



Public Works and Environmental Services Department
ENVIRONMENTAL PERMITTING DIVISION
One North University Drive, Suite 201, Plantation, Florida 33324
Phone: 954-519-1483 - Fax: 954-519-1412

Owner Name, Title: _____ Business Name: _____
Owner Entity/Corp Name: _____
Location Address: _____ City: _____ Zip: _____
Mailing Addr (if different): _____ City, ST: _____ Zip: _____
Contact Name, Title: _____ Phone: _____ email: _____

Statement of Operation Beneath the Hazardous Material Licensing Threshold

Please review the referenced facility's usage and/or storage of hazardous materials to determine if:

- 1) The facility currently operates at a level below the licensing threshold outside wellfield zones one and two. (Licensing thresholds are defined in the Fact Sheet enclosed.) AND
- 2) No regulated substances are used or stored inside wellfield zones one or two.

If BOTH of the above statements are true, the business may not require a Broward County Hazardous Material License at this time. Instead, please read, complete and return this page with the Statement of Hazardous Material Usage properly signed below. The business must still comply with those County regulations governing the usage and storage of hazardous materials. For more information contact our office or visit our website at <http://www.broward.org/consumer>.

The Division (EPD) encourages businesses to reduce their usage and storage of hazardous materials, and would welcome an opportunity to provide further assistance toward achieving this goal. However, if the business currently uses or stores hazardous materials in amounts above the Broward County licensing threshold, a license is required. To obtain the license, complete the enclosed license application and return it to this office with the fee payment prior to the expiration of the current license or, if the license has expired, within fifteen (15) days of receipt of this notice.

**Return this form with your SIGNED STATEMENT below OR
your COMPLETED LICENSE APPLICATION AND FEE PAYMENT
prior to the license expiration or within fifteen (15) days**

STATEMENT OF HAZARDOUS MATERIAL USAGE BENEATH THE LICENSING THRESHOLD

I, _____ the owner or operator of the facility referenced above
(Print Name and Title) hereby attest that I have read and understood this statement and the definitions enclosed. I acknowledge that it is a violation of the Broward County Natural Resource Protection Code (Code) to knowingly make any false statement, representation or certification and have thoroughly assessed the hazardous material usage and storage at the facility. I certify that the amount of hazardous materials used, stored, generated or processed fall below the licensing threshold as defined for a Hazardous Material Facility. I also understand that the facility may be inspected at any time to confirm this statement. This facility will comply with the Code and will immediately notify the ENVIRONMENTAL PERMITTING DIVISION if conditions change resulting in this facility requiring a Hazardous Material Facility License and will immediately submit a complete application and license fee to obtain the License. This certification remains in effect until superseded by submittal of an application or re-certification.

(Owner/operator signature)

(Date)