Please type or print

# Knox County Department of Air Quality Management

140 Dameron Avenue, Suite 242
Department of Public Health
Knoxville, TN 37917-6413
(865) 215-5900 Phone
(865) 215-5902 Fax

Please report the consumption of coatings, thinners, adhesives, cleanup solvents, or other solvents along with any natural gas and /or fuel oil consumption for the previous year and return to the above address.

---

1. **Name of Facility:** _____

2. **Location of Facility:** _____

3. **Process:**_____
   (spraybooth, dry cleaner, degreaser, boiler, etc.)

4. **This consumption data has been compiled for the following dates**.

   _____ , 20____ through _____ , 20____
   (month, day) (month, day)

5. **Consumption Report**:

| MSDS I.D. No. | Product | Gallons Used Per Year | Hours Used Per Year | Gallons Reclaimed |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| MSDS I.D. No. | Product | Gallons Used Per Year | Hours Used Per Year | Gallons Reclaimed |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

- Additional sheets may be attached if extra room is needed.
- An MSDS sheet for each product listed **must** be included with this report.
- Any materials credited toward reclamation must be properly documented and the records available for review by this Department in order to receive credit for the reclaimed materials.

_____
Signature of responsible member of firm

_____
Title

_____
Date