



Industry Name \_\_\_\_\_ Date \_\_\_\_\_

## CHECKLIST FOR TOMP

	<u>Yes</u>	<u>No</u>
1. Does Plan have an inventory of toxic organic chemicals in use?	_____	_____
2. Has sampling and analysis been performed to identify inventory of toxic organic chemicals?	_____	_____
3. Have MSDS' been submitted?	_____	_____
4. Are methods of disposal included for all inventoried compounds including reclamation contract hauling or incineration?	_____	_____
5. Has an SPCC, BMP or Slug Control Plan been submitted identifying that toxic organic pollutants do not spill or routinely leak into process wastewaters, floor drains, non-contact cooling water, groundwater, surface, water, etc.?	_____	_____
6. Has the best estimate of quantities of toxic organics used in the process been included?	_____	_____
7. Was the TOMP included with the BMR?	_____	_____
8. Does the TOMP have the appropriate certification statement and official signature?	_____	_____

**Comments:**

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