



YOLO-SOLANO AIR QUALITY MANAGEMENT DISTRICT
1947 Galileo Court, Suite 103; Davis, CA 95618
Phone - (530) 757-3650 Fax - (530) 757-3670

POST HARVEST PROCESSING EXEMPTION REQUEST FORM

(A separate form is required for each equipment location)

1. **MATERIAL PROCESSED:**
Almonds Walnuts Seeds Other (specify) _____

2. **OWNER/OPERATOR INFORMATION:** Specify the name and address of the person, partnership, or company, responsible for growing the crops and operating the processing equipment.
Company Name: _____
Mailing Address: _____
City, State and Zip Code: _____
Responsible Official: _____ Title: _____
Phone Number: () Fax Number: ()
E-mail Address: _____

3. **EQUIPMENT LOCATION:** Specify the street address of the location where the processing equipment is located. If the location does not have a designated address, specify the road and cross road and attach a map.

4. **GROWING LOCATION:** If different, specify the location where the product is grown. If the location does not have a designated address, specify the roads surrounding the fields and attach a map.

5. **AGRICULTURAL ENGINES:** Excluding tractors or vehicles, are any internal combustion engines over 50 horsepower used in the growing of the crops? [] No [] Yes

6. **OPERATIONAL DATE:** Specify the month/year the equipment first began operating _____

7. **SIGNATURE:** Application must be signed by the responsible official listed in section 2. By signing this document you are indicating that all information contained in this document and in any attachments are true, accurate and complete to the best of your knowledge.

SIGNATURE: _____ DATE: _____
(ORIGINAL SIGNATURE REQUIRED. NO PHOTOCOPIES)

FOR DISTRICT USE ONLY (Print) Date Stamp Received: _____
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