



COUNTY OF RANDOLPH
Planning & Zoning Department
204 E Academy St • Asheboro, NC 27203

SPILL PREVENTION PLAN APPLICATION

Date: _____
Parcel number: _____
Application number: _____

Job contact name: _____
Job contact phone number: _____
Job contact e-mail: _____

Owner: _____
Address: _____
City, ST ZIP: _____

Applicant: _____
Applicant Address: _____
City, ST ZIP: _____

LOCATION INFORMATION:

Address of work site: _____

FACILITY INFORMATION:

Name of facility: _____
Business owner: _____
Type of facility: _____
Receiving waters for any spills: _____
Above-ground storage tanks: _____
Below-ground storage tanks: _____
Designated person responsible for spill prevention: _____
General types of chemicals used: _____

Location of chemicals used: _____

COMMENTS:

The undersigned owner/applicants do hereby certify that the information above is true and complete for the issuance of a Spill Prevention Plan as required by the *Randolph County Watershed Protection Ordinance*. The undersigned also certifies that the owner/applicant will notify the County of any change in the information contained in this document.

Signature

Please e-mail the signed and completed form to
planning@randolphcountync.gov.

LOCAL TELEPHONE NUMBER
Asheboro: (336) 318-6555
<http://www.randolphcountync.gov>