

**Renewable Energy Recycling Facility
Registration**
Return completed form to PUDsubmissions@occ.ok.gov



Entity Information

Registration Date	
Facility Operations Start Date	
First date facility received renewable energy components	
Name - company name or individual name	
DBA - (Doing Business As)	
Company Type - Individual, Inc, LLC, etc.	
Facility Address - Physical street address	
Facility City, State Zip Code	
Facility County	
Contact Name and Title	
Contact Phone #	
Contact Email	
Billing Address Attention - department, person	
Billing Address - street or PO Box.	
Billing City, State Zip Code	

Alternate Company Information (if applicable)

Name - company name or individual name	
DBA - (Doing Business As)	
Company Type - Individual, Inc, LLC, etc.	
Address - Physical street address	
City, State Zip Code	
Contact Name and Title	
Contact Phone #	
Contact Email	

