

PRODUCT CARE ASSOCIATION 7781 Vantage Way, Delta, B.C. V4G 1A6

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Web: www.productcare.org

NOTIFICATION OF NAME CHANGE

ange, is this an "operating as" or a legal name change? Will the ed on the contract agreement remain same or will it be changing? This e if new contract agreements are required. al) name is staying the same; just the operating name is changing al) name is changing
me change: (please give details):

Please provide the steps involved in making this decision to close: (Please use additional paper if required)

If you had the opportunity, would you partici	pate in our program aga	in? 🗆	Yes □ No
What comments do you have on our program	n? (Please use additional paper	· if required)
What could we do to improve the program in	the future? (Please use add	itional pap	er if required)
Other Comments: (Please use additional paper if requi	ired)		
Have you had any spills or incidents at this s	ite?	□Yes	□ No
If yes – please advise date(s)	_ Was This reported?	□Yes	□ No
If not reported, why not?			
By signing this form, I verify the above inform	nation is correct and con Position	nplete.	
Signature	Date		

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NOTIFICATION OF DEPOT NAME CHANGE

Please send this completed form to recyclingservices@productcare.org or via fax to 604-592-2982. Thank you.