



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

