

READ THE INSTRUCTIONS • COMPLETE ENTIRE FORM

1. Purpose of Filing: _____ Initial Filing _____ Change of Address/Contact/Officer _____ Annual Refiling _____ Organization Name Change		2. OOC Code Number: _____
3. Type of Operation: _____ Offshore/Out-of-State Operator _____ Disposal Operator (Type A/B, Transfer Station) _____ LDEQ Permitted E&P Landfill _____ Site Code		3a. Initial Date of LA Operation: _____ 3b. LA Secretary of State Charter Number: _____
4. Current Plan of Organization (Select ONLY ONE): _____ Corporation - State Where Incorp _____ _____ Company _____ LLC _____ Joint Venture _____ Trust _____ Individual _____ Partnership _____ Trade Name _____ Other: _____		6b. EMERGENCY Contact Address <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div> Mark here if same as 6a _____ _____ _____ Contact Person for Emergency: _____ Phone Number: _____ Fax Number: _____ E-Mail Address (Required): _____
6a. Organization - Name & Mailing Address (Must be Entered) _____ _____ _____ _____ Contact Person for Organization: _____ Phone Number: _____ Fax Number: _____ E-Mail Address (Required): _____		7. Three Primary Officers <u>FULL LEGAL NAME</u> (If Individual, only one Officer necessary) (1) Name: _____ Address: _____ _____ Title: _____ (2) Name: _____ Address: _____ _____ Title: _____ (3) Name: _____ Address: _____ _____ Title: _____
6c. Address to which ENVIRONMENTAL correspondence should be directed: <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div> Mark here if same as 6a _____ _____ _____ _____ Contact Person: _____ Phone Number: _____ Fax Number: _____ E-Mail Address (Required): _____		8. If a change of organization name, give previous name, OOC code number and the desired effective date of the company name change: Name: _____ OOC Code Number: _____ Eff. Date: _____
9. Each registered organization shall notify this Office, in writing, following the filing of a voluntary petition for bankruptcy under any Chapters of Title 11 (Bankruptcy) of the United States Code (11 U.S.C.) by or against. The notification will indicate the name of the court and date of filing.		

CERTIFICATE: I DECLARE UNDER PENALTIES AS PRESCRIBED IN LRS 30:17, THAT I AM AUTHORIZED TO MAKE THIS REPORT, THAT THIS REPORT WAS PREPARED BY ME OR UNDER MY SUPERVISION AND DIRECTION, AND THAT DATA AND FACTS STATED THEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

PRINTED NAME_____
TITLE_____
DATE_____
SIGNATURE_____
TELEPHONE NUMBER

FOR OFFICE OF CONSERVATION USE ONLY

DATE _____

APPROVED BY _____

Offshore/Out-of-State Operators and Commercial Disposal Facility Operators Only

ENV Form OR-1: Organization Report

No Filing Fee

WHO FILES THE ENV FORM OR-1

Each entity performing operations within the jurisdiction of the Office of Conservation must file annually. A separate Form, and appropriate fee (if applicable), must be filed for each type of operation. **All organizations must register with the Louisiana Secretary of State.**

WHEN TO FILE ENV FORM OR-1

ENV Form OR-1 must be filed and be approved prior to initial date of operation by any entity with whom the Office of Conservation has jurisdiction or must be filed when the organization name, contact person, officer and/or any address listed on approved ENV Form OR-1 is being changed. Initial filing shall be valid for the first calendar year.

ENV Form OR-1 must be re-filed annually by the date specified. The Office of Conservation will provide a renewal notice by mailing a blank Form OR-1. COMPLETE, SIGN, and DATE the OR-1 and return to the Office of Conservation in Baton Rouge by the date required.

ENV Form OR-1 can be obtained from our web site www.dnr.louisiana.gov Navigate to Conservation - Forms/Reports/Documents - Environmental Division - ENV Form OR-1

HOW TO COMPLETE THE ENV FORM OR-1

1. Check the proper block to show the purpose of filing.
2. Your permanent code number is assigned upon initial filing of your OR-1. If you change your organization name, a new number will be assigned; do not give your previously assigned OOC Code Number in this space (See No. 9).
3. Check the proper block to show type of operation. **A separate Form OR-1 , and appropriate fee (if applicable), must be filed for each type of operation.**
 - a. Please indicate the **Initial Date of Operation in Louisiana.**
 - b. Please indicate the LA Secretary of State charter/organization ID number (if applicable).
4. Check the appropriate plan of organization. Select one only.
5. **RESERVED**
6.
 - a. This is the official name of your organization as carried on Office of Conservation records. **ADDRESS, ALONG WITH CONTACT PERSON FOR ORGANIZATION CORRESPONDENCE AND**
 - b. **AN EMERGENCY CONTACT, PHONE NUMBER, E-MAIL ADDRESS, ETC ARE REQUIRED PURSUANT TO R.S. 30:4B. ALL OF THIS INFORMATION MUST BE PROVIDED.**
 - c. Give the Address, Contact Person, Telephone Number, Fax Number and Email Address to which the requested Correspondence should be directed. Or check the box to signify that the information is the same as 6a.
7. List **ONLY** the **THREE** highest ranking officers of the organization and give their **full legal name** (**AGENTS NOT ACCEPTABLE**). Do not attach a listing of any others. If plan of organization is an individual, only No. 1 under primary officer is to be completed and the address may be the same as shown in No. 6a.
8. If you have changed your organization name, give the previous name of the organization, as well as the previously assigned OOC Code Number.

IF YOU HAVE ANY QUESTIONS PLEASE CALL THE E&P WASTE SECTION (225) 342-8244

RETURN TO:

**DEPARTMENT OF NATURAL RESOURCES
OFFICE OF CONSERVATION - 8TH FLOOR
ENVIRONMENTAL DIVISION
P.O. BOX 94275
BATON ROUGE, LA. 70804-9275**