

Rhode Island Department of Environmental Management

2023 Air Pollution Inventory





| Facility Name | | | | |
|--|---|--------------------------------|-----------------|--|
| | | | | |
| Signature of Person Completing Form | | | Date | |
| Certifier | | | | |
| | ollution inventory report to be sub ollution inventory report, they only | · | • | |
| Name | Phone # | Email | | |
| one Preparer for a facility Preparer for multiple facil | r pollution inventory reports for th . They can be staff and/or consulta ities. If a person preparing is also C | nts hired by the facility. One | person can be a | |
| Certifier. | | | | |
| Name | Phone # | Email | | |
| Name | Phone # | Email | | |
| Name | Phone # | Email | | |
| Please register each perso | on at https://cdx.epa.gov/ for the r | oles above. You will receive a | an email | |

Return Form to: dem.airinventory@dem.ri.gov Air Pollution Inventory, Office of Air Resources 235 Promenade Street, Providence, RI 02908-5767

confirmation when approved to start working in CAERS.