



**MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
OFFICE OF WASTE MANAGEMENT AND RADIOLOGICAL PROTECTION**

**ELECTRONIC DEVICE MANUFACTURER  
REGISTRATION FORM**

Registration is required under authority of Section 17303 of Part 173, Electronics, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended.

FOR ADDITIONAL INFORMATION, CONTACT THE  
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY,  
OFFICE OF WASTE MANAGEMENT AND RADIOLOGICAL PROTECTION,  
SUSTAINABLE MATERIALS MANAGEMENT UNIT AT 517-284-6590

YEAR 2014-15 **FOR DEQ USE ONLY**

Date Received by DEQ: 1-20-2015

Received by: MWO

Fee: \$3,000. Yes  No

ACH Payment: Yes  No

Confirmation # \_\_\_\_\_

**NOTE: PLEASE COMPLETE THE ENTIRE APPLICATION EVEN IF THE ANSWER IS "N/A" OR "0"**

**ELECTRONIC DEVICE MANUFACTURER:**

1. Company Name (True Name and All Assumed Names): Sceptre, Inc. 2. Area Code and Telephone Number: 626-369-3698

3. Manufacturer of:  
Video Display Devices (televisions) Yes  No   
Computers (includes monitors) Yes  No   
Printers Yes  No

4. Mailing Address:  
Address: 16800E Gale Ave City: City of Industry  
State: CA ZIP: 91745  
Country: United States County (if in Michigan):

5. Home Web Site Address: www.sceptre.com  
6a. Contact name: Cathy Chou  
6b. Contact e-mail address: cathy@sceptre.com  
6c. Contact telephone number: 626-369-3698

**BRAND NAMES OF COVERED ELECTRONIC DEVICE(S) AND TYPE OF DEVICE (video display or computer)  
SOLD BY THE MANUFACTURER**

7. Please list the brand names of covered devices your company manufacturers. (Attach an additional page if necessary.)

- (a) Sceptre
- (b) oCosmo
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)

AP# 1846  
1/1/15  
pymt # 1108

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\$3000  
1/15

**For Cashiers Use Only**  
11-1 01/20/15  
33000 45605 9124  
AY 2015 \$3,000

## TAKEBACK PROGRAM CONSUMER CONTACTS

8a. What Web site address do you provide to consumers for information on your Takeback program? www.sceptre.com

8b. If the Web site address above includes a link to the Takeback program describe how to find that link on the Web site: There is a link called Sceptre Recycling Program under Customer Service tab.

8c. If provided, what telephone number do you provide to consumers for information on your Takeback program? 1-888-580-5588

## TAKEBACK PROGRAM INFORMATION

9. What are the primary method(s) utilized by your Takeback program? Check up to two boxes.

Mailback

Permanent collection site

Collection events

Retailer

9a. Identity of the person responsible for coordination of the Takeback program.

Name: Son Tieu  
369-3698

e-mail address: recycle@sceptre.com

Phone #: 626-

9b. Please describe your Takeback program.

We created a Sceptre Recycling Program and all the information is provided on Sceptre Website. Customers who needs to recycle their covered devices have the options to email or call Recycle Green Department and we will provide them prepaid UPS shipping labels to bring the devices back to our facility. The entire process is free of charge.

9c. Are appropriate devices covered with your Takeback program? Check appropriate box:

If you are a manufacturer of computers do you accept all brands?

Yes

No

N/A

If you are a manufacturer of video display devices do you accept all brands?

Yes

No

N/A

9d. Is your Takeback program free to consumers?

Yes

No

9e. Is your Takeback program reasonably convenient and available to and otherwise designed to meet the needs of consumers in this state?

Yes

No

9f. What is the number of devices a consumer may deliver to your program each day? Unlimited  # \_\_\_\_\_

10. What information do you provide to consumers on how and where to return covered electronic devices that are labeled with your name or brand label?

All we need is the customers' contact information and we will issue prepaid UPS shipping labels for them to drop off at the UPS locations or schedule a pickup.

11. How do you provide information to consumers on how and where to return covered electronic devices?

We provide information by creating a webpage on Sceptre website.

[Empty rectangular box for reporting details]

**TAKEBACK PROGRAM REPORT** (include this information beginning with the first registration submitted after the implementation of the Takeback program)

12a. List the number of permanent collection and/or recycling locations in the state of Michigan. 0

- a(1) The number of those collection sites that are located in counties with a population of less than 20,000 people. 0

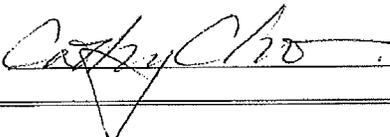
12b. The number of collection events held during previous registration year in the state of Michigan. 0

12c. List the weight of the covered electronic devices received by the Takeback program from consumers during the prior year:  
0 tons thru collection locations 0 tons through collection events 0 tons through retailers 0 tons by mailback.

13. Describe the processes and methods used to recycle or reuse the covered electronic devices received from consumers: Collecting from Customers

I, the undersigned registrant, swear and affirm, UNDER PENALTY OF LAW, that the statements contained herein are true and correct. I certify under penalty of law that the information contained on this form, to the best of my knowledge and belief, is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.

PRINT NAME: Cathy Chow DATE: 12/30/14

SIGNATURE:  TITLE: VP Operations