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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Report InventoryEnvironmental Audit ProgramDoc Type: Environmental Audits |

## Instructions:Completion and submittal of this form satisfies the report requirements of the Environmental Audit Program.

Facility information

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| Facility name: |       |
| Facility address: |       |
| Contact name: |       | Contact phone: |       |
| Contact email: |       |  |

Company information (if different from above)

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| Company name: |       |
| Company address: |       |
| Contact name: |       | Contact phone: |       |
| Contact email: |       |  |

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| **Brief description of the product(s) manufactured, the activity(ies) conducted, or the service(s) provided at this facility:** |
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| **Date environmental audit completed (mm/dd/yyyy):**  |       |  |
| **A Report Inventory form must be submitted within 45 days of completion of audit.** |

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| **Environmental area(s) audited:** |
| mpca audit checklists are available for a number of environmental areas. Check only the area(s) that was audited. |

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| **General** |  | **Industry-specific** |
| [ ]  | Air Quality |  | [ ]  | Automotive Service |
| [ ]  | Feedlot |  | [ ]  | Dry Cleaning |
| [ ]  | Hazardous Waste |  | [ ]  | Fiberglass Fabrication |
| [ ]  | Infectious Waste |  | [ ]  | Motor Vehicle Salvage |
| [ ]  | Mining |  | [ ]  | Printing |
| [ ]  | Solid Waste |  | [ ]  | Wood Finishing |
| [ ]  | Spills |  | [ ]  | Hot Mix Asphalt |
| [ ]  | Stormwater |  | [ ]  | Sand and Gravel |
| [ ]  | Tanks (Aboveground Storage) |  | [ ]  | Dry Cleaning |
| [ ]  | Tanks (Belowground Storage) |  | [ ]  | Fiberglass Fabrication |
| [ ]  | Water Quality |  | [ ]  | Motor Vehicle Salvage |
| [ ]  | Wastewater |  | [ ]  | Printing |
| [ ]  | Other: |       |  | [ ]  | Other: |       |

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| **Did the scope of the audit examine the facility’s compliance with all applicable environmental requirements?** |
| [ ]  Yes [ ]  No |  |

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| **Were violations identified?** |
| [ ]  Yes [ ]  No |  |  |
| If yes, list the violations below, along with a description of the corrective action(s) that will be performed to correct the violations. Attach additional sheets, if necessary. |
|       |
| **Will more than 90 days be required to correct the violations?** |
| [ ]  Yes [ ]  No [ ]  Not applicable. |  |  |
| If yes, include a performance schedule that describes when the violations will be corrected and why more than 90 days are required to correct the violations. Performance schedules are subject to MPCA approval. |
|       |
| **If violations of local environmental ordinances or requirements were found, have the appropriate local government units received a copy of this report?** |
| [ ]  Yes [ ]  No [ ]  Not applicable. |  |  |
| If yes, include the name(s) of the local government unit(s) that received a copy of this report. |
|       |
| **Has the facility changed its name in the past two years?** |
| [ ]  Yes [ ]  No |  |  |
| If yes, please, write the previous name below: |
|       |
| **Would you like MPCA staff to contact you regarding implementation of a pollution prevention program at this facility?** |
| [ ]  Yes [ ]  No |  |  |
| **Describe the steps that you will take, or have taken, to prevent the recurrence of the violations listed on the previous page.** (Attach additional sheets if necessary.) |
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Owner or Operator signature

I certify under penalty of law that the information submitted is accurate and complete to the best of my knowledge, and that I will correct any violations identified as expeditiously as possible. Furthermore, I certify that I have either prepared a pollution prevention plan or examined pollution prevention opportunities at my facility, as discussed in the Environmental Improvement Program legislation.

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| **Owner authorized signature:** |  | **Operator authorized signature (if different):** |
| Signature: |       |  | Signature: |       |
|  | *(This document has been electronically signed.)* |  |  | *(This document has been electronically signed.)* |
| Title: |       |  | Title: |       |
| Date (mm/dd/yyyy): |       |  | Date (mm/dd/yyyy): |       |

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