



Central Valley Water
Reclamation
Facility

TOTAL TOXIC ORGANICS CERTIFICATION REPORT

Industrial Users subject to self-monitoring requirements for Total Toxic Organics (TTO) must submit this certification report where an approved Toxic Organic Management Plan (TOMP) has been implemented.

Facility Name _____

Address (Street) _____

(City, Zip) _____

Reporting period: From _____ to _____

CHECK BOX AND COMPLETE

- Based on my inquiry of the person or persons directly responsible for managing compliance with the TTO limitations, 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 report. I further certify that this facility is implementing the approved toxic organic pollutant management plan submitted to the Central Valley Water Reclamation Facility on _____.

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 gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the 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/or imprisonment for knowing violations.

Signature of Authorized Representative

Date