

1. Permit Number \_\_\_\_\_ 2. Reporting period (calendar year): \_\_\_\_\_

3. Company information:

Legal Name:	Other company name (if different than legal name):
Mailing Address:	Site Address (if different than mailing address):
City, State, Zip Code:	City, County, Zip Code:

4. Site Contact Person:

Name:	Telephone number:
Title:	Fax Number:
Email:	

5. Number of gallons of VOC and/or HAP containing coatings and solvents used per year: \_\_\_\_\_

6. Please list any air quality/nuisance complaints received within the last calendar year? How were the complaints addressed?

7. Certifying Signature

Name of official (Printed or Typed):	Title of official and phone number:
Signature of official:	Date:

**SUBMISSION INSTRUCTIONS:**

Email this completed form to the Environmental Coordinator at [permitting@lrpa-or.gov](mailto:permitting@lrpa-or.gov)

Lane Regional Air Protection Agency  
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Springfield, OR 97477  
(541) 736-1056