## **IOWA DEPARTMENT OF NATURAL RESOURCES**

CON 12-1-1 Doc # 104738

## **CRT Collection Facility**

## COLLECTION REGISTRATION FORM



New Registration	-CRT- () (S)	- 1 - To be f	illed in by agency
FACILITY CONTACT INFORMATION			
Racility Information  Name: Alme ron & Meta  Address: 101 High Street  City, State, Zip: Kellogg 11A C	ls-Kellogg Ll 50/35 E-mail:	Phone: Fax: Kim (a) alun	1041 526.8040 1041.526.8043 2 1200 and Metals
Responsible Official for the Facility  Name: KIM ROUMDIZ  Address: MOD DAVID STYLL  City, State, Zip: WALLY DO JA 50	103 E-mail:	Phone: Fax: Kim Waling!	319.229.0300 319.234.0087 onandmetals.con
CRT Drop-off Location (if different than mailing a	ddress):		
CERTIFICATION  IAC 567 122.5(1) - Attach proof of owner  OR  IAC 567 122.5(2) - If the facility is leased stating that the property owner is awar held liable for wastes abandoned at the	l, the applicant shall also in e that CRT collection is taki	clude a statement, si	gned by the property owner,
Property Owner	Design	nated Representativ	e of the property owner
By signing below, I state that I am the owner application. I acknowledge that I or the own that are ongoing or proposed for the properthe issuance by the Iowa Department of Na Tubes on the property and the terms and confrom any liability, duty, or responsibility arises Signature:  Printed Name:	r or the representative of t ler I represent have been in rty and consent to those us tural Resources, of a Permi anditions of any such regist	nformed and are awa es and activities. Fur t/Registration to coll ration do not relieve	re of the uses and activities thermore, I understand that ect and recycle Cathode Ray the owner of the Property
Land Complete Complet	CERTIFICATION		come to a second
I certify under penalty of law that I am the that I have examined and am familiar with	owner, operator, or author the information reported accurate and complet	above, and that I bel	of the owner or operator and leve the information is true,
Printed Name: Kim Rochho Email: Kim Qalingirona	12	Phone:	319.229.0300
Signature:	nd metals, con	<u> </u>	Date: 11.17.22
Return completed application with attached information to: Iowa Department of Natural Resources, Solid Waste Section, 502 E 9 <sup>th</sup>			

St, Des Moines IA 50319-0034.