OMB No. 2010-0032 Expiration Date: 06/30/06



Annual Performance Report Form

Facility Name:

Performance Track ID #:

Annual Performance Report # (1st, 2^{nd, or} 3rd):

Reporting Year: 2003

Due Date: April 1, 2004

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Section A

General Facility Information

Please complete each of the items below. If any of the information that you are providing is different than the information that you provided in your application to the Performance Track program, please check the box to the left of the item(s) to indicate where changes have been made.

A.1	Is this in	formation different than you reported in your application? If so, check box. Name of your facility (as you wish to see it written on Performance Track public materials):
A.2 A.3		Name of your parent company: Facility contact person for the Performance Track program Name:
		Title: Phone: Fax: E-mail: Mailing address, if different than the facility location given in A.4 below:
A.4		Facility's location Street Address: Street Address (cont.): City/State/Zip Code:
A.5 A.6		Facility's website address (if any): Number of employees (full-time equivalents) who currently work in the facility: ☐ Fewer than 50 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 - 1000 ☐ More than 1000
A.7		Does your company meet the Small Business Administration definition of a small business for your sector? Yes No
A.8		North American Industrial Classification System (NAICS) Code(s) that are used to classify business at the facility:
A.9		In your application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any (additional) changes to your facility's list of products and/or activities? If so, please list them in the space below. Yes No
A.10		Please update the list of environmental requirements that apply to your facility. In the space below, indicate any changes that have taken place during this reporting period. If you have no changes to report, please write "No changes."

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Section B

Environmental Management System

Β.	.1	Environmental Management System Assessment. Please summarize your EMS assessments. Attach additional sheets as necessary.
	a.	When was an EMS audit or other assessment last conducted by an independent third party at your facility? (year)
	cer	If an assessment was conducted during 2003, please provide the <i>type</i> (e.g., ISO 14001 tification), the <i>scope</i> , and the <i>month(s)</i> of each assessment.
	b.	When was an internal or corporate EMS audit last conducted at your facility? (year) If an audit was conducted during 2003, please provide the <i>scope</i> and the <i>month(s)</i> of each audit.
	C.	When was an internal or corporate compliance audit last conducted at your facility? (year) If a compliance audit was conducted during 2003, provide the <i>scope</i> and the <i>month</i> (s) of each audit, and indicate <i>who</i> conducted the audit(s) (e.g., facility staff, corporate groups, third party). (Do not include audits, inspections, or site visits by regulatory or other external organizations.)
	d.	(Optional) If you would like to describe any other audits or that were conducted at your facility, ase do so here.
	pie	

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Section B

(continued)

B.1

e. Briefly summarize corrective actions taken and other improvements made as a result of your EMS assessments and compliance audits.

f. Has your facility corrected all instances of potential non-compliance and EMS non-conformance identified during your audits and other assessments?

Yes No No such instances identified

If no, please explain your plans to correct these instances.

g. When was the last Senior Management review of your EMS completed? mo/yr

Who headed the review?

Name:

Title:

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Section B

(continued)

B.2 ISO 14001 Certification. Is your facility currently certified to ISO 14001?
Yes No

B.3 **Environmental Aspects Identification.** When did your facility last conduct a systematic identification and/or review of your environmental aspects? *mo/yr*

B.4 **Progress Toward Achieving Objectives and Targets.**In the table below, please provide a narrative summary of progress made toward EMS objectives and targets <u>other than those reported as Environmental Performance Commitments in Section C.</u> You may limit the summary to environmental aspects that are *significant* and towards which *progress* has been made during 2002. Attach additional sheets as necessary.

Environmental Aspect	Progress Made This Year (e.g., quantitative or qualitative improvements, activities conducted)
L	

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C.1

Environmental Performance Commitments

C.1 – C.4. Please use the tables on pages 6-9 to summarize your facility's environmental performance against your Performance Track performance commitments. **Complete only those boxes related to the baseline year, the year 2002, and the performance commitment.**

Performance Commitment 1

a. Use this table to report data related to your first performance commitment.

Category:						
Aspect						
Specific Information on A	spect(optional):					
	Baseline (as stated in your application)	Year 1	Year 2	Year 3	Performance Commitment (the goal stated in your application)	
Calendar Year						
Actual Quantity (per year)	۰					Deleted:
Measurement Units						
Normalizing Factor (i.e., factor for indexing to baseline year)	1.0				(if applicable)	
Basis for your Normalizing Factor						
Normalized Quantity (per year)) (i.e., quantity indexed to baseline)						

b. Briefly describe how you achieved improvements for this aspect or, if relevant, any circumstances that delayed progress.

c. Please list any other EPA voluntary programs to which you are also reporting these data (e.g., Energy Star, Project XL).

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(continued)

a. Use this table to rep		your second pe	erformance comm	nitment.	
Category:					
Aspect					
Specific Information on A	Aspect(optional):				
	Baseline (as stated in your application)	Year 1	Year 2	Year 3	Performance Commitment (the goal stated in your application)
Calendar Year					
Actual Quantity (per year)					
Measurement Units					
Normalizing Factor (i.e., factor for indexing to baseline year)	1.0				(if applicable)
Basis for your Normalizing Factor					
Normalized Quantity (per year) (i.e., quantity indexed to baseline)					

b. Briefly describe how you achieved improvements for this aspect or, if relevant, any circumstances that delayed progress.

c. Please list any other EPA voluntary programs to which you are also reporting these data (e.g., Energy Star, Project XL).

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(-						
C.	3 Performance Comm a. Use this table to repo		our third perfor	mance commitme	ent.	
	Category:					
	Aspect					
	Specific Information on A	spect (optional):				
		Baseline (as stated in your application)	Year 1	Year 2	Year 3	Performance Commitment (the goal stated in your application)
	Calendar Year					
	Actual Quantity (per year)					
	Measurement Units					_
	Normalizing Factor (i.e., factor for indexing to baseline year)	1.0				(if applicable)
	Basis for your Normalizing Factor					
	Normalized Quantity (per year) (i.e., quantity indexed to baseline)					
	b. Briefly describe how you delayed progress.					

c. Please list any other EPA voluntary programs to which you are also reporting these data (e.g., Energy Star, Project XL).

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(continued)

C.4 Performance Commitment 4

a. Use this table to report data related to your fourth performance commitment.

Category:					
Aspect					
Specific Information on A	Spect (optional):				
	Baseline (as stated in your application)	Year 1	Year 2	Year 3	Performance Commitment (the goal stated in your application)
Calendar Year					
Actual Quantity (per year)					
Measurement Units					
Normalizing Factor (i.e., factor for indexing to baseline year)	1.0				(if applicable)
Basis for your Normalizing Factor					
Normalized Quantity (per year) (i.e., quantity indexed to baseline)					

b. Briefly describe how you achieved improvements for this aspect or, if relevant, any circumstances that delayed progress.

c. Please list any other EPA voluntary programs to which you are also reporting these data (e.g., Energy Star, Project XL).

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Section D

Pub	lic Outreach and Performance Reporting
D.1	Please briefly describe the activities that your facility conducted in 2002 to interact with the community on environmental issues and to report publicly on environmental performance. Feel free, but not obligated, to attach supporting materials (e.g., meeting agendas, public announcements).
D.2	Please indicate which of the following methods your facility plans to use to make its Performance Track Annual Performance Report available to the public. Please check as many as are appropriate.

Section E

On be	half	of,
I certif	w the	(name of my facility)
rcenti	-	I have read and agree to the terms and conditions specified in <i>the National Environmental Performance Track Program Guide</i> . This facility, to the best of my knowledge, continues to meet all program criteria;
	\$	I have personally examined and am familiar with the information contained in this Annual Performance Report. The information contained in this report is, to the best of my knowledge and based on reasonable inquiry, true, accurate, and complete;
	٠	My facility has an environmental management system (EMS), as defined in the Performance Track EMS criteria, including systems to maintain compliance with all applicable federal, state, tribal, and local environmental requirements in place at the facility, and the EMS will be maintained for the duration of the facility's participation in the program;
	٠	My facility has conducted an objective assessment of its compliance with all applicable federal, state, tribal, and local environmental requirements; and the facility has corrected all identified instances of potential or actual noncompliance; and
	*	Based on the foregoing compliance assessments and subsequent corrective actions (if any were necessary), my facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with applicable federal, state, tribal, and local environmental requirements.
Enviro	onme	It EPA's decision whether to accept participants into or remove them from the National ental Performance Track is wholly discretionary, and I waive any right that may exist under any llenge EPA's acceptance or removal decision.
staten	nent	enior manager with responsibility for the facility and am fully authorized to execute this on behalf of the corporation or other legal entity whose facility is part of the National ental Performance Track program.
Signati	ure/D	ate
Printed	l Narr	ne
Title _		
Phone	Num	ber/E-mail Address
Facility	/ Nan	ne
Facility	Stre	et Address
Mailing	g Add	ress, if different from Facility Address
Perforr	nanc	e Track Identification Number

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Paperwork Reduction Act Notice

The public reporting and recordkeeping burden for this collection of information is estimated to average 188 hours per respondent annually. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

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