State of Oregon
Department of
Environmental
Quality

Highest and Best Practicable Treatment and Control
Operation and Maintenance Monitoring

FORM CP703
Answer Sheet

Facility name: _____ Permit Number: _____

1. Monitoring information:

Emissions Unit/Control Device IDs	Pollutant/ parameter	Action Level or Range	Sample Location	Monitoring Frequency	Averaging Time	CP700 Form Reference

2. For each emissions unit/control device, describe the monitoring approach in more detail if it is not otherwise described on a CP700 form.