



FACILITY NAME		PLACE ID#	PERMIT# or LTF#	
FACILITY ADDRESS		CITY	STATE	ZIP CODE
FACILITY CONTACT	TITLE	PHONE #		
E-MAIL				
PRODUCT/PRINCIPAL ACTIVITY		NAICS	NUMBER OF EMPLOYEES	

FORMS COMPLETED (mark all that apply):

<input type="checkbox"/> Generators & Boilers	<input type="checkbox"/> Soil Vapor Extraction	<input type="checkbox"/> Misc Equipment
<input type="checkbox"/> Dry Cleaning	<input type="checkbox"/> Air Curtain Incinerators	<input type="checkbox"/> Misc Emissions
<input type="checkbox"/> Cotton Gin	<input type="checkbox"/> Rock Products	

Pursuant to Arizona Revised Statutes §49-432 and §49-201, do you claim the Emissions Inventory data submittal confidential? NO, I do not request confidentiality.

If YES, include which portions of the inventory are confidential along with a brief explanation:

PARENT COMPANY NAME				
MAILING ADDRESS		CITY	STATE	ZIP CODE
CONTACT NAME	CONTACT TITLE	CONTACT E-MAIL		

TOTAL FACILITY EMISSIONS (TONS PER YEAR)

If you are using the PDF forms, emission totals do not need to be reported. Simply fill out your operational data (activity levels, throughputs, etc) on the appropriate forms and submit them to ADEQ. ADEQ will calculate your emission totals and contact you if additional information is needed.

CERTIFICATION OF TRUTH & ACCURACY

I certify that based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

SIGNATURE OF RESPONSIBLE OFFICIAL	DATE
X	

PRINTED NAME	TITLE

CONTACT INFORMATION
 Arizona Department of Environmental Quality
 Air Quality Division
 Attention: State Implementation Planning
 1110 W. Washington St.
 Phoenix, AZ 85007

