

## Extended Producer Responsibility Registration Form –Waste Paint

### 1. Brand Owner Registration Information

Brand Owner:	
Name of Applicant (if different from the Brand Owner listed above):	
Mailing Address:	
Contact Person :	
Title of Contact Person:	
Telephone:	
Fax :	
E-Mail Address:	

### 2. Appointment of an Agent

Yes, I wish to appoint and agent to act on behalf of the brand owner listed in Section 1.  
(Proceed to section 3.).

No, I do not wish to appoint an agent to act on my behalf of the brand owner listed in Section 1.  
(Proceed to Section 5.).

### 3. Agent Information

Agent Name	Product Care Association
Mailing Address:	105 West 3 <sup>rd</sup> Ave, Vancouver BC, V5Y 1E6 Canada
Contact Person :	Mark Kurschner
Title of Contact Person:	President
Telephone#:	1.877.592.2972
Fax #:	Fax: (604) 592-2982
E-Mail Address:	<a href="mailto:nlpaintrecycle@productcare.org">nlpaintrecycle@productcare.org</a>

**4. Duties of the Agent**

Yes, the agent appointed in Section three of this form will carry out all duties required of the brand owner listed in Section one of this form.

No, the agent appointed in Section three of this form will not carry out all duties required of the brand owner listed in Section one of this form. I have attached a detailed list of the duties that the agent will carry out. This list is titled "List of Specific Duties of the Agent".

**5. Certification of Information**

I (please print) \_\_\_\_\_, hereby certify that the information provided above is true and complete.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**6. Submission of Registration Form**

Please be advised that the Multi Materials Stewardship Board must be in receipt of your registration form and have approved your registration in accordance with the timelines set out in Part IV of the Waste Management Regulations.

Please Return Completed Registration Form to:

Attn: Paint Recycling Program  
MMSB  
Corporate Services Division  
P.O. Box 8131, Station 'A'  
St. John's, NL A1B 3M9