

General Permit (GP-021A)
for
Indoors Fumigation Operations of Cocoa Bean Products
Annual Report

Date of Submittal:

Facility Name:

Facility Street Address:

Facility Air Program Interest (PI) Number:

Activity Number (e.g., GEN230001):

Sulfuryl Fluoride Emissions Report

- Please complete questions one and two.

1. Total number of annual fumigations conducted:

2. Total pounds of annual sulfuryl fluoride emitted:

- Please complete Table A for any operations in the last year, where additional fumigant was introduced, or more fumigant than originally calculated for the chamber size.
Please add rows as needed.

Table A: Additional Fumigant Introduced

Date (mm/dd/yyyy)	Originally Calculated Dosage of Fumigant (lb)	Additional Fumigant Introduced to Chamber (lb)

Clear Table

GP-021A, Indoors Fumigation Operations: Sulfuryl Fluoride Cocoa Bean Prod
03/08/2023

- Please complete Table B for any operations in the last year, where 1PPM is exceeded at the expected time of aeration conclusion.
Please add rows as needed.

Table B: One Part Per Million (PPM) Exceedances

Date (mm/dd/yyyy)	Sulfuryl Fluoride Concentration (PPM)	Additional Mechanical Aeration Time (minutes)

Clear Table

Certifications

Responsible Official:

"I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this document and all attached documents and, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

Name: _____ Signature: _____ Date: _____

Individuals with Direct Knowledge:

"I certify, under penalty of law, that I believe the information provided in this document is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Instructions

- Annual Fumigation Report shall be submitted to the Department within (30 or 45) days after the end of each calendar year during which this permit was in effect.
- The Annual Fumigation Report shall be certified pursuant to N.J.A.C. 7:27-1.39 by the responsible official and email completed form with appropriate signature(s) as an attachment to pcpnotices@dep.nj.gov
- The reference in the email shall say: "Annual Report for GP-021A Indoors Fumigation Operations of Cocoa Bean Products"