

State of Oregon Department of Environmental Quality

Industrial Stormwater PermitsTier 1 Report Form

Instructions: Fill out this form if stormwater sampling results show an exceedance of any statewide benchmark(s) or sector specific benchmark(s) identified in the permit assignment letter. If you need additional space to answer the questions below, please attach additional sheet(s). The form must be filled out within 30 days of receiving analytical results. If no changes to the SWPCP are required or for benchmark exceedances, please retain this form onsite.

Date Form Prepared:	_
Facility Name:	File Number #:
County:	SIC Code(s):
Prepared By:	Phone Number:
Email Address:	_
` `	pollutants and benchmark concentrations): (list pollutants and benchmark concentrations):
Date Sampling Occurred:	_
Date Lab Results Received:	_
Describe the result(s) of the investigation of the	elevated pollutant levels:

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Describe the corrective action(s) you will take to address the benchmark exceedence(s):	
Date corrective action(s) completed or expected to be completed:	
Are SWPCP revisions necessary? Yes No	
If "Yes", please describe revisions below:	
As part of Tier 1 corrective action, did you complete industrial-specific checklists? Yes No	
Please submit a revised SWPCP to DEQ or agent, including a schedule for implementing the control measures if required	

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