

**Sample "c7" Notification for Exempt Electronic Waste Collection Sites**

This form may be used when electronic waste is collected from consumers at fixed or temporary site before such waste is transported to an electronic waste consolidation facility or electronic waste recycling facility. This form should be submitted at least 30 days prior to the first used electronics collection event. An updated form should be resubmitted if information on the form changes. This form is not required if form CCR-REG is filed with the Department, and Part V of CCR-REG is completed.

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

To: Training & Technical Support Section  
Bureau of Technical Support  
Division of Environmental Remediation  
New York State Department of Environmental Conservation  
625 Broadway, Albany, NY 12233-7020

Please be advised that on \_\_\_\_\_(date(s))

\_\_\_\_\_  
(Agency name)

\_\_\_\_\_  
(Event street address; attach a list if events will be held at multiple locations)  
intends to use the scrap metal exemption of 6 NYCRR 371.1(g)(1)(iii)(b) for  
computer monitors, peripherals, central processing units, or other electronic waste items  
that will be collected from \_\_\_\_\_,  
(Describe type of customers - household, CESQG's, etc.)  
sorted, packaged, \_\_\_\_\_,  
(Described any additional handling that the agency will take)  
and shipped from the above address to:

\_\_\_\_\_  
(Consolidation or Recycling Facility Name)

\_\_\_\_\_  
(Consolidation or Recycling Facility Address)  
where the items will be dismantled, with scrap metal pieces obtained during the  
dismantling routed to \_\_\_\_\_  
(Name of scrap metal recycling company who will receive the scrap metal pieces)  
\_\_\_\_\_  
(Address of scrap metal recycling company)

Please contact \_\_\_\_\_  
(Print name and title of municipal or event sponsor's representative)  
at \_\_\_\_\_ if you have any questions.  
(Phone number)

Sincerely,

\_\_\_\_\_  
(Signature or name of municipality or sponsor's representative)

Please email the completed notification form to SQGINFO@gw.dec.state.ny.us. If you are unable to submit by email, please mail the completed form to the address listed above or submit by fax to (518) 402-9020.

Please call (518) 402-9553 if you have any questions about how to complete this form.