**Attachment 1**

**Proprietary Best Management Practice (BMP) Registration Statement**

Complete this form and submit it along with supporting documents to the Virginia Department of Environmental Quality (Department) at [BMPClearinghouse@deq.virginia.gov](mailto:BMPClearinghouse@deq.virginia.gov).  If approved by the Department, the device will be assigned a total phosphorus (TP) removal efficiency and listed on the Virginia Stormwater BMP Clearinghouse.

1. **Proprietary BMP / Manufactured Treatment Device (MTD) Name** (as it is to appear on the Virginia Stormwater BMP Clearinghouse):
2. **Company Name:**

Mailing Address:

City:

State:       Zip:

1. **Contact Name** (of person to be listed on the Virginia Stormwater BMP Clearinghouse)**:**

Mailing Address:

City:

State:       Zip:

Phone number:

Fax number:

E-mail address:

Web address:

1. **Treatment Type**

Hydrodynamic Structure

Filtering Structure

Manufactured Bioretention System

Provide Infiltration Rate (in/hr):

Other (describe):

1. **Certification** (check all that apply and submit all certification letters from TAPE, NJDEP, etc.):

**TAPE**

TP (include Technical Evaluation Report if applying for greater than 50% TP removal efficiency)

TSS

**NJDEP** (TSS)

**Other** (specify)

1. **Proprietary BMP History:**

How long has this specific model/design been on the market?

1. **Maintenance:**

What is the generic inspection and maintenance plan/procedure? (Attach necessary documents):

Is the maintenance procedure and/or are materials/components proprietary?

Yes, proprietary

No, not proprietary

1. **Comments**

Include any additional explanations or comments:

1. **Certification**

Signed by the company president or responsible officer of the organization:

“I certify that all information submitted is to the best of my knowledge and belief true, accurate, and complete.”

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTE: All information submitted to the Department will be made publicly accessible to all interested parties. If the device is approved by the Department, this Proprietary BMP registration form will be posted on the Virginia Stormwater BMP Clearinghouse.**