

Notice of Approved Construction Completion

*Return this form within 30 days of completion of approved construction.

NC Application Number:	
Permit Number (if applicable):	
Company Name:	
Street Address:	
City, State, Zip Code:	
County (Required)	
Contact Person:	
Phone Number:	
Brief description of installed facility/equipment:	
Date construction completed:	
Date placed in operation:	

Certification

I certify that the information contained in this notice, including any schedules and exhibits attached to the notice, are true and correct to the best of my knowledge and belief.

Name of Responsible Official

Title of Responsible Official

Signature of Responsible Official

Date

Submit completed Notice of Approved Construction Completion Form to the appropriate Regional Office by selecting the County where the facility is located and email a convenience copy to:

Select County:
Oregon Department of Environmental Quality