



Mail to: DIVISION OF RECYCLING/CERTIFICATION UNIT
1001 I Street, MS 9A, Sacramento, CA 95814
(916) 324-8598

OFFICE USE ONLY

Reg ID _____

Case ID _____

www.calrecycle.ca.gov

State of California

DOR 908 (Rev 8/24)

State of California

Gavin Newsom, Governor

Department of Resources Recycling and Recovery (CalRecycle)

Certification Application

Dropoff or Collection & Community Service Programs

- Please type or print neatly in **blue** ink.
- Submit a separate application for each location or category.
- Write N/A for any item(s) that are not applicable.
- Please do not use staples. Use paperclips if needed.

SECTION 1 – OPERATOR INFORMATION

Business Name is the name that will appear on the certificate and is the actual name under which the organization will be paid.

Business Address is the address at which the records will be stored

Contact Person Name

First

Middle

Last

Title

Business/Organization Name

Doing Business As (DBA) Name
(attach Fictitious Business Name Statement)

Business Street Address (see definition above; no PO Boxes)

Suite/Apt

City

County

State

Zip

Organization's Mailing Address

Suite/Apt

City

County

State

Zip

Phone

Email Address

Primary Language (optional)

()

Business Taxpayer ID: _____

Required for all applications. *Note: Only sole proprietors or spousal partnerships without employees may use a social security number as their Taxpayer ID number.*

SECTION 2 - TYPE OF ORGANIZATION

(Check Only **ONE** Box)

For Profit

☐ Sole Proprietor

☐ Married Couple Co-Ownership

Spouses' Names

☐ Partnership

Submit a copy of partnership agreement

____ General

____ Limited

☐ California Corporation

For all corporations*: Attach the Articles of Incorporation and a current list of corporate officer.

Corporate Number: _____

Agent for Service of Process: _____

☐ Corporation not Formed in California

***Also attach** a certification from the Secretary of State authorizing the corporation to transact business in California.

☐ California Limited Liability Company (LLC)

For all LLCs*: Attach the Articles of Organization, Statement of Information, and Operating Agreement.

Agent for Service of Process: _____

☐ LLC not Formed in California

***Also attach** a certification from the Secretary of State authorizing the company to transact business in California.

Not For Profit

☐ Nonprofit or Charity

Attach description of organization and copy of letter from Internal Revenue Service for the California Franchise Tax Board confirming tax-exempt status. Non-profit corporations must additionally provide the attachments required for corporations listed above.

☐ Local Government Agency

____ City ____ County ____ City & County ____ School ____ State

____ Other _____

Attach board resolution authorizing application.

☐ Federal Government

____ Military ____ National Park ____ Other _____

Attach board resolution authorizing application.

SECTION 3 – ORGANIZATION HISTORY

For all questions – attach additional pages, if needed.

1. Are you or this program **currently certified** by CalRecycle, Division of Recycling, in any category? ☐ Yes ☐ No

If YES, name(s) of individuals and certification number(s).

2. Were you or this program **previously certified** by CalRecycle, Division of Recycling, in any category? ☐ Yes ☐ No

If YES, name(s) of individuals and certification number(s).

3. Do you or this program have other applications **pending** with CalRecycle, Division of Recycling, in any category? ☐ Yes ☐ No

If YES, name(s) of individuals and case number(s).

4. Have you or this program ever been **denied** certification by CalRecycle, Division of Recycling, in any category? ☐ Yes ☐ No

If YES, name(s) of individuals and case number(s).

SECTION 4 – PROGRAM DESCRIPTION

1. Program Name: _____

2. What types of empty beverage containers do you collect or accept?
- | | | | |
|---|--|----------------------------------|--------------------------------|
| ☐ Aluminum | ☐ Bag-in-Box | ☐ Bimetal | ☐ Glass |
| ☐ Multilayer Pouch | ☐ Paperboard Carton | ☐ Plastic | |

3. Are you applying as a Neighborhood Dropoff Program? ☐ Yes ☐ No

If YES, submit a copy of a letter of authorization from city, county, or city and county specifying the dropoff locations, and a regional map outlining the geographical area served.

List the address of the dropoff location(s) served under the neighborhood dropoff program.

4. Do you have an established (or regular) route you follow to collect empty beverage containers? ☐ Yes ☐ No

5. Do you have a regular schedule for collecting empty beverage containers? ☐ Yes ☐ No

SECTION 4 – PROGRAM DESCRIPTION (CONTINUED)

6. Do you collect empty beverage containers directly from bars, restaurants, hotels, and motels? ☐ Yes ☐ No

If YES, list the name, address, phone and contact person for three of any of the following: bars, restaurants, hotels, and motels where you collect.

7. Do you collect empty beverage containers directly from office buildings, industrial/commercial buildings? ☐ Yes ☐ No

If YES, list the name, address, phone and contact person for three of any of the following: office buildings, industrial/commercial buildings where you collect.

8. Where else do you collect empty beverage containers?

- | | | |
|---|---|---|
| ☐ Streets/Alleys | ☐ Apartment Complexes | ☐ Parks/Recreation Areas |
| ☐ Parking Lots | ☐ Residential Garbage | ☐ Transfer Station |
| ☐ Special Events | ☐ Landfill Disposal Site | ☐ Material Recovery Facility (MRF) |
| ☐ Bag Drop | ☐ Reverse Vending Machines (RVM) | |
| ☐ Other (explain): _____ | | |

9. Do you have donation bins at specific locations? ☐ Yes ☐ No

If YES: How many bins?: _____

Where are your donation locations? (e.g., school, parking lot, church, specific address, etc.)

10. Do you collect empty beverage containers at residential curbside under contract or by written acknowledgment by a local government agency? ☐ Yes ☐ No

11. Do you separate beverage containers from mixed municipal waste under permit by a local government agency? ☐ Yes ☐ No

If YES, attach a copy of your current permit or formal acknowledgment of operation from the local government agency.

12. Do you operate a dropoff or collection program located on federal land? ☐ Yes ☐ No

If YES: ☐ National Park ☐ Military Installation ☐ Other Federal Property

Submit authorization for State Inspectors to enter property.

13. Do you pay refund value for the empty beverage containers? ☐ Yes ☐ No

14. Do you pay scrap value for the empty beverage containers? ☐ Yes ☐ No

15. Do you accept/collect containers only in California? ☐ Yes ☐ No

SECTION 5 – DECLARATION AND SIGNATURES

- a. I agree to operate my program in compliance with the California Beverage Container Recycling and Litter Reduction Act, including all relevant regulations contained in Chapter 5 of Division 2 of Title 14 of the California Code of Regulations.
- b. I declare under penalty of perjury under the laws of the State of California that all information on this application and supporting documents is true and correct and that I am authorized to sign this application.

Who must sign affidavit: For Sole Proprietorships: the applicant/owner; Partnerships: each partner; Married Couple & Co-Ownerships: both married couple and co-owners; Corporations, Limited Liability Companies, Government or Public Agencies: persons with authority to legally bind said entity to a contract (e.g., executive officer, managing member).

Attach Additional Sheet(s) if Necessary

Execute at: City	County	State	Date
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Signature	Title
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First Name	Middle Name	Last Name	Suffix
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Residence Address	Suite/Apt
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City	County	State	Zip
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CA Driver License/ID Number	License Plate Number	SSN**
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**** Providing the Social Security Number is voluntary in accordance with the Privacy Act of 1974 (PL 93-579). This information is used for applicant identification purposes. Authority: California Beverage Container recycling and Litter Reduction Act (Public Resources Code Section 14500 et seq.)**

SECTION 6 – INFORMATION ONLY

What other recyclable material(s) do you collect or accept?

- | | | | |
|---|--|---|---|
| ☐ Auto Batteries | ☐ Cardboard | ☐ Computer Paper | ☐ Construction/Demolition |
| ☐ Copper | ☐ Iron | ☐ Magazines | ☐ Mixed Paper |
| ☐ Newsprint | ☐ Oil | ☐ Oil Filters | ☐ Other Aluminum |
| ☐ Other Glass | ☐ Other Plastic | ☐ Scrap Metal | ☐ Steel |
| ☐ Styrofoam | ☐ Telephone Books | ☐ Tin Cans | ☐ Tires |
| ☐ Toner Cartridges | ☐ Used Oil | ☐ White Paper | ☐ Wood ☐ Yard Waste |
| ☐ Other (explain): _____ | | | |