

**OHIO ENVIRONMENTAL PROTECTION AGENCY
TOXIC RELEASE INVENTORY PROGRAM (TRI)
NEGATIVE SURVEY TRI REPORTERS**

PLEASE COMPLETE THIS FORM IF YOUR FACILITY IS NOT SUBJECT TO THE TRI, SECTION 313 REPORTING REQUIREMENTS.

FACILITY IDENTIFICATION

Reporting Year:

Facility Name:	TRI ID:
Facility Address:	Mailing Address:
City:	City:
Zip Code:	State:
County:	Zip Code:

FACILITY CONTACT

Technical Contact: Please provide the name of the person employed by your facility who would be contacted by the staff of the Ohio EPA/DAPC/TRI Unit concerning Emergency Planning and Community Right-to-Know Act activities:

Contact Name:

Telephone Number:

REASON FOR NOT FILING TRI REPORTS

1. Did you have 10 or more full-time employees?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. Did the facility operate under a covered NAICS Code?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Did you manufacture or process more than the threshold amount of any covered chemical or chemical category?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. Did you otherwise use more than the threshold amount of any covered chemical or chemical category?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. Did your facility cease operations? If yes, when?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please provide any other reason for not reporting:

.....

.....

.....

WHERE TO MAIL COMPLETED FORM

Ohio Environmental Protection Agency
Division of Air Pollution Control
TRI Program
P. O. Box 1049
Columbus, Ohio 43216-1049

You may also fax Ohio EPA a copy of the completed Form at (614) 644-3681. No fees are required if you file this form. If you have any questions, please contact the Ohio EPA Division of Air Pollution Control-TRI Program at (614) 644-2270.