**Qualified Fumigation Facilities Notification and Reporting - Two Part Form**

The operator of the Qualified Fumigation Facility (QFF) must complete and submit the Initial Notification section of this form prior to commencing the planned fumigation event. After completion of the fumigation event, the form must be resubmitted with the additional information required in the Post Fumigation Report section of the form within four business days. The notification form and post fumigation report should be submitted to Patrick.Corbett@deq.virginia.gov of the Virginia Department of Environmental Quality. When submitting the form electronically, it is requested that the subject line contain the following: **QFF Notification Form**. If electronic mail is not available, then fax the form to (804) 698-4319 or mail it to Patrick Corbett c/o Virginia Department of Environmental Quality, PO Box 1105, Richmond, VA 23218. Questions should be directed to Patrick Corbett at the above e-mail address or by calling (804) 698-4016.

**Initial Notification** **[ ]**

Start date of fumigation:

Name, address and contact information of operator of Qualified Fumigation Facility submitting this form:

Exact physical location of fumigation operation:

Object being fumigated (e.g., rail car, truck container, warehouse, bin, etc.):

Product being fumigated (e.g., grain, logs, peanuts, tobacco, etc):

Number of objects and quantity of product being fumigated:

Containment system (e.g., tarp, sealed container, etc.):

Fumigant to be used: Methyl Bromide [ ]  Phosphine [ ]

Expected quantity (specify grams or pounds) of fumigant to be used:

Expected duration of fumigation:

Expected duration of aeration:

Material Safety Data Sheet (MSDS) for fumigant: Enclosed [ ]  Previously submitted [ ]

Brief description of capture and control device (if used):

**Post Fumigation Report** **[ ]**

Total quantity of fumigant actually used:

Aeration start time:       Aeration end time:       Actual duration of aeration:

Monitoring results (please include time(s) monitoring occurred, location of monitor(s), and measurements recorded):