

READ THE INSTRUCTIONS • COMPLETE ENTIRE FORM

<b>1. Purpose of Filing:</b> _____ Initial Filing                      _____ Change of Address/Contact/Officer _____ Annual Refiling                      _____ Organization Name Change	<b>2. OOC Code Number:</b> _____
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<b>3. Type of Operation:</b> _____ Offshore/Out-of-State Operator _____ Disposal Operator (Type A/B, Transfer Station) _____ LDEQ Permitted E&P Landfill      _____ Site Code	<b>3a. Initial Date of LA Operation:</b> _____	<b>3b. LA Secretary of State Charter Number:</b> _____
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<b>4. Current Plan of Organization (Select ONLY ONE):</b> _____ Corporation - State Where Incorp _____ _____ Company                      _____ LLC                      _____ Joint Venture                      _____ Trust _____ Individual                      _____ Partnership                      _____ Trade Name                      _____ Other: _____	
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<b>6a. Organization - Name &amp; Mailing Address (Must be Entered)</b> _____ _____ _____ _____ Contact Person for Organization: _____ Phone Number: _____ Fax Number: _____ E-Mail Address (Required): _____	<b>6b. EMERGENCY Contact Address</b> <input type="checkbox"/> Mark here if same as 6a _____ _____ _____ Contact Person for Emergency: _____ Phone Number: _____ Fax Number: _____ E-Mail Address (Required): _____
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<b>6c. Address to which ENVIRONMENTAL correspondence should be directed:</b> <input type="checkbox"/> Mark here if same as 6a _____ _____ _____ _____ Contact Person: _____ Phone Number: _____ Fax Number: _____ E-Mail Address (Required): _____	<b>7. Three Primary Officers      FULL LEGAL NAME</b> (If Individual, only one Officer necessary) <b>(1) Name:</b> _____ Address: _____ _____ Title: _____ <b>(2) Name:</b> _____ Address: _____ _____ Title: _____ <b>(3) Name:</b> _____ Address: _____ _____ Title: _____
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**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 certify under penalty of law that I have personally examined and am familiar with the information submitted in this report and all attachments and that, based on my personal knowledge or inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. I further acknowledge and agree that by typing my name or placing my mark in the signature space on this document it is my intention to electronically sign the document. Further, the electronic signature shall be considered as an original signature for all purposes and shall have the same force and effect as an original signature. Without limitation, "electronic signature" shall include faxed versions of an original signature or electronically scanned and transmitted version (e.g., via pdf) of an original signature.

_____	_____	_____
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](http://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 at (225) 342-8244. This form may be submitted electronically by emailing [environmental-div@la.gov](mailto:environmental-div@la.gov) or mailed in to the address below.**

**RETURN TO:**

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