

Approved by State Board of Accounts, 2018

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

INSTRUCTIONS:

- 1. Use this form to request payment for mercury switches removed from end-of-life vehicles under IC 13-20-17.7.
- 2. Print or type all requested information. Sign and date the certification. IDEM will verify the number of switches shipped with the End of Life Vehicle Solutions (ELVS) / US Ecology database. State reimbursement will be based upon the certified number in the ELVS / US Ecology database.
- 3. Mail the form to Indiana Department of Environmental Management, Office of Program Support, Mercury Switch Program, 100 North Senate
- Avenue, IGCN N1316, Indianapolis, IN 46204-2273. 4. If you have not already done so, you must submit an Automated Direct Deposit Authorization Agreement Form (<u>State Form 47551</u>) and Request
- for Taxpayer Identification Number and Certification Form (<u>IRS W-9</u>) to IDEM. 5. For more information or for help completing your claim, contact IDEM's Office of Program Support at (800) 988-7901.

Claim Number:(IDEM Use Only)	MS –	_	

COMPANY INFORMATION (Remittance to Address)

Name of company						
Address (number and street)						
City		State	ZI	P code		
Contact person	·	Te (elephone number)			
PROJECT SITE INFORMATION AS REFERENCED BY ELVS / US ECOLOGY DATABASE (Physical Site Location)						
Name of company						
Address (number and street)						
City		State	ZI	P code		
Contact person		·	Te (elephone number)		
Vehicle salvage license number (from Bureau of Motor Vehicles)						
Number of mercury switches or switch pellets removed and shipped to recycler in this container						
Number of ABS G-Force sensors removed and shipped to recycler in this container						
Date this container of mercury switches was shipped to the recycler / ELVS (<i>mm/dd</i> /yyyy)						
Certification by company official (Claim cannot be paid without valid signature.)						
All convenience switches and ABS G-force sensor switches that were removed and sent for recycling and for which reimbursement is requested in this claim contain mercury. I certify that the information I have provided in this claim is true and accurate to the best of my knowledge.						
Signature		Print name				
Title		Date (<i>mm/dd/yyyy</i>)				
IDEM USE ONLY						

ELVS / US Ecology invoice date (mm/dd/yyyy)	Approved to pay:			
Date processed (mm/dd/yyyy)	Approved by:			
Requisition number		Purchase order (PO) number		
Invoice number		Received number		