OMB No. 2010-0032
Expiration Date: 08/30/03

National Environmental Performance Track
U.S. Environmental Protection Agency

Application Form **A06-0055**

MAR 10 2004

The Cavern Suppy Co, Inc.
Name of facility*

Name of parent company (if any)

624 S. Canyon
Street address

Street address (continued)

Carlsbad, NM 88220
City/State/Zip code

Give us information about your contact person for the National Environmental Performance Track Program.

Name (Mr./Mrs./Ms./Dr.) Dudley Jones

Title vice president

Phone 505-885-6636

Fax 505-887-7272

E-mail csc@pcnm.com

Facility/Company Website

* If you are applying for multiple facilities, you must call 1-888-339-PTRK(7875)

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Section A

Tell us about your facility.

Why do we need this information?

EPA needs background information on your facility to evaluate your application.

What do you need to do?

- Provide background information on your facility.
- Identify your environmental requirements.

1 What do you do or make at your facility?

Concessionaire at Carlsbad Caverns National Park

2 List the North American Industrial Classification System (NAICS) codes that you use to classify business at your facility.

NAICS 45322 7221 7222

3 Does your company meet the Small Business Administration definition of a small business for your sector?

☑ Yes ☐ No

4 How many employees (full-time equivalents) currently work at your facility? If you checked "Yes" in question 3 and have fewer than 50 employees at your facility, then you are considered a "small facility" by the Performance Track Program.

☑ Fewer than 50
☐ 50-99
☐ 100-499
☐ 500-1,000
☐ More than 1,000

5 Complete the Environmental Requirements Checklist on pages 32-38 of the instructions and enclose it with your application.

Not applicable to our facility.

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Section A, continued

6 Optional: Is there anything else you would like to tell us about your facility? Do you participate in other voluntary programs at the local, tribal, State, or Federal level?

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Section B

Tell us about your EMS.

Why do we need this information?

Facilities need to have an operating Environmental Management System (EMS) that meets certain requirements.

What do you need to do?

- Confirm that your EMS meets the Performance Track requirements.
- Tell us if you have completed a self-assessment or have had a third-party assessment of your EMS.

Read the EMS requirements on page 9-12 of instructions.
Tell us if your EMS meets these requirements for:

1 Environmental policy	☑ Yes	☐ No
2 Planning	☑ Yes	☐ No
3 Implementing and operation	☑ Yes	☐ No
4 Checking and corrective action	☑ Yes	☐ No
5 Management review	☑ Yes	☐ No
6 Have you done a comprehensive review of all activities conducted at your facility that could impact the environment? (i.e., have you done an aspect analysis?)	☑ Yes	☐ No
7 Have you classified your aspects based on their potential harm to the environment, on community concerns, and/or on other objective factors? (i.e., have you determined your significant aspects?)	☑ Yes	☐ No
8 When did you last update your aspect analysis? (mo/yr)	11/7/2002	
9 Have you completed at least one EMS cycle (plan-do-check-act)?	☑ Yes	☐ No
10 Did this cycle include both an EMS and a compliance audit?	☑ Yes	☐ No
11 Have you completed an objective self-assessment or third-party assessment of your EMS?	☑ Yes	☐ No

If yes, what method of EMS assessment did you use?

Self-assessment	Third-party assessment
☐ GEMI	☑ ISO 14001 Certification
☐ CEMP	☐ Other
☐ Other	

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Section C

Tell us about your past achievements and future commitments.

Why do we need this information?

Facilities need to show that they are committed to improving their environmental performance. This means that you can describe past achievements and will make future commitments.

What do you need to do?

Refer to the Environmental Performance Table in the Instructions to answer questions 1 and 2.

Part 1 **You must report past achievements for at least two environmental aspects, and you must choose these aspects from the Environmental Performance Table on pages 29-31 of the Instructions.** Please quantify each of your aspects using the units listed for that aspect in the Environmental PTrack Information Hotline at 1-888-339-PTRK.

Note to small facilities: If you are a small facility, you must report past achievements for only one environmental aspect.

First achievement

1 What aspect have you selected from the Table on page 29-31?	Total Water use	
2 What units are you using to quantify this aspect? (See Table, page 29-31.)	Gallons	
	PAST	CURRENT
3 List the past annual quantity of the aspect (from two years ago) and the current annual quantity of the aspect (from the most recent year for which you have data).	407,470	320,500
4 What are the years for which you are reporting these quantities?	2000	2002
5 Estimate your past normalizing factor (Page 18 of the Instructions will help you calculate this.)	.83	1.0
6 What is your normalizing factor based on (e.g., production, employment)?	Sales	
7 You reported an improvement in the quantity of the aspect in Question 3. How did you achieve this improvement?	Changed food serving option from china ware to Paper Lined Baskets thereby achieving significant Reduction in Dishwashing water use., also eliminated non-essential water uses Processes, (ie, serving guests water only on request.)	

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Section C, continued

Second achievement

1 What aspect have you selected from the Table on page 29-31?	N/A	
2 What units are you using to quantify this aspect? (See Table, page 29-31.)		
	PAST	CURRENT
3 List the past annual quantity of the aspect (from two years ago) and the current annual quantity of the aspect (from the most recent year for which you have data).		
4 What are the years for which you are reporting these quantities?		
5 Estimate your past normalizing factor (Page 18 of the instructions will help you calculate this.)		1.0
6 What is your normalizing factor based on (e.g., production, employment)?		
7 You reported an improvement in the quantity of the aspect in Question 3. How did you achieve this improvement?		

Part 2 **You must make future commitments for at least four environmental aspects, and you must choose these aspects from the Environmental Performance Table on pages 29-31 of the Instructions.** The aspects you select for your future commitments should be related to the objectives and targets in your EMS. Where possible, they also should be identified as having a significant environmental impact in your EMS. No more than two of your aspects can be from the same environmental category. If you're not sure how your objectives and targets fit into our aspects or whether your aspects are significant, call the PTrack Information Hotline at 1-888-339-PTRK.

Once you have chosen your four environmental aspects, then fill in all the necessary information for these aspects in the tables on pages 7-10 of this form. Please quantify each of your aspects using the units listed for that aspect in the Environmental Performance Table. Each table that you must fill in corresponds to one of the environmental aspects you have chosen.

We will assume that your performance commitments are based on a constant production or employment level. If you would like to base your commitment on changing production or employment, please fill out optional questions 6a and 6b.

Note to small facilities: If you are a small facility, you must report future commitments for only two environmental aspects.

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Section C, continued

First commitment

1 What aspect have you selected from the Table on pages 29-31?	Total Solid Waste	
2 What units are you using to quantify this aspect?	TONS	
3a Is this aspect considered significant in your EMS?	☐ Yes ☑ No	
3b If no, please explain why you believe this aspect should be included as a performance commitment.	After review of all facility aspects None were determined to be "significant."	
	CURRENT	FUTURE
4 List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.	38.3 TONS	32.5 TONS
5 What are the years for which you are reporting these quantities?	2002	2006
6a (Optional) What is your future normalizing factor. (Page 21 of the instructions will help you calculate this.)	1.0	
6b (Optional) What is your normalizing factor based on (e.g., production, employment)?	Sales	
7 You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?	Recycling, Diversion & Re-use of Qualifying waste products	
8a Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	☐ Yes ☑ No	
8b If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.		

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Section C, continued

Second commitment

1 What aspect have you selected from the Table on pages 29-31?	Total Energy Use	
2 What units are you using to quantify this aspect?	KWH	
3a Is this aspect considered significant in your EMS?	☐ Yes ☑ No	
3b If no, please explain why you believe this aspect should be included as a performance commitment.	After Review of all Facility aspects None were determined to be "significant"	
	CURRENT	FUTURE
4 List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.	378,177	321,450
5 What are the years for which you are reporting these quantities?	2002	2006
6a (Optional) What is your future normalizing factor. (Page 21 of the instructions will help you calculate this.)	1.0	
6b (Optional) What is your normalizing factor based on (e.g., production, employment)?	Sales	
7 You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?	Replace Lighting systems with energy efficient system. Replace old equipment & HVAC with New energy efficient models.	
8a Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	☐ Yes ☑ No	
8b If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.		

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Section C, continued

Third commitment

1 What aspect have you selected from the Table on pages 29-31?	N/A	
2 What units are you using to quantify this aspect?		
3a Is this aspect considered significant in your EMS?	☐ Yes ☐ No	
3b If no, please explain why you believe this aspect should be included as a performance commitment.		
	CURRENT	FUTURE
4 List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.		
5 What are the years for which you are reporting these quantities?		
6a (Optional) What is your future normalizing factor. (Page 21 of the Instructions will help you calculate this.)	1.0	
6b (Optional) What is your normalizing factor based on (e.g., production, employment)?		
7 You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?		
8a Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	☐ Yes ☐ No	
8b If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.		

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Section C, continued

Fourth commitment

1 What aspect have you selected from the Table on pages 29-31?	N/A	
2 What units are you using to quantify this aspect?		
3a Is this aspect considered significant in your EMS?	☐ Yes ☐ No	
3b If no, please explain why you believe this aspect should be included as a performance commitment.		
	CURRENT	FUTURE
4 List the current annual quantity of the aspect and the annual quantity you are committing to achieve by the end of the third year of your participation in Performance Track.		
5 What are the years for which you are reporting these quantities?		
6a (Optional) What is your future normalizing factor. (Page 21 of the instructions will help you calculate this.)	1.0	
6b (Optional) What is your normalizing factor based on (e.g., production, employment)?		
7 You committed to an improvement in the quantity of this aspect in Question 4. How do you plan to achieve this improvement?		
8a Are you subject to Federal, State, tribal, or local regulatory requirements for this aspect?	☐ Yes ☐ No	
8b If yes, please list those requirements, including the quantitative limits and compliance deadlines that apply to you. Explain how your commitment exceeds requirements.		

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Section D

Tell us about your public outreach and reporting.

Why do we need this information?

Facilities need to demonstrate their commitment to public outreach and performance reporting. You should have appropriate mechanisms in place to identify community concerns, to communicate with the public, and to provide information on your environmental performance.

What do you need to do?

- Describe your approach to public outreach.
- List three references who are familiar with your facility.

1 How do you identify and respond to community concerns?

We have an employee designated to respond to concerns from visitors & The National Park Service.

2 How do you inform community members of important matters that affect them?

Letter to the National Park Service or Newsletter available to Park visitors.

3 How will you make the Performance Track Annual Performance Report available to the public?

- ☐ Website www.
- ☑ Newspaper
- ☐ Open Houses
- ☐ Other

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Section D, continued

4 Are there any ongoing citizen suits against your facility? ☐ Yes ☑ No

If yes, describe briefly in the right-hand column.

5 List references below

	Organization	Name	Phone number
Representative of a Community/ Citizen Group	Rotary Club Of Carlsbad	John Caraway	505-885-4171 Carlsbad, NM
State/tribal/local regulator	U.S. Public Health Service	Joe Winkelmeier	505-989-6040 Santa Fe, NM
Other community/local reference (e.g., emergency management official or business associate)	Joe Hanttula, CPA	Joe Hanttula	505-887-1903 Carlsbad, NM
	County Manager (Eddy County)	Steve Massey	505-887-9511 Carlsbad, NM
	MAYOR City of Carlsbad	Bob Forrest	505-887-3798 Carlsbad, NM
	White's City	Jack White	505-885-5801 Carlsbad, NM

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Section E

Application and Participation Statement.

On behalf of _____
[my facility],

I certify that

I have read and agree to the terms and conditions for Application and Participation in the National Environmental Performance Track, as specified in the *National Environmental Performance Track Program Guide* and in the *Application Instructions*;

- I have personally examined and am familiar with the information contained in this Application, including the Environmental Requirements Checklist. The information contained in this Application is, to the best of my knowledge and based on reasonable inquiry, true, accurate, and complete, and I have no reason to believe the facility would not meet all program requirements;
- My facility has an environmental management system (EMS), as defined in the Performance Track EMS requirements, including systems to maintain compliance with all applicable Federal, State, tribal, and local environmental requirements in place at the facility, and the EMS will be maintained for the duration of the facility's participation in the program;
- My facility has conducted an objective assessment of its compliance with all Federal, State, tribal, and local environmental requirements, and the facility has corrected all identified instances of potential or actual noncompliance;
- Based on the foregoing compliance assessment and subsequent corrective actions (if any were necessary), my facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with applicable Federal, State, tribal, and local environmental requirements.

I agree that EPA's decision whether to accept participants into or remove them from the National Environmental Performance Track is wholly discretionary, and I waive any right that may exist under any law to challenge EPA's acceptance or removal decision.

I am the senior facility manager and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is applying to this program.

Signature/Date	9-26-03
Printed Name/Title	Mr./Mrs./Ms./Dr. Dudley C. Jones - Vice-President
Phone Number/E-mail	505-885-6066 csc@pccnm.com
Facility Name	The Cavern Supply Co. Inc.
Facility Street Address	727 Carlsbad Caverns Highway
City/State/Zip Code	Carlsbad, NM 88220

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The National Environmental Performance Track is a U.S. Environmental Protection Agency program. Please direct inquiries to 1-888-339-PTRK (7875) or e-mail ptrack@indecon.com.

To submit your application:

1) E-mail the completed application to ptrack@indecon.com,

   and

2) Fax the completed an signed Section E (**not** the entire application) to (617) 354-0463.

If you cannot e-mail the application, mail a hard copy of the entire completed application to:

The Performance Track Information Center
c/o Industrial Economics Incorporated
2067 Massachusetts Avenue
Cambridge, MA 02140

Paperwork Reduction Act Notice

The public reporting and recordkeeping burden for this collection of information is estimated to average 40 hours per response. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Environmental Requirements Checklist

Use the Environmental Requirements Checklist to answer Question 5 in *Section A, Tell us about your facility.* This Checklist will help you identify the *major* Federal, State, tribal, and local environmental requirements that apply at your facility, but it is not an exhaustive list of all environmental requirements that may be applicable at your facility.

If you use this Checklist and choose to submit it with your application, fill in your facility information below and enclose the completed Checklist with your application.

Air Pollution Requirements
Check all that apply.

- ☐ 1. National Emission Standards for Hazardous Air Pollutants (40 CFR 61)
- ☐ 2. Permits and Registration of Air Pollution Sources
- ☐ 3. General Emission Standards, Prohibitions, and Restrictions
- ☐ 4. Control of Incinerators
- ☐ 5. Process Industry Emission Standards
- ☐ 6. Control of Fuel Burning Equipment
- ☐ 7. Control of VOCs
- ☐ 8. Sampling, Testing, and Reporting
- ☐ 9. Visible Emissions Standards
- ☐ 10. Control of Fugitive Dust
- ☐ 11. Toxic Air Pollutants Control
- ☐ 12. Vehicle Emissions Inspections and Testing

Other (you must list these if applicable)

- ☐ 13. Other Federal, State, tribal, or local regulations not listed above.

  _____

  _____

- ☐ 14. ID Numbers (specify whether State or Federal).

  _____

  _____

  _____

Hazardous Waste Management Regulations

Check all that apply.

☐ 1. Identification and listing of hazardous waste (40 CFR 261)

- ☐ -Characteristic waste
- ☐ -Listed waste

☐ 2. Standards Applicable to Generators of Hazardous Waste (40 CFR 262)

- ☐ -Manifesting
- ☐ -Pre-transport requirements
- ☐ -Record-keeping/Reporting

☐ 3. Standards Applicable to Transporters of Hazardous Waste (40 CFR 263)

- ☐ -Transfer facility requirements
- ☐ -Manifest system and record-keeping
- ☐ -Hazardous waste discharges

☐ 4. Standards for Owners and Operators of TSD Facilities (40 CFR 264)

- ☐ -General facility standards
- ☐ -Preparedness and prevention
- ☐ -Contingency plan and emergency procedures
- ☐ -Manifest system, record-keeping, and reporting
- ☐ -Groundwater protection
- ☐ -Financial requirements
- ☐ -Use and management of containers
- ☐ -Tanks
- ☐ -Waste piles
- ☐ -Land treatment
- ☐ -Incinerators

☐ 5. Interim Standards for TSD Owners and Operators (40 CFR 265)

☐ 6. Interim Standards for Owners and Operators of New Hazardous Waste Land Disposal Facilities (40 CFR 267)

☐ 7. Administered Permit Program (Part B) (40 CFR 270)

Other (you must list these if applicable)

☐ 8. Other Federal, State, tribal, or local regulations not listed above.

_____

_____

☐ 9. ID Numbers (specify whether State or Federal).

_____

_____

_____

Hazardous Materials Management

Check all that apply.

☐ 1. Control of Pollution by Oil and other Hazardous Substances (33 CFR 153)

☐ 2. Designation of Reportable Quantities and Notification of Hazardous Materials Spill (40 CFR 302)

☐ 3. Hazardous Materials Transportation Regulations (49 CFR 172-173)

☐ 4. Worker Right-to-Know Regulations (29 CFR 1910.1200)

☐ 5. Community Right-to-Know Regulations (40 CFR 350-372)

☐ 6. Underground Storage Tank Regulations (40 CFR 280-282)

Other (you must list these if applicable)

☐ 7. Other Federal, State, tribal, or local Regulations not listed above.

_____

_____

☐ 8. ID Numbers (specify whether State or Federal).

_____

_____

_____

Solid Waste Management

Check all that apply.

☐ 1. Criteria for Classification of Solid Waste Disposal Facilities and Practices (40 CFR 257)

☐ 2. Permit Requirements for Solid Waste Disposal Facilities

☐ 3. Installation of Systems of Refuse Disposal

☐ 4. Solid Waste Storage and Removal Requirements

☐ 5. Disposal Requirements for Special Wastes

Other (you must list these if applicable)

☐ 6. Other Federal, State, tribal, or local regulations not listed above.

_____

_____

☐ 7. ID Numbers (specify whether State or Federal).

_____

_____

_____

Water Pollution Control Requirements

Check all that apply.

☐ 1. Oil Spill Prevention Control and Countermeasures (SPCC) (40 CFR 112)

☐ 2. Designation of Hazardous Substances (40 CFR 116)

☐ 3. Determination of Reportable Quantities for Hazardous Substances (40 CFR 117)

☐ 4. NPDES Permit Requirements (40 CFR 122)

☐ 5. Toxic Pollutant Effluent Standards (40 CFR 129)

☐ 6. General Pretreatment Regulations for Existing and New Sources (40 CFR 403)

Name of POTW _____

ID # of POTW _____

☐ 7. Organic Chemicals Manufacturing Point Source Effluent Guidelines and Standards (40 CFR 414)

☐ 8. Inorganic Chemicals Manufacturing Point Source Effluent Guidelines and Standards (40 CFR 415)

☐ 9. Plastics and Synthetics Point Source Effluent Guidelines and Standards (40 CFR 416)

☐ 10. Water Quality Standards

☐ 11. Effluent Limitations for Direct Dischargers

☐ 12. Permit Monitoring/Reporting Requirements

☐ 13. Classifications and Certifications of Operators and Superintendents of Industrial Wastewater Plants

☐ 14. Collection, Handling, and Processing of Sewage Sludge

☐ 15. Oil Discharge Containment, Control, and Cleanup

☐ 16. Standards Applicable to Indirect Discharges (Pretreatment)

Other (you must list these if applicable)

☐ 17. Other Federal, State, tribal, or local regulations not listed above.

_____

_____

☐ 18. ID Numbers (specify whether State or Federal).

_____

_____

_____

Drinking Water Regulations

Check all that apply.

- ☐ 1. Underground Injection and Control Regulations, Criteria, and Standards (40 CFR 144, 146)
- ☐ 2. National Primary Drinking Water Standards (40 CFR 141)
- ☐ 3. Community Water Systems Monitoring and Reporting Requirements (40 CFR 141)
- ☐ 4. Permit Requirements for Appropriation/Use of Water from Surface or Subsurface Sources
- ☐ 5. Underground Injection Control Requirements
- ☐ 6. Monitoring, Reporting, and Record-keeping Requirements for Community Water Systems

Other (you must list these if applicable)

- ☐ 7. Other Federal, State, tribal, or local regulations not listed above.

  _____

  _____

- ☐ 8. ID Numbers (specify whether State or Federal).

  _____

  _____

  _____

Toxic Substances

Check all that apply.

- ☐ 1. Manufacture and Import of Chemicals, Record-keeping, and Reporting Requirements (40 CFR 704)
- ☐ 2. Import and Export of Chemicals (40 CFR 707)
- ☐ 3. Chemical Substances Inventory Reporting Requirements (40 CFR 710)
- ☐ 4. Chemical Information Rules (40 CFR 712)
- ☐ 5. Health and Safety Data Reporting (40 CFR 716)
- ☐ 6. Pre-manufacture Notifications (40 CFR 720)
- ☐ 7. PCB Distribution Use, Storage, and Disposal (40 CFR 761)
- ☐ 8. Regulations on Use of Fully Halogenated Chlorofluoroalkanes (40 CFR 762)
- ☐ 9. Storage and Disposal of Waste Material Containing TCDD (40 CFR 775)

Other (you must list these if applicable)

- ☐ 10. Other Federal, State, tribal, or local regulations not listed above.

  _____

  _____

☐ 11. ID Numbers (specify whether State or Federal).

_____

_____

_____

Pesticide Regulations

Check all that apply.

☐ 1. FIFRA Pesticide Use Classification (40 CFR 162)

☐ 2. Procedures for Storage and Disposal of Pesticides and Containers (40 CFR 165)

☐ 3. Certification of Pesticide Applications (40 CFR 171)

☐ 4. Pesticide Licensing Requirements

☐ 5. Labeling of Pesticides

☐ 6. Pesticide Sales, Permits, Records, Application, and Disposal Requirements

☐ 7. Disposal of Pesticide Containers

☐ 8. Restricted Use and Prohibited Pesticides

Other (you must list these if applicable)

☐ 9. Other Federal, State, tribal, or local regulations not listed above.

_____

_____

☐ 10. ID Numbers (specify whether State or Federal).

_____

_____

_____

Environmental Clean-up, Restoration, and Corrective Action

☐ 1. Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or Superfund). Please identify and include date of Record of Decision.

_____

_____

☐ 2. RCRA Corrective Action. Please provide date of RCRA/HSWA permits that require corrective action.

_____

_____

☐ 3. Other Federal, State, tribal, or local environmental clean-up, restoration, corrective action regulations not listed above. Please include date of requirement.

_____

_____

Facility name:

_____

Facility location:

_____