



Iowa Department of Natural Resources
**Cathode Ray Tube (CRT) Device Recycling
 Facility Annual Activity Report**



January 1, ____ – December 31, ____
 Due on or before February 1st

CRT Recycling Permit Number: 77-CRT-01-14
 Or CRT Collection Registration Number: _____
 Responsible Official: BRIAN PATERSON
 Facility Name: CRT RECLAMATION
 Address: 1745 N.E. 58th AVENUE
 Address: _____
 City, State Zip: Des Moines, Iowa 50313

Mail completed form to:
 Iowa Department of Natural Resources
 Land Quality Bureau
 502 E 9th St
 Des Moines, IA 50319
 Fax to: 515-725-8202 Attn: Sue Johnson
 Or Email to: Susan.Johnson@dnr.iowa.gov

You may report the quantities of CRT's you collected from your customers in either total Weight or Total Count. Please select only one type of reporting method.

122.11(4) - Materials received from: Businesses and Institutions and/or Households

Rule Reference	Rule	Weight (in pounds)	◀ OR ▶	Volume (number)
122.11(1)	Discarded CRTs and processed CRT glass onsite on January 1 of reporting year.	757,140	◀ OR ▶	
122.11(2)	Discarded CRTs and CRT glass recycled or transferred for recycling during the calendar year.	1,184,286		
122.11(3)	Discarded CRTs and processed CRT glass onsite on December 31 of the reporting year.	853,414		

CERTIFICATION

I certify under penalty of law that I am the owner, operator, or authorized representative of the owner or operator and that I have examined and am familiar with the information reported above, and that I believe the information is true, accurate and complete.

Printed Name: BRIAN PATERSON Phone: 515-468-1964
 Email: brian@katreclamation.com Fax: _____
 Signature: [Signature] Date: 1-29-2025