



**YOLO-SOLANO AIR QUALITY MANAGEMENT DISTRICT**

1947 Galileo Court, Suite 103; Davis, CA 95618

Phone - (530)757-3650 Fax - (530)757-3670

**AGRICULTURAL ENGINE LOCATION FORM**

(Form AG4)

1.	Applicant: _____	
2.	Which engine(s) do these locations apply to?: Registration #(s): _____ Engine ID(s) (Optional): _____	[ ] Check this box if these location(s) will apply to all your portable engines
3.	<p>Additional Engine Location #1: (for primary location, use form AG3)</p> <p><input type="checkbox"/> Latitude, longitude ____ deg ____ min ____ sec Northing, or Decimal _____. ____</p> <p style="padding-left: 100px;">____ deg ____ min ____ sec Easting, or Decimal _____. ____</p> <p><input type="checkbox"/> Universal Trans Meridian (UTM): Zone 10, ____ E ____ N</p> <p><input type="checkbox"/> PLSS data: Section: ____ Township ____ Range ____</p> <p><input type="checkbox"/> Parcel/plot number: _____</p> <p><input type="checkbox"/> Address, town, names and distance to nearest crossroads _____</p> <hr/> <p>Is engine located within 1/4 mile of any residential area, school, or hospital? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, specify: <input type="checkbox"/> Residence <input type="checkbox"/> School <input type="checkbox"/> Hospital Estimated Distance ____ feet</p> <p>Name/address of receptor: _____</p> <hr/> <p>Additional Engine Location #2: (for primary location, use form AG3)</p> <p><input type="checkbox"/> Latitude, longitude ____ deg ____ min ____ sec Northing, or Decimal _____. ____</p> <p style="padding-left: 100px;">____ deg ____ min ____ sec Easting, or Decimal _____. ____</p> <p><input type="checkbox"/> Universal Trans Meridian (UTM): Zone 10, ____ E ____ N</p> <p><input type="checkbox"/> PLSS data: Section: ____ Township ____ Range ____</p> <p><input type="checkbox"/> Parcel/plot number: _____</p> <p><input type="checkbox"/> Address, town, names and distance to nearest crossroads _____</p> <hr/> <p>Is engine located within 1/4 mile of any residential area, school, or hospital? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, specify: <input type="checkbox"/> Residence <input type="checkbox"/> School <input type="checkbox"/> Hospital Estimated Distance ____ feet</p> <p>Name/address of receptor: _____</p> <hr/> <p>Additional Engine Location #3: (for primary location, use form AG3)</p> <p><input type="checkbox"/> Latitude, longitude ____ deg ____ min ____ sec Northing, or Decimal _____. ____</p> <p style="padding-left: 100px;">____ deg ____ min ____ sec Easting, or Decimal _____. ____</p> <p><input type="checkbox"/> Universal Trans Meridian (UTM): Zone 10, ____ E ____ N</p> <p><input type="checkbox"/> PLSS data: Section: ____ Township ____ Range ____</p> <p><input type="checkbox"/> Parcel/plot number: _____</p> <p><input type="checkbox"/> Address, town, names and distance to nearest crossroads _____</p> <hr/> <p>Is engine located within 1/4 mile of any residential area, school, or hospital? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, specify: <input type="checkbox"/> Residence <input type="checkbox"/> School <input type="checkbox"/> Hospital Estimated Distance ____ feet</p> <p>Name/address of receptor: _____</p>	
4.	Printed name of applicant: _____	Title: _____
	Signature of applicant: _____	Date: _____

## INSTRUCTIONS FOR COMPLETING THE AGRICULTURAL ENGINE LOCATION FORM

1. **APPLICANT:** Specify the name of the person, partnership, company, corporation, or agency to be named on and held responsible for the registration. This should be the same name that was used in section 1 of Form AG1.
  
2. **WHICH ENGINE(S) DO THESE LOCATIONS APPLY TO?:** On the engine supplemental form (Form AG3), we ask for the main/primary location where each engine will be stored/operated. If the engine operates at additional locations, complete this additional form (form AG4) to identify all other locations. If these new locations apply to multiple (or all of your) engines, please indicate so. If you add additional new locations in the future, you are required to notify the District (using form AG4) prior to operating at any new location.
  
3. **ENGINE LOCATION:** For any given location, there are many ways to identify the location. You can specify the location in terms of latitude/longitude, UTM coordinates, Assessors Parcel Number, or address. You do not need to fill out each of the coordinate systems, but please complete enough information for us to be able to locate the engine.  
  
Is engine located within 1/4 mile of any residential area, school, or hospital? If so, please specify name and address of that location. Residential area means three or more permanent residences located anywhere outside the facility's property.
  
4. **SIGNATURE:** This application must be signed by the responsible official.

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