

U.S. Environmental Protection Agency STRATOSPHERIC OZONE PROTECTION PROGRAM	CLASS I CONTROLLED SUBSTANCE METHYL BROMIDE SALES OF CRITICAL USE METHYL BROMIDE TO END USERS ANNUAL REPORT (40 CFR 82.13)
--	---

NOTE: FORM MUST BE COMPLETED BY ANY COMPANY THAT PROVIDED METHYL BROMIDE GAS OR FUMIGATIONS TO CRITICAL USERS. FORM MUST BE COMPLETED BY A CENTRAL OFFICE ON BEHALF OF THEIR DIVISIONS; ONE FORM PER COMPANY.

SECTION 1 COMPANY IDENTIFICATION

1.1 Date of Submission		1.2 Year to Which This Report Applies	
-------------------------------	--	--	--

1.3 **Original Submittal** **Re-submittal**

1.4 Company Information

Company Name		
Street Address		
City	State	Zip Code

1.5 Company Contact Identification

Reporting Company Contact Person	
E-mail Address	
Phone Number	Fax Number

1.6 Company Type (check all that apply)	<input type="checkbox"/> Distributor	<input type="checkbox"/> Third Party Applicator	<input type="checkbox"/> Producer	<input type="checkbox"/> Importer
--	--------------------------------------	---	-----------------------------------	-----------------------------------

1.7 Signature of Reporting Company Representative

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.

Name	
Title	
Signature	Date

SEND COMPLETED FORMS TO:	For U.S. Postal Service: U.S. EPA Stratospheric Protection Division Office of Atmospheric Programs Mail Code: 6205T 1200 Pennsylvania Avenue, NW Washington, D.C. 20460	For Private Courier: U.S. EPA Stratospheric Protection Division Office of Atmospheric Programs Room 4355VV 1201 Constitution Avenue, NW Washington, D.C. 20004
---------------------------------	--	---

A company may assert a claim of confidentiality for information submitted in this form 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).

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2060-0170). Responses to this collection of information are mandatory (40 CFR 82.13). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The number and expiration date are displayed in the upper right corner of the form. The public reporting and recordkeeping burden for this collection of information is estimated to be 1 hour per response. Send comments on the Agency's need this formation, 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, Regulatory Support Division, U.S. Environmental Protection Agency (2821T), 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 I CONTROLLED SUBSTANCE METHYL BROMIDE SALES OF CRITICAL USE METHYL BROMIDE TO END USERS ANNUAL REPORT (40 CFR 82.13)	
SECTION 2 SALES DATA		
2.1 Company Name		
2.2 Critical Use Methyl Bromide (newly produced or imported) sold (active ingredient only)*	Pre-Plant (kg) _____ Post-Harvest (kg) _____	
<u>Year-End Inventory Calculation</u>		
2.3.A Beginning Inventory of Critical Use Methyl Bromide from Prior Control Periods, if any (NOT pre-phaseout stocks). Note: This is the same amount as the previous control period's ending inventory.*	Pre-Plant (kg) _____ Post-Harvest (kg) _____	
2.3.B Critical Use Methyl Bromide Bought this Year (only new production/import, NOT pre-phaseout stocks)*	Pre-Plant (kg) _____ Post-Harvest (kg) _____	
2.4 Critical Use Methyl Bromide Sold to an Entity Other than a Critical User (e.g., Distributor, Third Party Applicator)*	Pre-Plant (kg) _____ Post-Harvest (kg) _____	
2.5 Year-End Inventory – Critical Use Methyl Bromide Not Sold In Reporting Year (2.3.A + 2.3.B – 2.2 – 2.4)*	Pre-Plant not sold by year end (kg) _____ Post-Harvest not sold by year end (kg) _____	
2.6 Name(s) of Company(ies) for which Newly Produced Critical Use Methyl Bromide is Being Held and Associated Amount (kg) Held for Each (excluding end-users)		
Company Name:	Pre-Plant (kg):	Post-Harvest (kg):
Company Name:	Pre-Plant (kg):	Post-Harvest (kg):
Company Name:	Pre-Plant (kg):	Post-Harvest (kg):
NOTE: COMPLETE THE PRE-2005 METHYL BROMIDE STOCKS REPORT FOR QUANTITIES OF METHYL BROMIDE OWNED THAT WAS PRODUCED/IMPORTED BEFORE JANUARY 1, 2005.		

*If none, enter 0. Do not leave blank.