



# TOTAL TOXIC ORGANICS CERTIFICATION REPORT

City of Everett Industrial Pretreatment Program

Select reporting period from drop-down list

Year

Select due date from drop-down list

Year

Company name

Permit #

Facility address

*Based on my inquiry of the person or persons directly responsible for managing compliance with the permit limitation or pretreatment standard for TTO, I certify that, to the best of my knowledge and belief no dumping of concentrated toxic organics into the wastewaters has occurred since filing of the last discharge monitoring report. I further certify that this facility is implementing the solvent management plan submitted to the City.*

*I certify under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.*

Authorized Representative signature

Date

Authorized Representative printed name

Submit physically signed copies of this report to the following:

City of Everett Industrial Pretreatment Program  
3200 Cedar Street  
Everett, WA 98201