



**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: 12-8-2014

Received by: MW

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"**

<b>ELECTRONIC DEVICE MANUFACTURER:</b>	
1. Company Name (True Name and All Assumed Names): Xerox Corporation	2. Area Code and Telephone Number: 203-968-3000
3. Manufacturer of:	
Video Display Devices (televisions)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Computers (includes monitors)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Printers	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
4. Mailing Address:	
Address: 800 Phillips Road, Building 0205-99F	City: Webster
State: NY	ZIP: 14580
Country: U.S.A	County (if in Michigan):
5. Home Web Site Address: www.xerox.com	6a. Contact name: Jonathan Nwagbaraocha
	6b. Contact e-mail address: Jonathan.Nwagbaraocha@Xerox.com
	6c. Contact telephone number: 585-422-4071

<b>BRAND NAMES OF COVERED ELECTRONIC DEVICE(S) AND TYPE OF DEVICE (video display or computer) SOLD BY THE MANUFACTURER</b>	
7. Please list the brand names of covered devices your company manufacturers. (Attach an additional page if necessary.)	
(a) Xerox	(e)
(b)	(f)
(c)	(g)
(d)	(h)

**For Cashiers Use Only**

## TAKEBACK PROGRAM CONSUMER CONTACTS

8a. What Web site address do you provide to consumers for information on your Takeback program? <http://www.xerox.com/about-xerox/environment/equipment-recycling/enus.html>

8b. If the Web site address above includes a link to the Takeback program describe how to find that link on the Web site: Select "Michigan" in the "Select State" pull down menu and then click "Continue". Next, in the "State of Michigan" section, click on the link for information on the takeback program.

8c. If provided, what telephone number do you provide to consumers for information on your Takeback program? 1-888-699-6632

## 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: Jonathan Nwagbaraocha  
Phone #: 585-422-4071

e-mail address: [Jonathan.Nwagbaraocha@Xerox.com](mailto:Jonathan.Nwagbaraocha@Xerox.com)

9b. Please describe your Takeback program.

Consumers are directed to our webpage: <http://www.xerox.com/about-xerox/environment/equipment-recycling/enus.html> where they continue to a link where they are provided a pre-paid UPS shipping label to ship the device to SIMS for recycling.

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?

As directed on the Xerox website: Consumers with Xerox branded items such as desktop printers or monitors for household use or small businesses with less than ten employees in the State of Michigan are asked to utilize the following link for managing your electronic waste:

<http://oem.srsapp.com/StateInformation/default.aspx?oem=xerox&statecode=mi>

The link then offers consumers a return program to send back electronics via a pre-paid UPS label for the device.

### Web Returns

Currently we offer a Returns Programs for citizens to send back electronics via a pre-paid UPS label for the following products:

-Printer

### Drop Off Sites:

Please use the Web Returns Link Above

For Free UPS Returns,

For a UPS location near you,

visit [www.ups.com](http://www.ups.com)

11. How do you provide information to consumers on how and where to return covered electronic devices?  
Web based link at <http://www.xerox.com/about-xerox/environment/equipment-recycling/enus.html>

**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

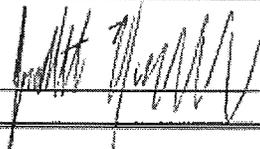
12c. List the weight of the covered electronic devices received by the Takeback program from consumers during the prior year:

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: Systems are inspected, and then sent for teardown. All parts including metals, plastics, & recoverable electronic commodities are sent to our downstream recycling partners.

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: Jonathan Nwagbarascha DATE: 12/4/14

SIGNATURE:  TITLE: Environmental Affairs Manager