



# Landfill Methane Outreach Program (LMOP)

## Update My Information for Partners

Revisions will be reflected in the next update of Partner information on the LMOP website.

### Edits Submitted By

Name (Required)

Email (Required)

### Organization

Organization Name (Required)

Website Address

[Please enter the url without http:// or https://]

Street

City

State

Zip

LMOP Home

About LMOP

Basic Information about  
Landfill Gas

Benefits of LFG Energy  
Projects

LFG Energy Project Data  
and Landfill Technical Data

LMOP Partners

Resources for Partners

**Update My Information**

Award Winners

Join the Program

Publications, Tools and  
Resources

LMOP Webinars and Events

Frequent Questions about  
Landfill Gas

**Organization Type** – Industry and Energy Partners, please select the organization type from the appropriate list below that best fits your organization (select only one).

Energy Partner Type

- None - ▼

Industry Partner Type

- None - ▼

Description

Use the box below to provide us with a brief revised description (150 words or less) of your organization

Should the new/revised description above:

- Completely replace the current description we have for your organization, or  
 Add to the current description we have for your organization

**Expertise** – Industry Partners, please select the expertise from the list below that best represents your organization's field(s) of expertise (can select multiple, up to 4 total).

Professional Services

Broker, Exchange/Registry, Verifier  
Construction/Installation  
Engineering/Design  
Financial Consulting/Analysis

^  
▼

Equipment Supplier Type

Carbon Dioxide Removal  
Controls/Instrumentation  
Gas Monitors/Analyzers  
GCCS Components

^  
▼

**Primary Contact**

Different than primary contact currently listed on website?

- Yes  
 No

Primary Contact Name (Required)

Primary Contact Title

Primary Contact Email (Required)

Primary Contact Phone (Required)

Is address the same as organization's? If not, please complete the items below.

Yes

No

Primary Contact Street

Primary Contact City

Primary Contact State

Primary Contact Zip

Additional Contacts

Use the box below to indicate edits to names, titles, email addresses, or phone numbers of existing contacts.

Other Edits

Use the box below to indicate other edits for your organization as a Partner that are not addressed above.

**Submit**

[Contact Us](#) to ask a question, provide feedback, or report a problem.