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|  | **Retailer Interest Form**  *To Be a PaintCare Drop-Off Location* |

Use this form to let us know that your store is interested in becoming a PaintCare drop-off site. PaintCare has published fact sheets for each state where we have a paint stewardship program to explain details about working with PaintCare to become a paint drop-off site. Please visit **www.paintcare.org** or call **(855) 724-6809** to request a state-specific fact sheet.

Note: This form is designed in Word using tables. If you are using the electronic version, just start typing. The boxes will expand to fit.

|  |  |  |
| --- | --- | --- |
| Sponsor | Store Name |  |
|  | Street Address |  |
|  | City/State/Zip |  |
|  | Mail Address |  |
|  | Business Hours |  |
|  |  |  |
| Contact 1 | Name |  |
|  | Title |  |
|  | Phone |  |
|  | Email |  |
|  |  |  |
| Contact 2 | Name |  |
|  | Title |  |
|  | Phone |  |
|  | Email |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Store Type | | Independent  Franchise  Chain  Co-op  Big Box | | | | |
|  |  |  | | |
| parent |  | *Fill this out if your participation is managed by a parent company:* | | | |
| company | Company Name |  | | | | |
|  | Contact Person |  | | | | |
|  | Phone |  | | | | |
|  | Email |  | | | | |
|  | | | |
| storage space | | How many cubic yard bins do you have space to store? |  |
|  |  | *Each bin uses the floor space of a pallet, 3’x3’.*  *Normally, participating retailers are required to have at least two bins.* | | | |
|  | |  | | | | |
| Storage Location | | Indoors  Outdoors (secured away from public) | | | | |

# Questions / Comments

Use this space to ask questions or provide additional information:

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
|  |  |  |
| Send Completed form to | | info@paintcare.org  (855) 385-2020 Fax  PaintCare, 901 New York Ave. NW, Washington DC 20001 | | |