

Filling out Annual Reports

Objectives

- Assist in the login, preparation, and submittal of Annual Reports.

Prerequisites

- Submit the registration packet. The registration authorization packet and instructions can be found at: <https://smarts.waterboards.ca.gov/>
- Each user will be assigned a login and password to gain access to the SMARTS.
- SMARTS supports Internet Explorer only.

Logging into SMARTS

1. Open a web browser and visit <https://smarts.waterboards.ca.gov/>
2. The login prompt will appear. Enter the user ID and Password provided in the confirmation e-mail from smarts@waterboards.ca.gov.



By default a user ID is the first letter of the first name and full last name (e.g. registered user John Smith, user ID - jsmith). The user ID and password are case and space sensitive.

Initiating Report

1. After logging in, click on the menu link titled "Annual Report".
2. In the SMARTS Facility/Site Search screen, all previously registered facilities will appear as hyperlinks in the middle of the screen. To begin entering annual report data, click the correct facility link. If previously registered facilities are not visible, please contact the Storm Water Help Desk at stormwater@waterboards.ca.gov or 1-866-563-3107.

Storm Water Annual Report Monitoring (SWARM) Facility Search

Facility Name: [SWARM Help](#)

WDID:

Physical Address:

City: Zip: County:

Region:

Reporting Period: 2005 - 2006

Report Status: Submitted

Facility Name	WDID	Physical Address	Most Recent Reporting Period	Report Status
MERRILL QUARRY	6A021017260	null WOLF CREEK RD MARKLEEVILLE, CA	07/01/2005 - 06/30/2006	In-Progress

3. The current reporting period will be selected by default. Click the "Continue" button.

Gen Info | **Sampling** | Mon Locs | EDF | Raw Data | Data Sum

Choose Reporting Period: 2008 - 2009

4. Verify the information on the "General Info" Tab. In order to change the information on this screen, please fax a copy of the cover sheet with the corrections noted on it to 916-341-5543.

5. Click the "Sampling" Tab.

General Info | **Sampling** | Mon Locs | CDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

D. Sampling and Analysis Exemptions [E. Sampling and Analysis Details](#)

D1. For the reporting period, was your facility exempt from collecting and analyzing samples from two storm events in accordance with sections B.12 or 15 of the General Permit?

D2. Indicate the reason your facility is exempt from collecting and analyzing samples from two storm events. Attach a copy of the first page of the appropriate certification if you check boxes ii, iii, iv, or v.:

i. Participating in an Approved Group Monitoring Plan
 Group Name:
 If the affiliated Group Name is not displayed, please Fax a copy of the cover sheet with Group Name corrected on it - [click here to produce a pdf of the cover sheet of your annual report](#) - with the corrections noted on it to 916-341-5543.

ii. Submitted No Exposure Certification (NEC)
 Date Submitted: (mm/dd/yyyy)
 Re-evaluation Date: (mm/dd/yyyy)
 Does facility continue to satisfy NEC conditions?
[Attach Documentation](#) [No electronic document?](#)

iii. Submitted Sampling Analysis Reduction Certification (SARC)
 Date Submitted: (mm/dd/yyyy)
 Re-evaluation Date: (mm/dd/yyyy)
 Does facility continue to satisfy SARC conditions?
[Attach Documentation](#) [No electronic document?](#)

iv. Received Regional Board Certification
 Certification Date: (mm/dd/yyyy)
[Attach Documentation](#) [No electronic document?](#)

v. Received Local Agency Certification
 Certification Date: (mm/dd/yyyy)
[Attach Documentation](#) [No electronic document?](#)

3. If you checked boxes i or iii in the last section, were you scheduled to sample one storm event during the reporting year?

6. Enter the appropriate data for Section D and click "save". Enter the appropriate data for Section E and click "save".

General Info | Sampling | Mon Locs | CDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

D. [Sampling and Analysis Exemptions](#) E. Sampling and Analysis Details

1. How many storm events did you sample?:
 If less than 2, enter explanation:

2. Did you collect storm water samples from the first storm of the wet season that produced a discharge during scheduled facility operating hours? --Select--
 If no, enter explanation:

3. How many storm water discharge locations are at your facility?

4. For each storm event sampled, did you collect and analyze a sample from each of the facility's storm water discharge locations? --Select-- If "Yes", proceed to E.6.

5. Was sample collection or analysis reduced in accordance with [Section B.7.d](#) of the General Permit? --Select--
 If no, enter explanation:
 If yes, [Attach Documentation](#) [No electronic document?](#)
 Date facility's drainage areas were last evaluated:

6. Were all samples collected during the first hour of discharge? --Select--
 If no, enter explanation:

7. Was all storm water sampling preceded by three (3) working days without a storm water discharge? --Select--
 If no, enter explanation:

8. Were there any discharges of stormwater that had been temporarily stored or contained? (such as from a pond) --Select-- If "No", proceed to E.10.

9. Did you collect and analyze samples of temporarily stored or contained storm water discharges from two storm events? (or one storm event if you checked item D.2.i or D.2.iii above) --Select--
 If no, enter explanation:

10. Section B.5. of the General Permit requires you to analyze storm water samples for pH, Total Suspended Solids (TSS), Specific Conductance (SC), Total Organic Carbon (TOC) or Oil and Grease (O&G), other pollutants likely to be present in storm water discharges in significant quantities, and analytical parameters listed in Table D of the General Permit.

a. Does Table D contain any additional parameters related to your facility's SIC code(s)? --Select--
 Note: If "No", proceed to the [Monitoring Locations Tab](#).

b. Did you analyze all storm water samples for the applicable parameters listed in Table D? --Select--

c. If you did not analyze all storm water samples for the applicable Table D parameters, check one of the following reasons and explain:

Reason: In prior sampling years, the parameter(s) have not been detected in significant quantities from two consecutive sampling events.
 The parameter(s) is not likely to be present in storm water discharges and authorized non-storm water discharges in significant quantities based upon the facility operator's evaluation.
 Other.

Explanation:

7. Click the "Mon Locs" Tab. Click the "Create a New Monitoring Location" button if the appropriate monitoring location hasn't already been created.

General Info | Sampling | Mon Locs | CDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

Facility	Type	ID	Name	Description	Latitude	Longitude	Associated Discharge Points

8. Enter information on this screen as follows:

- Click the "Facility" drop-down list and select the facility.
- For the "Identifier" and "Name" fields, choose a monitoring location name and enter it in each field. Naming suggestions as follows: "Mon-1" for the first monitoring location, "Mon-2" for the second monitoring location, etc.
- Click the "Type" drop-down list and select "Effluent Monitoring".
- Although the "Description" field is not required, it is recommended that a description of the monitoring location be entered (e.g. NW outfall near employee parking lot).
- Click "Save" and repeat these steps to add all monitoring locations.



NOTE: A red asterisk "*" identifies all required fields.

9. Click the "Raw Data" Tab.

- Click the "Create New Event" button to create a new record.

General Info | Sampling | Mon Locs | CDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

The following are Sampling Event Details along with Entered measurement (lab results).

Save & Stay Save & Add New Event Save & Back To List

Monitoring Location: Sampling Event Date/Time: Rainfall Amount: inches

Time Discharge Started: (hh24:mm:ss) Name of Person Collecting Samples: Title:

Parameter	ND Entry Result Qualifier	Result	Unit conversions Units	Analytical Method	Method Detection Limit	Analyzed By
pH	= <input type="text"/>	<input type="text"/>	SU	SW9041A <input type="text"/>	<input type="text"/>	Lab <input type="text"/>
Total Suspended Solids (TSS)	= <input type="text"/>	<input type="text"/>	mg/L	E160.2 <input type="text"/>	<input type="text"/>	Lab <input type="text"/>
Electrical Conductivity @ 25 Deg. C	= <input type="text"/>	<input type="text"/>	umhos/cm	E120.1 <input type="text"/>	<input type="text"/>	Lab <input type="text"/>
Oil and Grease	= <input type="text"/>	<input type="text"/>	mg/L	E413.2 <input type="text"/>	<input type="text"/>	Lab <input type="text"/>
<input type="text"/>	Select Parameter <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Lab <input type="text"/>

Save & Stay Save & Add New Event Save & Back To List



NOTE: The basic parameters and parameters specific to the facility's SIC Code (s) will populate the table.

- Click the "Monitoring Location" drop-down to choose the monitoring location for this sample.
- Enter the date and time of the sampling event. The date and time must be in the following format: MM/DD/YYYY HH:MM:SS. There must be a space in between the date and time, and the time must be in 24-hour format (e.g. to enter March 1, 2006 at 3pm, enter 03/01/2006 15:00:00).
- Enter the time the discharger began in the "Time Discharger Started" field. The time must be in 24-hour format.
- Enter the name of the person who collected the samples as well as that person's title in the appropriate fields.

10. Enter the results for all the parameters listed.

- If a parameter is displayed and is not required, enter zero for that parameter result. Directions on how to delete this record are described below.
- If a sample result is marked as ND (non-detect), the user must locate the MDL (Method Detection Limit) on the laboratory report, change the Result Qualifier to "<", enter the MDL value, and then again in the MDL column. Also, if the sample result is marked as "TRACE" amounts detected, change the Result Qualifier to "<", enter the most restrictive value (either PQL or MDL), and then again in the MDL column.
- If the sample result units do not match the units listed in SMARTS, convert the result units by using the "Unit Conversions" table. Click the "Unit Conversions" hyperlink to view this table.

Delete a Parameter:

- If substitution of a parameter is allowed, enter zero for each "to-be-deleted" parameter result. Click "Save & Stay". A hyperlink will appear

next to each parameter record ("delete"). Click the hyperlink to delete any parameters that are either not required or will be substituted. Click the "Select Parameter" button and enter the additional/substituted parameter on the parameter search screen. Click "Search". When a parameter appears, click the "Select" hyperlink under the "Action" column.

Parameter Search
Enter search criteria and click 'Search'.

Identifier	Value
Parameter Name	<input type="text"/>
STORET Number	<input type="text"/>
CAS Number	<input type="text"/>
PCS Number	<input type="text"/>

Search Cancel
Parameter Reference List

Parameter Search
Click 'New Search' to initiate a new search with new criteria.

Identifier	Value
Parameter Name	<input type="text"/>
STORET Number	<input type="text"/>
CAS Number	<input type="text"/>
PCS Number	<input type="text"/>

New Search Cancel

Parameter Reference List

Searching Result: 1 of 1

Parameter	Synonym	STORET Number	CAS Number	PCS Number	Action
Chemical Oxygen Demand (COD)	BOD % Removal, BOD, 5-day (20 Deg. C), BOD, 5-day Percent Removal, BOD, nitrogen inhibited, BOD ₅ @ 20 Deg. C, CBOD % Removal, CBOD, 5-day (20 Deg. C), CBOD, 5-day Percent Removal, Carbonaceous BOD, DO, Oxygen, Dissolved Percent Saturation		7702447	91017	Select



NOTE: Click the "Save & Stay" button any time a new screen will appear (e.g. "Select Parameter" screen).

- Enter the value for this parameter.

11. Click "Save & Stay". Repeat steps as needed.



NOTE: The following are instructions on each "Save" button:

- "Save & Stay": Saves any changes that have been made on the screen and will remain on the screen.
- "Save & Add New Event": Saves any changes that have been made on the screen and clear the data fields for a new event record. This is to be used when multiple monitoring locations and/or events need to be entered.
- "Save & Back to List": Saves any changes that have been made on the screen and takes the user back to the "Create New Event" screen.

12. Click the "Data Summary" Tab to review data. Return to the "Raw Data" Tab if edits are necessary.

13. Click the "Quarterly" Tab. The system will flow through the section. Click "Save" after each question is answered.

General Info | Sampling | Mon Locs | CDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

F.1 Authorized NSWQ Quarterly Visual Observations F.2 [Unauthorized NSWQs Quarterly Visual Observations](#)
 Form 2.A [Authorized NSWQs Occurrences](#) Form 3.A [Unauthorized NSWQs Occurrences](#)
 Form 2.B [Authorized NSWQs Details](#) Form 3.B [Unauthorized NSWQs Details](#)

Section B.3.b of the General Permit requires quarterly visual observations of all [authorized non-storm water discharges](#) and their sources.

a. Do [authorized non-storm water discharges](#) occur at your facility? **If "No", proceed to F.2.**

b. Indicate whether you visually observed all [authorized non-storm water discharges](#) and their sources during the quarters when they were discharged. Enter an explanation for any "NO" answers. Indicate "N/A" for quarters without any [authorized non-storm water discharges](#).

July - Sept:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
Oct - Dec:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
Jan - Mar:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
Apr - Jun:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>

14. Click the "Monthly" Tab. The system will flow through the section. Click "Save" after each question is answered.

General Info | Sampling | Mon Locs | CDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

G. Monthly Wet Season Visual Observations (WSVO) Form 4.B [Storm Water Discharge Visual Observations Details](#)
 Form 4.A [Storm Water Discharge Visual Observations](#)

Section B.4.a of the General Permit requires you to conduct monthly visual observations of storm water discharges at all storm water discharge locations during the wet season. These observations shall occur during the first hour of discharge or, in the case of temporarily stored or contained storm water, at the time of discharge.

Indicate below whether monthly visual observations of storm water discharges occurred at all discharge locations. Attach an explanation for any "NO" answers. Include in this explanation whether any eligible storm events occurred during scheduled facility operating hours that did not result in a storm water discharge, and provide the date, time, name and title of the person who observed that there was no storm water discharge.

October:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
November:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
December:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
January:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
February:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
March:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
April:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>
May:	<input type="button" value="--Select--"/>	Explanation if "No":	<input type="text"/>

15. Click the "Evaluation" Tab and enter the appropriate information.

General Info Sampling Mon Locs CDF Raw Data Data Summary Quarterly... Monthly... Evaluation Attachments Certify	
H. Annual Comprehensive Site Compliance Evaluation (AC SCE) Checklist	J. AC SCE Certification
I. AC SCE Evaluation Report - Form 5	
<input type="button" value="Save"/>	
1. Inspected Pollutant Sources and Industrial Areas Section A.9 of the General Permit requires the facility operator to conduct one AC SCE in each reporting period (July 1- June 30). Evaluations must be conducted within 8-16 months of each other. The SWPPP and monitoring program shall be revised and implemented, as necessary, within 90 days of the evaluation. This checklist includes the minimum steps necessary to complete a AC SCE. Indicate whether you have performed each step below. Enter an explanation for any "NO" answers.	
Have you inspected all potential pollutant sources and industrial activities areas? <input type="button" value="--Select--"/>	
If you answered "No", enter an explanation: <input type="text"/>	
The following areas should be inspected: <ul style="list-style-type: none"> • areas where spills and leaks have occurred during the last year • outdoor wash and rinse areas • process/manufacturing areas • loading, unloading, and transfer areas • waste storage/disposal areas • dust/particulate generating areas • erosion areas • building repair, remodeling, and construction • material storage areas • vehicle/equipment storage areas • truck parking and access areas • rooftop equipment areas • vehicle fueling/maintenance areas • non-storm water discharge generating areas 	
2. Reviewed SWPPP BMPs Have you reviewed your SWPPP to assure that its BMPs address existing potential pollutant sources and industrial activities areas? <input type="button" value="--Select--"/>	
If you answered "No", enter an explanation: <input type="text"/>	
3. Verified SWPPP Site Map is Up-to-Date Have you inspected the entire facility to verify that the SWPPP's site map, is up-to-date? <input type="button" value="--Select--"/>	
If you answered "No", enter an explanation: <input type="text"/>	
The following site map items should be verified: <ul style="list-style-type: none"> • facility boundaries • outline of all storm water drainage areas • areas impacted by run-on • storm water discharges locations • storm water collection and conveyance system • structural control measures such as catch basins, berms, containment areas, oil/water separators, etc. 	
4. Reviewed All General Permit Compliance Records Have you reviewed all General Permit compliance records generated since the last annual evaluation? <input type="button" value="--Select--"/>	
If you answered "No", enter an explanation: <input type="text"/>	
The following records should be reviewed: <ul style="list-style-type: none"> • quarterly authorized non-storm water discharge visual observations • monthly storm water discharge visual observation • records of spills/leaks and associated clean-up/response activities • quarterly unauthorized non-storm water discharge visual observations • Sampling and Analysis records • preventative maintenance inspection and maintenance records 	
5. Reviewed Major Elements of SWPPP Have you reviewed the major elements of the SWPPP to assure compliance with the General Permit? <input type="button" value="--Select--"/>	
If you answered "No", enter an explanation: <input type="text"/>	
The following SWPPP items should be reviewed: <ul style="list-style-type: none"> • pollution prevention team • list of significant materials • description of potential pollutant sources • assessment of potential pollutant sources • identification and description of the BMPs to be implemented for each potential pollutant source 	

6. Assured that BMPs are Adequate and Implemented
 Have you reviewed your SWPPP to assure that a) the BMPs are adequate in reducing or preventing pollutants in storm water discharges and authorized non-storm water discharges, and b) the BMPs are being implemented? --Select--

If you answered "No", enter an explanation:

The following BMP categories should be reviewed:

- good housekeeping practices
- spill response
- employee training
- erosion control
- quality assurance
- preventative maintenance
- material handling and storage practices
- waste handling/storage
- structural BMPs

7. Inspected SWPPP Implementation Equipment
 Has all material handling equipment and equipment needed to implement the SWPPP been inspected? --Select--

If you answered "No", enter an explanation:

Save

16. Click the "Attachments" Tab. Scanned or electronic documents required for the SMARTS report are attached using this tab. A scanned or electronic version of the analytical results received from the lab must be attached to the annual report.

- Create a file(s) to attach and store it on a computer.
- Click the "Attachment" button to upload the document.



NOTE: Make sure your pop-up blockers in Internet Explorer are turned off. The Attachment upload is a pop-up window.

Please provide the following details to upload the corresponding files.

Attachment FileType: SWPPP *

Attachment Title : SWPPP

File Description:

If Partial Document, Part No 1 * of Total Parts: 1 *

Click "Browse" to locate the file and then click "Upload File"

File Name Browse... Upload File

File size should be less than 75MB. Those greater than 75MB will not be uploaded. MS Office, PDF, and Picture files are accepted. (PDF is recommended)

Please be advised that preliminary tests of the upload function suggest that large files could take a long time to upload. Our estimated upload times for a connection is as follows:

File Size	Estimated Time
5 MB	3 - 5 min.
25 MB	15 - 20 min.
75 MB (max size)	25 - 30 min.

Attached files: The following are the current documents related to the NOI. Click on the link to view them.

Attachment ID	File Type	File Title	File Desc	Part #
1029781	SWPPP	SWPPP		1/1

Fields marked with * are mandatory fields.

- Select the Attachment File Type from the drop down.
- Enter the name of the file in the Attachment Title.
- In the "File Description" field, describe the file to be attached and click the "Upload File" button (optional field).
- Uploaded files have a maximum size of 75 megabytes. Documents larger than 75MB must be separated into separate files. Use the Partial Document fields to indicate the smaller files.
- Click the "Browse" button to find and open the file to be linked.

17. Click the "Certify" Tab. Click the "Perform Completion Check" button to check the annual report for errors.

- Any errors in the report that are recognized by the program will be displayed. The report will not be able to be submitted until all errors are corrected.

General Info | Sampling | Mon Locs | EDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

Complete Error Check Results

Not enough storm events sampled for monitoring location: MON-1
The Q# E.2 has to be answered, but not answered.
The Q# E.4 has to be answered, but not answered.
The Q# E.6 has to be answered, but not answered.
The Q# E.7 has to be answered, but not answered.
The Q# E.8 has to be answered, but not answered.

You are required to sign and certify your Annual Report in accordance with Standard provisions 9 and 10 of Section C of the General Permit, and you are also required to retain a copy on site for a period of at least five years in accordance with paragraph 13 of Section B. Please take a moment now to print and sign your annual report using the link below:

[Review and Print Annual Report](#)

You can now certify this Annual Report by completing the form below:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I have reviewed, printed, and signed my application using the link above.

Certifier Name:
Certifier Title:
Date:

The report is not complete and the details are shown above. Please complete the report and certify.

- Once all errors are corrected, click the "Review and Print Annual Report" hyperlink. A facility is required to maintain all records, including annual reports, on site for five years. Fill out the blank certification fields and press the "Certify Annual Report" button.



NOTE: The "Certify Annual Report" button will be grey-out if a Data Entry Person is logged into the system, meaning the Data Entry Person is not authorized to certify the annual report. The Legally Responsible Person is the only individual authorized to certify an annual report.



NOTE: Once a report is certified and submitted, the information cannot be updated/changed by the discharger or Regional Board staff.

General Info | Sampling | Mon Locs | CDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

All required sections of your Annual Report appear to be complete.

You are required to sign and certify your Annual Report in accordance with Standard provisions 9 and 10 of Section C of the General Permit, and you are also required to retain a copy on site for a period of at least five years in accordance with paragraph 13 of Section B. Please take a moment now to print and sign your annual report using the link below:

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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I have reviewed, printed, and signed my application using the link above.

Certifier Name:

Certifier Title:

Date:

- A confirmation screen will verify that the annual report was successfully submitted. Print out the screen as proof of electronic transmission and certification and include it with the printed annual report hard copy.

General Info | Sampling | Mon Locs | EDF | Raw Data | Data Summary | Quarterly... | Monthly... | Evaluation | Attachments | Certify

Your electronic Annual Report has been successfully received by the State Water Resources Control Board's database and is hereby certified. Your confirmation information for this certification is as follows:

WDID	58341004157
Reporting Period	2005 - 2006
Certifier Name	John Glostor
Certifier Title	Manager
Date Certified:	06/19/2006
Certification ID:	168260

Please print out this screen as proof of certification. You will not be allowed to make any further changes to the certified report. If you need to correct any information you must contact your Regional Board representative.

All records must be retained for 5 years from the date of the report or monitoring activity.

[Print Annual Report](#)



NOTE: Once an annual report is certified and submitted, the option to print an additional copy of the submitted annual report is available by login back into SMARTS, selecting the facility, clicking the "Certify" tab, and then clicking the "Print Annual Report" hyperlink. This option is to be used only if there were problems with the facility's printer, or internet connection was severed, etc. Keep in mind that the facility's Legally Responsible Person was required to review, print, and sign the printed hard copy of the annual report.



NOTE: Failure to submit the requested information may result in enforcement action, including civil monetary penalties of up to \$10,000.00 for each day of violation.