

<b>EPA</b> U.S. Environmental Protection Agency STRATOSPHERIC OZONE PROTECTION PROGRAM		CLASS II CONTROLLED SUBSTANCE EXPORTER QUARTERLY REPORT (Sec 82.24)	
<b>SECTION 1 EXPORTING COMPANY IDENTIFICATION</b>			
<b>1.1 Date of Submission</b>		<b>1.2 Number of Transactions Reported</b>	
<b>1.3 Number of Pages Submitted</b>		<b>1.4</b> <input type="checkbox"/> Original Submittal <input type="checkbox"/> Re-submittal	
<b>1.5 Quarter and Year to Which This Report Applies</b>			
<input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> Year _____			
<b>1.6 Exporting Company</b>			
Company Name			
Street Address			
City		State	Zip Code
Exporter EIN from Customs Form 7525			
<b>1.7 Company Contact Identification</b>			
Reporting Company Contact Person			
E-mail Address			
Phone Number		Fax Number	
<b>1.8 Signature of Reporting Company Representative</b>			
<i>I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.</i>			
Name			
Title			
Signature		Date	
<b>SEND COMPLETED FORMS TO:</b>	<b>For U.S. Postal Service:</b>	<b>For Private Courier:</b>	
	Tracking System Program Manager Stratospheric Protection Division U.S. EPA (6205J) 1200 Pennsylvania Avenue, NW Washington, DC 20460	Tracking System Program Manager Stratospheric Protection Division U.S. EPA (6205J) 1310 L Street, NW, 10 <sup>th</sup> Floor Washington, DC 20005	

Information in reports submitted in compliance with the final rule may be claimed as confidential. A company may assert a claim of confidentiality for information submitted by clearly marking that information as confidential. Such information shall be treated in accordance with EPA's procedures for information claimed as confidential at 40 CFR Part 2, Subpart B, and will only be disclosed by the means set forth in the subpart. If no claim of confidentiality accompanies the report when it is received by EPA, it may be made public without further notice to the company (40 CFR 2.203).

The public reporting and recordkeeping burden for this collection of information is estimated to average 4.5 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

**EPA** U.S. Environmental Protection Agency  
STRATOSPHERIC OZONE PROTECTION PROGRAM

CLASS II CONTROLLED SUBSTANCE  
EXPORTER QUARTERLY REPORT  
(Sec 82.24)

**SECTION 2 TRANSACTION RECORDS****(Reproduce Additional Sheets as Needed)**

2.1 Company Name

2.2 Transaction Summaries

TRANSACTION #			
Recipient Company Name			
Street Address			
City		Country	
Company Contact Person		Phone Number	Postal Code
Port of Export from the U.S.		Date of Export (mm/dd/yy)	
If Export <b>Is Not</b> a Blend:	HCFC:	Quantity (kg):	
If Export <b>Is</b> a Blend:	Name of Blend:	Quantity (kg):	
HCFC in Blend: Quantity (kg):	HCFC in Blend: Quantity (kg):	HCFC in Blend: Quantity (kg):	
Transaction Type:	<input type="checkbox"/> New	<input type="checkbox"/> Used	
If New:	<input type="checkbox"/> Transformation	<input type="checkbox"/> Destruction	<input type="checkbox"/> Produced or Imported <b>with</b> Production and/or Consumption Allowances
	<input type="checkbox"/> Produced with Article 5 Allowances	<input type="checkbox"/> Produced or Imported <b>without</b> Production and/or Consumption Allowances	
If Used:	<input type="checkbox"/> Transformation	<input type="checkbox"/> Destruction	<input type="checkbox"/> Other

TRANSACTION #			
Recipient Company Name			
Street Address			
City		Country	
Company Contact Person		Phone Number	Postal Code
Port of Export from the U.S.		Date of Export (mm/dd/yy)	
If Export <b>Is Not</b> a Blend:	HCFC:	Quantity (kg):	
If Export <b>Is</b> a Blend:	Name of Blend:	Quantity (kg):	
HCFC in Blend: Quantity (kg):	HCFC in Blend: Quantity (kg):	HCFC in Blend: Quantity (kg):	
Transaction Type:	<input type="checkbox"/> New	<input type="checkbox"/> Used	
If New:	<input type="checkbox"/> Transformation	<input type="checkbox"/> Destruction	<input type="checkbox"/> Produced or Imported <b>with</b> Production and/or Consumption Allowances
	<input type="checkbox"/> Produced with Article 5 Allowances	<input type="checkbox"/> Produced or Imported <b>without</b> Production and/or Consumption Allowances	
If Used:	<input type="checkbox"/> Transformation	<input type="checkbox"/> Destruction	<input type="checkbox"/> Other

