**PCA Product Stewardship Inc. (PCA)**

**LightRecycle Washington Program for Mercury-Containing Lights**

**Supplier - Customer Remitter Determination Form**

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Agreement between,**

Name of Supplier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete legal name (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LightRecycle Washington Participant Number\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enterprise address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(the “Supplier”)**

and,

Name of Customer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete legal name (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LightRecycle Washington Participant Number\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enterprise address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(the “Customer”)**

\* The LightRecycle Washington Participant Number is provided upon completion of registration with LightRecycle Washington.

**Please check one of the following two options:**

**☐ The Customer is the remitter:** The Customer confirms that it takes responsibility to report sales and remit Environmental Handling Charges (EHCs) directly to PCA as a LightRecycle Washington Participant on all Program Products supplied by the Supplier to the Customer and sold or distributed by the Customer in or into Washington State.

In order to remit EHCs, the Customer acknowledges the requirement that the Customer is registered as a LightRecycle Washington Participant in good standing (LightRecycle participant number indicated above). The Customer acknowledges that in reliance on this agreement, the Supplier will not report to PCA on the supply of Program Products to the Customer, and the Supplier will not invoice the Customer for EHCs relating to such supply.

**☐ The Supplier is the remitter:** The Customer requests that the Supplier report sales and remit EHCs to PCA on all program products supplied by the Supplier to the Customer and sold or distributed by the Customer in Washington State. The Customer acknowledges that the Supplier will add the cost of the EHCs to the price on invoices rendered to the Customer with respect to the obligated products.

The Supplier agrees that such reports and remittances are the Supplier’s responsibility. In order to remit the EHCs, the Supplier acknowledges the requirement that the Supplier is registered as a PCA Participant in good standing (see registration number above).

I, the under signed, authorized signatory of the **Supplier**, accept the conditions present in this Agreement*.*

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

Supplier Signatory Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supplier Signatory Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

I, the under signed, authorized signatory of the **Customer**, accept the conditions present in this Agreement*.*

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

Customer Signatory Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Customer Signatory Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Next Steps Required:**

Please complete and return this document to [EHCreporting@lightrecycle.org](mailto:EHCreporting@lightrecycle.org).

**If a company does not submit this letter, the “Supplier Remits” option will be assumed and the Customer will be charged the EHCs by the Supplier.**