Hazardous Material Inventory and Hazardous Material Business Plan (HMBP) Certification Statement for 2011.

Subject: **Hazardous Material Inventory and Hazardous Material Business Plan (HMBP) for** _____ _____**,El Segundo**
(Business Name) (Hazardous Material Address)

Hazardous Material Inventory

☐ This is to certify that the information contained in the hazardous material inventory form submitted _____ to the El Segundo Fire Department is complete, accurate and up to date.
(Date of last submittal)

Further:

- There has been no change in the quantity of any hazardous material as reported in the most recently submitted hazardous material inventory form.
- No hazardous materials subject to the inventory requirements are being handled that are not listed on the most recently submitted hazardous material inventory form.
- No changes in business address, business ownership and business name.

Our environmental contact is: _____
E-mail:_____ **Phone:** _____

☐ Our Hazardous Material Inventory is not updated with the El Segundo Fire Department and we will submit a current Hazardous Material Inventory **immediately**.

Hazardous Material Business Plan

Hazardous Material Business Plan (HMBP) shall be reviewed at least once every three years. Ensure that the El Segundo Fire Department has your current HMBP on file. If unsure please resubmit HMBP.

☐ I certify that El Segundo Fire Department has our current/updated HMBP on file
_____
(Date of last submittal)

☐ Our HMBP is not updated with the El Segundo Fire Department and we will submit an electronic HMBP attachment **immediately. (Electronic form available on El Segundo Website)**

I certify under penalty of law that our business has reviewed the current hazardous materials inventory and hazardous material business plan on file with the El Segundo Fire Department and certify the submitted information is true, accurate and complete.

_____ _____ _____
(Printed name of authorized company representative) (Signature of authorized company representative) (Today's Date)

PLEASE RETURN THIS FORM
WITHIN 2 WEEKS OF RECEIPT
To: stsumura@elsegundo.org

314 Main St • El Segundo • CA • 90245• (310) 524-2236 • Fax (310) 414-0929