**POLLUTION PREVENTION PLAN**

**CERTIFICATION OF PLAN COMPLETION**

**(To be submitted with Worksheets 1, 2, and 10, as the Plan Summary, if facility elects not to submit the complete Plan.)**

This document certifies that a complete Pollution Prevention Plan has been developed in accordance with this Planning Guidance (July, 2017) and that the information provided herein is true, correct and complete. I understand that this facility’s Pollution Prevention Plan must be available for on-site review by staff of the Environmental Assistance Office.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_