

COLUMBIA SOUTH SHORE WELL FIELD WELLHEAD PROTECTION ANNUAL HAZARDOUS MATERIAL INVENTORY REPORT

Section A – Facility Information

I. Business Name

II. Site Address

III. Mailing Address (if different from Site Address)

IV. E-Mail Address

V. Declaration

I do not have over the locally regulated amount of chemicals: aggregate of 10 gallons halogenated solvent and/or 50 gallons hazardous substance and/or 30 gallons hazardous waste.

I have locally regulated quantities of chemicals and have included my Hazardous Materials Inventory Reports.

I certify that the information provided is true and accurate to the best of my knowledge.

Signature: _____ Title: _____

Print Name: _____ Date: _____ Phone #: _____

MAIL COMPLETED ANNUAL HAZARDOUS MATERIAL INVENTORY AND FACILITY INFORMATION REPORTS BY DECEMBER 30TH TO:

**Douglas Wise
Portland Water Bureau
1120 SW 5th Ave. Room 600
Portland, OR 97204**