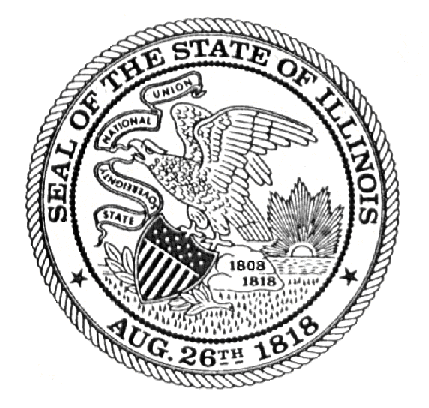
**Section 2800.APPENDIX A Application for Alternative Qualification**



**State of Illinois**

**Illinois Green Governments Coordinating Council**

**Green Cleaning Schools Act Program**

**APPLICATION FOR ALTERNATIVE QUALIFICATION**

For the cleaning supply categories listed in 23 Ill. Adm. Code 2800.30(a), schools may procure and use non-pre-qualified cleaning supplies provided that they meet the requirements of the Green Cleaning Schools Act and 23 Ill. Adm. Code 2800.40, summarized as follows.

The manufacturer or distributor of a non-pre-qualified product must seek alternative qualification of environmental sensitivity by providing the Green Governments Coordinating Council (the "Council") with independent documentation verifying that the product meets the criteria of at least one of the Green Seal standards (GS-37 or GS-41 for chemicals; GS-9 for paper) or EcoLogo standards (CCD-104, CCD-146 or CCD-148 for chemicals; CCD-86 for paper).

The verification must come in the form of testing data provided by one or more independent third-party laboratories. Any laboratories that maintain accreditation meeting the standards of ISO/IEC 17025 may conduct the required testing.

The Council shall charge no fee to the party seeking alternative qualification. The party seeking alternative qualification shall bear all laboratory and other costs necessary to obtain the required test results.

A properly submitted verification application and documentation shall entitle the product to alternative qualification for a period of no less than one year. Unlimited automatic renewals of the qualification shall be accepted at no charge for additional one-year periods provided that there have been no substantial changes in either the relevant criteria for qualification of that product, or in the formulation of that product. If substantial changes have occurred, a renewal of alternative qualification requires new laboratory verification.

Applicants must complete one application per product seeking alternative qualification. Please attach all documentation of test results to the completed copy of this application. Submit all pages to the Council in a single envelope.

Mail the completed application and supporting documentation to:

Illinois Green Governments Coordinating Council

c/o Lt. Governor's Office

100 West Randolph Street, Suite 15-200

Chicago, Illinois 60601

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| **Date of Application:** |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Company Information** | | | | | |  | | | | | | |
| Company Name: | | | | |  | | | | | | | |
|  | | | | | | | | |  | |  | |
| Description of distribution and/or manufacturing activities: | | | | | | | | |  | | | |
|  | | | | | | | | | | | |
|  | | | |  | | | | | | | | |
| Street Address: | | | |  | | | | | | | | |
|  | | | |  | | | |  |  |  | |  |
| City: | |  | | | | | State: |  | Zip Code: |  | | |
|  | | | |  | | | |  |  |  | |  |
| General Phone: | | | |  | | | | | | | | |
|  | | | |  | | | |  |  |  | |  |
| Web Site: | | |  | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| **Primary Contact Information** | | |  | | | |
| Name: | |  | | | | |
|  | | | |  | |  |
| Title: |  | | | Phone: |  | |
|  | | | | | | |
| Email: | |  | | | | |

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| --- | --- | --- |
| **Cleaning Supply Information** | |  |
| Name of product seeking alternative qualification: | | |
|  | |

Product category (check only one):

|  |  |
| --- | --- |
| * Bathroom Cleaner * Carpet Cleaner * General Purpose and Hard Floor Surface Cleaner | * Glass, Window and Mirror Cleaner * Hand Cleaners and Hand Soap * Paper Product |

Documentation attached proves adherence to the following standard (check only one):

|  |  |
| --- | --- |
| Green Seal   * GS-9 Paper Towels and Paper Napkins * GS-37 Industrial & Institutional Cleaners * GS-41 Industrial & Institutional Hand Cleaners | EcoLogo   * CCD-86 Hand Towels * CCD-104 Hand Cleaners − Industrial & Institutional * CCD-146 Hardsurface Cleaners * CCD-148 Carpet and Upholstery Cleaners |

Refer to the Council's website for copies of the standards listed above.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Laboratory Information** | | | | | | |  | | | | | | | | |
| Name of Laboratory Organization: | | | | | | | |  | | | | | | | |
|  | | | | |  | | | | | | | | |  | |
| Street Address: | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| City: |  | | | | | State: | | |  | | | Zip Code: |  | | |
|  | | | | |  | | | |  | | |  |  | |  |
| General Phone: | | | | |  | | | | | | | | | | |
|  | | | | |  | | | |  | | |  |  | |  |
| Web Site: | | | |  | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | |
| Contact Name: | | | | |  | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | |
| Title: |  | | | | | | | | | Phone: |  | | | | |
|  | | |  | | | | | | | | | | | | |
| Email: | |  | | | | | | | | | | | | | |

If multiple laboratories are used for testing, please provide the information above for each laboratory on a separate attached page.