renewal (due every two years)
	<input type="checkbox"/> Reapply (after expiration/denial/revocation)

**II. Organization Details**

Type	Indicate Supporting Documentation Attached to Application
<input type="checkbox"/> Individual Doing or Proposing to Do Business Under a Different Name	<input type="checkbox"/> A copy of any fictitious business name statement being used
<input type="checkbox"/> Partnership	<input type="checkbox"/> Current partnership agreement <input type="checkbox"/> A copy of any fictitious business name statement being used
<input type="checkbox"/> California Corporation	<input type="checkbox"/> Corporate number assigned by the California Secretary of State (SoS) <input type="checkbox"/> Articles of Incorporation as filed with the SoS <input type="checkbox"/> Name and position of all current corporate officers and directors as filed with the SoS <input type="checkbox"/> A copy of any fictitious business name statement being used <input type="checkbox"/> Agent for service of process as filed with the SoS
<input type="checkbox"/> Corporation from a State Other Than California	<input type="checkbox"/> Approved certificate from the SoS qualifying and authorizing the corporation to transact business in California
<input type="checkbox"/> Co-ownership	<input type="checkbox"/> A copy of any fictitious business name statement being used <input type="checkbox"/> Provide all owner names:

Type	Indicate Supporting Documentation Attached to Application
<input type="checkbox"/> Local Government Agency	<input type="checkbox"/> A copy of the authorizing resolution from the governing board
<input type="checkbox"/> California Limited Liability Company (LLC)	<input type="checkbox"/> Articles of Organization as filed with the SoS <input type="checkbox"/> Statement of Information as filed with the SoS <input type="checkbox"/> The name of the current managing member(s) and any operating agreement in effect <input type="checkbox"/> Agent for service of process as filed with the SoS <input type="checkbox"/> A copy of any fictitious business name statement being used
<input type="checkbox"/> Limited Liability Company from a State Other than California (LLC)	<input type="checkbox"/> Certificate from the SoS authorizing the LLC to transact business in California
<input type="checkbox"/> Non-profit or Charity	<input type="checkbox"/> Description of Organization <input type="checkbox"/> A copy of the appropriate designation documentation, which may include information from the Federal Internal Revenue Service or the State of California Franchise Tax Board confirming tax exempt status

### III. Addresses

Type	Address	City	State	Zip
Physical Location				
Mailing				
Operational Records				

### IV. Website, Phone Number, and Public Directory

Website: \_\_\_\_\_ Main Phone Number: \_\_\_\_\_

All approved Program participants are listed in the [Directory of Approved Collectors and Recyclers of CEW](#) to facilitate CEW transactions. CalRecycle hosts another directory for the general public to [locate e-waste drop-off locations](#). Please indicate your preference for inclusion in the public directory:

☐ Yes, include us in the public directory, **or**  
☐ No, do not include us in the public directory.

## V. Authorized Signatories

Authorized Signatory means the person(s) who has authority to legally bind a person, collector, recycler, dual entity, local government, or manufacturer to a contract, pursuant to 14 CCR section 18660.5(a)(5). After each entry below, indicate what documents that contact is authorized to sign, as applicable. Attach additional sheets if necessary. At least one Authorized Signatory must be designated as the main contact to communicate with CalRecycle, pursuant to 14 CCR section 18660.11(b)(4).

<b>1-Name:</b>	<input type="checkbox"/> Main Contact
E-mail address:	Phone Number (ext):
Authorized to sign: <input type="checkbox"/> Payment Claims <input type="checkbox"/> Net Cost Reports <input type="checkbox"/> Other payment related documents and correspondence	
<b>2-Name:</b>	<input type="checkbox"/> Main Contact
E-mail address:	Phone Number (ext):
Authorized to sign: <input type="checkbox"/> Payment Claims <input type="checkbox"/> Net Cost Reports <input type="checkbox"/> Other payment related documents and correspondence	
<b>3-Name:</b>	<input type="checkbox"/> Main Contact
E-mail address:	Phone Number (ext):
Authorized to sign: <input type="checkbox"/> Payment Claims <input type="checkbox"/> Net Cost Reports <input type="checkbox"/> Other payment related documents and correspondence	
<b>4-Name:</b>	<input type="checkbox"/> Main Contact
E-mail address:	Phone Number (ext):
Authorized to sign: <input type="checkbox"/> Payment Claims <input type="checkbox"/> Net Cost Reports <input type="checkbox"/> Other payment related documents and correspondence	
<b>5-Name:</b>	<input type="checkbox"/> Main Contact
E-mail address:	Phone Number (ext):
Authorized to sign: <input type="checkbox"/> Payment Claims <input type="checkbox"/> Net Cost Reports <input type="checkbox"/> Other payment related documents and correspondence	
<b>6-Name:</b>	<input type="checkbox"/> Main Contact
E-mail address:	Phone Number (ext):
Authorized to sign: <input type="checkbox"/> Payment Claims <input type="checkbox"/> Net Cost Reports <input type="checkbox"/> Other payment related documents and correspondence	

## VI. DTSC Notification of Intent (NOI) and Inspection Requirements

Universal waste handlers must notify DTSC of their intent to handle electronic devices, including CEW, and report on those activities annually to be authorized to receive material. (See Chapter 23 of Title 22 CCR). Information on notifications may be viewed on [DTSC's website](#). CEW recycler applicants seeking to participate in the Program must provide proof of DTSC inspection or inspection request pursuant to 14 CCR section 18660.13(a)(3)(B)(1). DTSC may be contacted for assistance at [electronicwaste@dtsc.ca.gov](mailto:electronicwaste@dtsc.ca.gov). Compliance with all applicable DTSC regulations is the sole responsibility of the applicant. Failure to comply with DTSC requirements will result in application denial.

Business Name\*: \_\_\_\_\_  
Notice of Intent (NOI) Date: \_\_\_\_\_  
*\*Provide business name as it appears in the DTSC NOI.*

Dates	DTSC Requirements
NOI Date:	<input type="checkbox"/> Applicant notified DTSC 30 days prior to accepting CEW
Inspection Date (or date of request):	<input type="checkbox"/> Copy of inspection report provided by DTSC dated within the past 12 months attached; <b>or</b> <input type="checkbox"/> Copy of request for inspection sent to DTSC, attached. (CalRecycle will review the remainder of the application and withhold approval until the DTSC inspection is completed and the facility found to be in conformance.)

## VII. CDFA Weighmaster Requirements

Pursuant to 14 CCR section 18660.21(k)(1), CEW recyclers must be equipped with scales and be a licensed weighmaster in accordance with Chapter 7 (commencing with Section 12700) of Division 5 of the Business and Professions Code to participate in the Program. Visit the California Department of Food and Agriculture's (CDFA) [Division of Measurement Standards Weighmaster E-Waste Program](#) webpage for more information.

Date	CDFA Requirement
Date Issued:	<input type="checkbox"/> Copy of Weighmaster license issued by CDFA's Division of Measurement Standards attached.

## VIII. Certification Requirements

The applicant shall initial below to indicate the facility at the NOI address meets the following standards pursuant to 14 CCR section 18660.13(a)(3).

Initial	Certification Requirements
	Applicant is in compliance with DTSC's minimum standards for managing hazardous and universal waste set forth in Chapters 12, 14, 15, 16, 20, 22, and 23 of Division 4.5 of Title 22 of the California Code of Regulations.
	The facility is accessible during normal business hours for unannounced inspections by state or local agencies.
	The facility has, and certifies compliance with, a health and safety plan.

Initial	Certification Requirements
	The facility has, and certifies compliance with, an employee training plan.
	The facility has, and certifies compliance with, an environmental compliance plan.
	The facility meets or exceeds the standards specified in Chapter 1 (commencing with Section 1171) of Part 4 of Division 2, Division 4 (commencing with Section 3200), and Division 5 (commencing with Section 6300) of the Labor Code.

## IX. Recycling Activities

Cancellation is defined in 14 CCR Section 18660.32. It refers to a processing or treatment method that dismantles or destroys the original CEW and results in treatment residuals, which qualifies CEW for recycling payments and removes the CEW from the payment system, eliminating the possibility of double payments.

**CEW Recycling Methods** (14 CCR Section 18660.32(c)) used (or intended to be used)

<input type="checkbox"/> CRT or CRT-containing CEW cancellation through dismantling to a bare CRT after relieving the vacuum.
<input type="checkbox"/> Non-CRT-containing CEW cancellation through dismantling to a bare panel.
<input type="checkbox"/> Battery-embedded CEW cancellation.
<input type="checkbox"/> Alternative cancellation method approved by CalRecycle per 14 CCR Section 18660.32, and the date the alternate cancellation method was approved:

**Type(s) of CEW that may be cancelled** (check all that apply)

<input type="checkbox"/> CRT-Containing CEW
<input type="checkbox"/> Non-CRT-Containing CEW
<input type="checkbox"/> Battery-embedded product CEW and anticipated cancellation start date: [Note that battery-embedded CEW is not eligible for combined recovery and recycling payments unless it is collected and cancelled after January 1, 2026, pursuant to PRC section 42478(b)(2)]

## Other Recycling Activities

Describe the source(s) of CEW.
Estimated percentages of cancelled CEW expected to originate from inside of the State of California annually:        %.
Estimated percentages of cancelled CEW expected to originate from outside of the State of California annually:        %.

## X. Collector Transactions

A recycler not applying as a dual entity via CalRecycle Form 186D must provide information for at least one approved collector from which the recycler has accepted, has contracted to accept, or intends to contract to accept CEW for cancellation.

Collector Name:
Physical Address:
Contact Name:
Phone Number:
<input type="checkbox"/> Letter from an approved collector certifying under penalty of perjury that California CEW from that collector will be transferred to the recycler for recycling, attached.

## **XI. Payee Data Record**

A completed Payee Data Record (STD 204) is required when receiving payment from the State of California. This form is required as part of a recycler's application for approval to participate in the Program.

☐ [Payee Data Record \(STD 204\)](#) with a signature from an Authorized Signatory listed in Section IV, attached.

## **XII. Recycler Certification Statements and Authorized Signatory's Signature**

The undersigned recycler agrees under penalty of perjury and of immediate revocation of approval and denial of recycling payments, that as an approved recycler:

- I shall fully reimburse an approved collector for all CEWs transferred at the rate specified in this Chapter [14 CCR section 18660.33] within 90 days.
- Notwithstanding the allowances contained in Section 18660.6(d) of this Chapter, I shall not adjust fees, charges or other contract provisions upward for the purpose of negating the recovery payment to approved collectors.
- I shall provide free CEW recycling by accepting without charge CEWs from approved collectors if the payment from CalRecycle fully covers the net cost of the CEW recycling.
- I shall operate in compliance with the requirements of this Chapter [14 CCR, Division 7, Chapter 8.2], the Act [PRC sections 42460 through 42486], and with all applicable local, state and federal regulatory provisions.
- I have read and understand the requirements set forth in the statutes and regulations governing this program.

The undersigned certifies under penalty of perjury under the laws of the State of California that the information provided herein is true and correct and that the undersigned has the authority to legally bind the recycler to the terms and requirements of the application.

Authorized Signatory's Printed Name:

Authorized Signatory's Signature:

Date Signed:

Location Where Application Signed:

## **Program Contact Information**

Questions regarding Program applications may be directed to CalRecycle staff:

Email: [ewasteapplications@calrecycle.ca.gov](mailto:ewasteapplications@calrecycle.ca.gov)

Phone: (916) 341-6269

Additional information is available on CalRecycle's [CEW Recycling Program webpage](#).