

The proposed format, content, and due date for the completion report to be submitted to EPD after corrective action objectives are satisfied. A final completion report is required within 30 days of completing all corrective action specified in the CAP-[Part A][Part B]. This completion report must include the following certification (verbatim) completed and signed by the owner or operator.

Certificate of Completion

I hereby certify that the Corrective Action Plan-[Part A][Part B], dated _____, 19__, for (facility name)_____, Facility ID#:_____, including any and all certified amendments thereto, has been implemented in accordance with the schedules, specifications, sampling programs, and conditions contained therein, and that the plan's stated objectives have been met.

Signature (Owner/Operator)