Appendix A



RETURN TO RETAIL (R2R) INCENTIVE PROGRAM APPLICATION FORM

New Brunswick

R2R Retailer Information		
R2R Retailer Name:		
Address:		
City:		Postal Code:
Phone Number:		Fax Number:
Contact Name:		
Email Address:		
Hours of Operation:		
HST/GST Number:		
RQO-verified Processor:		
Data sensitive products?		
To Be Completed by EPRA		
Generator Name:		
Generator Code:		
Effective/Open Date:		
Region:		
Trading Area:		
Date Application was submitted:		