

APPLICATION FOR CERTIFICATION OF A VERMONT REDEMPTION CENTER

*ALL FIELDS OF THIS FORM MUST BE COMPLETED IN ORDER TO BE ACCEPTED FOR REVIEW

Name of Redemption Center:		
Physical Location of Redemption Center:		
Mailing Address:		
Contact Name:	Telephone Number:	
Email:		
Taxpayer ID#: (required	to redeem liquor bottles)	
Is this a change of ownership from a previously certified redemption center? \Box Yes \Box No		
If "Yes", Name of Redemption Center:		
Are you a retailer? □Yes □No Are you a stand-a	alone redemption center? \Box Yes \Box No	
Are you a Vermont liquor store/outlet? Yes No		
Estimated Number of Containers Redeemed on an Annual Basis:		
The information contained in this application is complete and true to the best of my knowledge. I agree to participate in approved commingling agreements upon request.		

Printed Name of Applicant

Signature of Applicant

Date of Signature

Send This Completed Form & Direct Questions To:

Rebecca Webber, Vermont's Beverage Container Law Administrator, <u>rebecca.webber@vermont.gov</u>, (802) 522-3658 Or, by mail, to: Waste Management & Prevention Division, 1 National Life Drive - Davis 1, Montpelier, VT 05620-3704

Notice to the public of the establishment of this redemption center shall be posted on the agency website for not less than 15 days.