Perfluorochemical (PFC) and Fluorotelomer Inventory Form

Company Name: _____

MCES Permit Number: _____ Industry Type: _____

Name of survey respondent: _____

Signature: _____

Email: _____ Phone: _____

☐ This facility has conducted a thorough inventory of all chemicals and materials used or stored at the facility and found that none of them contain any PFCs or fluorotelomer chemistry.

☐ This facility has conducted a thorough inventory of all chemicals and materials used or stored at the facility and found that the following products contain one or more PFCs and/or fluorotelomer chemicals and are managed in the way indicated.

Product Used:	PFC/Fluorotelomer CAS Number:
Frequency Used (daily, weekly, etc.):	
Discharged to Sanitary Sewer? ☐ Yes ☐ No If yes, indicate gallons per day or year:	
Exhaust (containing product) is vented to roof or sidewall vents? ☐ Yes ☐ No If yes, the facility's stormwater is discharged to: ☐ sanitary sewer ☐ storm sewer ☐ don't know	

Product Used:	PFC/Fluorotelomer CAS Number:
Frequency Used (daily, weekly, etc.):	
Discharged to Sanitary Sewer? ☐ Yes ☐ No If yes, indicate gallons per day or year:	
Exhaust (containing product) is vented to roof or side vents? ☐ Yes ☐ No If yes, the facility's stormwater is discharged to: ☐ sanitary sewer ☐ storm sewer	

Product Used:	PFC/Fluorotelomer CAS Number:
Frequency Used (daily, weekly, etc.):	
Discharged to Sanitary Sewer? ☐ Yes ☐ No If yes, indicate gallons per day or year:	
Exhaust (containing product) is vented to roof or side vents? ☐ Yes ☐ No If yes, the facility's stormwater is discharged to: ☐ sanitary sewer ☐ storm sewer	

Please return form by May 31 to:

Metropolitan Council Environmental Services
Industrial Waste & Pollution Prevention Section
390 Robert Street N
St. Paul MN 55101-1805