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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Solid waste contact change form  Solid Waste Planning  Doc Type: Contact List |

Instructions: Use this form to inform the Minnesota Pollution Control Agency (MPCA) of contact changes in your county/district. Email the completed form to your assigned solid waste planner with the subject line “Contact change form.” Save a copy for your records.

**County contact information** *(Who should the MPCA contact with questions about this request?)*

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | |  | | | | | | | | | |
| Organization address: | | | |  | | County: | | |  | | |
| City: |  | | | | State: | |  | | | Zip code: |  |
| Contact phone: | | |  | | Contact email: | | |  | | | |

Contact change type

Include new/updated contact information in “contact change requests” below. Any additional instructions should be included in the Comments section. Use a seperate change request section for each person. Maintaining accurate and up-to-date contacts for your county/district enables us to effectively communicate important information and timely program updates.

**Contact change request person 1**

|  |
| --- |
| Addition – new contact; currently no contact association to facility. |
| Removal – remove existing contact association to facility. |
| Change – change to existing contact association to facility. |

Contact type

|  |  |  |  |
| --- | --- | --- | --- |
| *Select the contact type or types that apply.* | | | |
| Built Environment  Burn Barrel Program  E-waste  Hauler Reporting  Household Hazardous Waste | Local Recycling Development Grants (LRDG)  Metro Reporting (Metro counties only)  Organics Management/Food Waste Prevention | Recycling Education Committee  Recycling/End Markets  SCORE  Solid Waste Officer  Solid Waste Planner |
| All that apply **(for removal only)** | | | |
| **Contact type definitions:** | | | |
| *All that apply = To completely remove an individual association with a County, for Removal option only.* | | | |

**Complete all fields; only one phone number is required.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | |  | | | | | | | | | | | | |
| Organization address: | | | |  | | | | County: | | |  | | | |
| City: |  | | | | | | State: | |  | | | | Zip code: |  |
| Office phone: | | |  | | Mobile phone: |  | | | | Email: | |  | | |
| **Comments:** | | | | | | | | | | | | | | |

**Contact change request person 2**

|  |
| --- |
| Addition – new contact; currently no contact association to facility. |
| Removal – remove existing contact association to facility. |
| Change – change to existing contact association to facility. |

Contact type

|  |  |  |
| --- | --- | --- |
| *Select the contact type or types that apply.* | | |
| Built Environment  Burn Barrel Program  E-waste  Hauler Reporting  Household Hazardous Waste | Local Recycling Development Grants (LRDG)  Metro Reporting (Metro counties only)  Organics Management/Food Waste Prevention | Recycling Education Committee  Recycling/End Markets  SCORE  Solid Waste Officer  Solid Waste Planner |
| All that apply **(for removal only)** | | |
| **Contact type definitions:** | | |
| *All that apply = To completely remove an individual association with a County, for Removal option only.* | | |

**Complete all fields; only one phone number is required.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | |  | | | | | | | | | | | | |
| Organization address: | | | |  | | | | County: | | |  | | | |
| City: |  | | | | | | State: | |  | | | | Zip code: |  |
| Office phone: | | |  | | Mobile phone: |  | | | | Email: | |  | | |
| **Comments:** | | | | | | | | | | | | | | |

**Contact change request person 3**

|  |
| --- |
| Addition – new contact; currently no contact association to facility. |
| Removal – remove existing contact association to facility. |
| Change – change to existing contact association to facility. |

Contact type

|  |  |  |
| --- | --- | --- |
| *Select the contact type or types that apply.* | | |
| Built Environment  Burn Barrel Program  E-waste  Hauler Reporting  Household Hazardous Waste | Local Recycling Development Grants (LRDG)  Metro Reporting (Metro counties only)  Organics Management/Food Waste Prevention | Recycling Education Committee  Recycling/End Markets  SCORE  Solid Waste Officer  Solid Waste Planner |
| All that apply **(for removal only)** | | |
| **Contact type definitions:** | | |
| *All that apply = To completely remove an individual association with a County, for Removal option only.* | | |

**Complete all fields, only one phone number is required**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | |  | | | | | | | | | | | | |
| Organization address: | | | |  | | | | County: | | |  | | | |
| City: |  | | | | | | State: | |  | | | | Zip code: |  |
| Office phone: | | |  | | Mobile phone: |  | | | | Email: | |  | | |
| **Comments:** | | | | | | | | | | | | | | |