STATIONARY SOURCE SUMMARY (FORM 3.8-A1)

D	DISTRICT:		
C	COMPANY NAME:		
► A		USE ONLY -	District ID: Application Received:
A	pplication Filing Fee:		Application Deemed Complete:
[.	FACILITY IDENT	IFICATION	
	-		
	_		EPA Plant ID:
4.	Mailing Address:		
6.	UTM Coordinates (if req	uired):	
7.	Source located within:	50 miles of the state line	[]Yes[]No
		50 miles of a Native American Nation	[] Yes [] No [] Not Applicable
8.	Type of Organization:	[] Corporation [] Sole Ownership [] Government [] Partnership [] Utility Company
9.	Legal Owner's Name: _		
10.	Owner's Agent Name (if	any):	
11.	Responsible Official:		
12.	Plant Site Manager/Cont	act:	Telephone #:
13.	Type of facility:		
14.	General description of pr	rocesses/products:	
	Does your facility store,	or otherwise handle, greater than thresho	old quantities of any substance on the Section 112(r) List of Substances
15.	1 d - 2 T1 - 1 - 11 - 7	e attachment A)? [] Yes [] No	
5.	and their I hresholds (see		
	· ·	ement Plan [pursuant to Section 112(r)]	required? [] Not Applicable [] Yes [] No

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STATIONARY SOURCE SUMMARY (FORM 3.8-A2)

DISTRICT: COMPANY NAME:		→ DISTRICT USE ONLY ◆		
		DISTRICT ID: FACILITY NAME	Ε:	
. TYPE OF PERMIT ACTION				
	CURRENT (permit	Γ PERMIT number)	EXPIRATION (date)	
☐ Initial Title V Application				
□ Permit Renewal				
☐ Significant Permit Modification				
☐ Minor Permit Modification				
□ Administrative Amendment				
b: 2. Is source operating under Compliance Schedu		otions in 1.a. are appli	icable	
2. Is source operating under Compliance Schedu	ıle? []Yes []No			
5. For permit modifications, provide a general d	escription of the propos	sed permit modification	on:	
-				

_page of ____pages

TOTAL STATIONARY SOURCE EMISSIONS (FORM 3.8-B)

DISTRICT:		DISTRICT ID:	USE ONLY •
COMPANY NAME:		FACILITY NAME:	
I. TOTAL STATIONARY Provide a brief description of operation			
POLLUTANT* (name)	EMISSIONS (tons per year)	PRE-MODIFICATION EMISSIONS (tons per year)	EMISSIONS CHANGE (tons per year)

^{*} Emissions for all pollutants that the source is major for and all regulated air pollutants must be reported. See Attachment A.

COMBUSTION EMISSION UNIT (FORM 3.8-C1)

DISTRICT:			→ DISTRICT USE ONLY ◆		
		DISTRICT II):		
COMPANY NAME:		FACILITY N	AME:		
I. PERMIT NUMBE	R:				
II. EMISSION UNIT	DESCRIPTION				
1. Equipment type:					
2. Equipment description:					
3. Equipment make, mode	l & serial number:				
4. Maximum design proce	ss rate or maximum power inp	out/output:			
5. Primary use:					
6. Burner(s) design, operation	ting temperature and capacity	:			
7. Control device(s) type a	and description (if any):				
III. OPERATIONAL	INFORMATION				
1. Operating schedule:	(hours/day	(hours/ye	ar)		
2. Exhaust gas properties (temperature, SCFM, %H2O,	%O2 or %CO2, % excess air):			
3. Fuel specifications:					
FUEL TYPE (name)	ANNUAL USAGE (c.f./yr, lb/yr, gal/yr)	HEATING VALUE (BTU/lb or BTU/gal)	SULFUR (%)	NITROGEN (%)	
	+				

COMBUSTION EMISSION UNIT (FORM 3.8-C2)

DISTRICT:	→ DISTRICT USE ONLY ◆
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:

4. Unit emissions:

	CRITERIA PO	LLUTANT EMISSI	IONS (tons per year)		
POLLUTANTS					
A. Emissions					
B. Pre-modification Emissions ¹					
C. Emission Change ²					
D. Emission Limit ³					
ОТН	OTHER REGULATED AIR POLLUTANT EMISSIONS (tons per year)				
POLLUTANTS					
A. Emissions					
B. Pre-Modification Emissions ¹					
C. Emission Change ²					
D. Emission Limit ³					

For permit modifications only; emissions prior to project modification.

Difference between Pre-Modification Emissions (Section B.) and Emissions (Section A.).

For voluntary emissions cap and emission limits [i.e. expressed as parts per million (ppm) corrected for dilution air, pounds per hour (lbs/hr), pounds per million BTU (lb/MMBTU, etc.] required by any applicable federal requirement.

COATING / SOLVENT EMISSION UNIT (FORM 3.8-D1)

DISTRICT:	→ DISTRICT USE ONLY ◆					
	DISTRICT ID:					
COMPANY NAME:	FACILITY NAME:					
I. PERMIT NUMBER:						
II. EQUIPMENT DESCRIPTION						
1. Equipment type:						
2. Equipment description:						
3. Equipment make, model & serial number:						
4. Maximum design process rate or throughput:	. Maximum design process rate or throughput:					
5. Control device(s) type and description (if any):	Control device(s) type and description (if any):					
6. Description of coating/solvent application/drying method(s) employ	red including coating transfer:					
7. List and describe primary coating/solvent process equipment used: -						
-						
III. OPERATIONAL INFORMATION						
1. Operating schedule: (hours/day)	(hours/year)					
2. Coatings/solvents information:						

COATING/ SOLVENT (name)	MANUFACTURER (name)	MAXIMUM USE (gal/day, gal/yr)	VAPOR PRESSURE (mm of Hg)	SOLIDS CONTENT (%)	VOC CONTENT (%)

COATING / SOLVENT EMISSION UNIT (FORM 3.8-D2)

DISTRICT:	→ DISTRICT USE ONLY ◆
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:

3. Unit emissions:

CRITERIA POLLUTANT EMISSIONS (tons per year)					
POLLUTANTS					
A. Emissions					
B. Pre-modification Emissions ¹					
C. Emission Change ²					
D. Emission Limit ³					
OTHER REGULATED AIR POLLUTANT EMISSIONS (tons per year)					
POLLUTANTS					
A. Emissions					
B. Pre-modification Emissions ¹					
C. Emission Change ²					
D. Emission Limit ³					

For permit modifications only; emissions prior to project modification.

² Difference between Pre-Modification Emissions (Section B.) and Emissions (Section A.).

For voluntary emissions cap and emission limits [i.e. expressed as parts per million (ppm) corrected for dilution air, pounds per hour (lbs/hr), pounds per million BTU (lb/MMBTU, etc.] required by any applicable federal requirement.

ORGANIC LIQUID STORAGE UNIT (FORM 3.8-E1)

DISTRICT:			→ DISTRICT USE ONLY ◀		
		DISTRICT	Γ ID:		
COMPANY NAME:		FACILITY	FACILITY NAME:		
I. PERMIT NUMBE		<u> </u>			
				_	
	& serial number:				
	nd description (if any):				
1. Operating schedule: 2. Raw material used or pro-	(hours/day) (hours	:/year)		
ORGANIC LIQUID	VAPOR PRESSURE (psia)	BOILING POINT (F)	STORAGE TEMPERATURE (F)	LIQUID THROUGHPUT (gals/year)	
3. Total annual throughput4. Profile of material throu	ghput:	(1000 gallons) Jan-Mar (% of total) July-Sep (% of total)	April-J Oct-De		
IV. TANK DESIG	SN AND SPECIFICAT	IONS			
l. Tank design:	[] Floating Roof (exter[] Fixed Roof[] Pressure	[] Underground	internal)		

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ORGANIC LIQUID STORAGE UNIT (FORM 3.8-E2)

DISTRICT:	► DISTRICT USE ONLY ◀
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:
2. Tank specifications: Max Fill Rate: Height: Diameter: Capacity:	(ft) Vapor Space: (ft)
	er:
Primary Seal Shoe Type: [] Metallic Shoe [] Vapor Mounted Resilient Seal [] Liquid Mounted Resilient Seal [] Wiper Seal [] Other: Secondary Seal Shoe Type: [] Shoe Mounted Wiper Seal [] Rim Mounted Wiper Seal	
[] Weathershield [] Other: 6. Unit emissions:	
	NT EMISSIONS (tons per year)

	CRITERIA POLLUTANT EMISSIONS (tons per year)				
POLLUTANTS					
A. Emissions					
B. Pre-modification Emissions ¹					
C. Emission Change ²					
D. Emission Limit ³					
ОТ	HER REGULATED	AIR POLLUTANT	EMISSIONS (tons	per year)	
POLLUTANTS					
A. Emissions					
B. Pre-modification Emissions ¹					
C. Emission Change ²					
D. Emission Limit ³					
For permit modifications only: emissions prior to project modification					

For permit modifications only; emissions prior to project modification. Difference between Pre-Modification Emissions (Section B.) and Emissions (Section A.).

For voluntary emissions cap and emission limits [i.e. expressed as parts per million (ppm) corrected for dilution air, pounds per hour (lbs/hr), pounds per million BTU (lb/MMBTU, etc.] required by any applicable federal requirement

GENERAL EMISSION UNIT (FORM 3.8-F1)

II. EQUIPMENT DESCRIPTION 1. General process description: 2. Equipment type: 3. Equipment description: 4. Equipment make, model & serial number: 5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any):	DISTRICT:		→ DISTRICT USE ONLY ◆
I. PERMIT NUMBER: II. EQUIPMENT DESCRIPTION 1. General process description: 2. Equipment type: 3. Equipment description: 4. Equipment make, model & serial number: 5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule:			DISTRICT ID:
II. EQUIPMENT DESCRIPTION 1. General process description: 2. Equipment type: 3. Equipment description: 4. Equipment make, model & serial number: 5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule:	COMPANY NAME:		FACILITY NAME:
II. EQUIPMENT DESCRIPTION 1. General process description: 2. Equipment type: 3. Equipment description: 4. Equipment make, model & serial number: 5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule:			
2. Equipment type: 3. Equipment description: 4. Equipment make, model & serial number: 5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule:	I. PERMIT NUMBER:		
2. Equipment type: 3. Equipment description: 4. Equipment make, model & serial number: 5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule:	II. EQUIPMENT DESCRIPT	ΓΙΟΝ	
3. Equipment description: 4. Equipment make, model & serial number: 5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule: (hours/day) (hours/year) 2. Exhaust gas flow rate: SCFM @ %H ₂ O	General process description:		
4. Equipment make, model & serial number: 5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule:	2. Equipment type:		
5. Maximum design process rate or throughput: 6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule:	3. Equipment description:		
6. Control device(s) type and description (if any): III. OPERATIONAL INFORMATION 1. Operating schedule: (hours/day) (hours/year) 2. Exhaust gas flow rate: SCFM @ %H ₂ O	4. Equipment make, model & serial	number:	
III. OPERATIONAL INFORMATION 1. Operating schedule: (hours/day) (hours/year) 2. Exhaust gas flow rate: SCFM @ %H ₂ O	5. Maximum design process rate or	throughput:	
1. Operating schedule: (hours/day) (hours/year) 2. Exhaust gas flow rate: SCFM @ %H ₂ O	6. Control device(s) type and descri	ption (if any):	
1. Operating schedule: (hours/day) (hours/year) 2. Exhaust gas flow rate: SCFM @ %H ₂ O			
2. Exhaust gas flow rate: SCFM @ %H ₂ O	III. OPERATIONAL INFO	RMATION	
	1. Operating schedule:	(hours/day)	(hours/year)
3. Raw products used and finished products produced:	2. Exhaust gas flow rate:	SCFM @	%H ₂ O
	3. Raw products used and finished p	products produced:	

RAW PRODUCT USED (name)	CONSUMPTION (lbs/hr, gal/hr, etc.)	PRODUCTS PRODUCED (name)	PRODUCTION (lbs/hr, gal/hr, etc.)

GENERAL EMISSION UNIT (FORM 3.8-F2)

DISTRICT:	→ DISTRICT USE ONLY ◆
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:

4. Unit emissions:

CRITERIA POLLUTANT EMISSIONS (tons per year)					
POLLUTANTS					
A. Emissions					
B. Pre-modification Emissions ¹					
C. Emission Change ²					
D. Emission Limit ³					
ОТ	HER REGULATED	AIR POLLUTANT	T EMISSIONS (tons	per year)	
POLLUTANTS					
A. Emissions					
B. Pre-modification Emissions ¹					
C. Emission Change ²					
D. Emission Limit ³					

For permit modifications only; emissions prior to project modification.

² Difference between Pre-Modification Emissions (Section B.) and Emissions (Section A.).

For voluntary emissions cap and emission limits [i.e. expressed as parts per million (ppm) corrected for dilution air, pounds per hour (lbs/hr), pounds per million BTU (lb/MMBTU, etc.] required by any applicable federal requirement.

EMISSION CONTROL UNIT (FORM 3.8-G1)

D	DISTRICT:				• DISTRIC	Γ USE ONLY ◀
				DIS	TRICT ID:	
C	COMPANY NAME:			FAC	CILITY NAME:	
I.	PERMIT NUMBER	R:		_		
II.	EQUIPMENT DES	SCRIPTION				
1.	General process descript	ion:				
2.	Equipment type:					
3.	Equipment description:					
4.	Equipment make, model	& serial number:				
5.	Emission unit(s) served 1	by this equipment:				
6.	Maximum design or rate	d capacity:				
Ш	. EQUIPMENT DE	SIGN INFORMA	TION			
1.	Exhaust gas:	Temperature:	(F))	Flow Rate:	(SCFM)
	C	-	(%))	Oxygen:	
			(%		78.	(**)
2.	General:	Manufacturer:			Pressure Drop:	(in-Hg)
		Inlet Temp.:	(F))	Outlet Temp.:	(F)
3.	Catalyst data:	Catalyst Type/Mat	erial:			
		Catalyst Life:	(ye	ears)	Volume:	(Ft^3)
		Space Velocity:	(F	t^3/Ft)	NH3 inj. Rate:	(gal/hr)
		NH3 Inj. Temp.:	(F)		
4.	Baghouse data:		Positive Pressure		[] Negative Pressure	
		Cleaning Method:				
		Fabric Material:				
			•	CFM)		
5.	ESP data:	Number of fields:			Cleaning Method:	
_	G 11 1	Power Input:				
6.	Scrubber data:	Type/design:				
		Sorbent Type:				
7	Other Control Devices (i	nclude annronriate des	gian information):			
1.	omer connor bevices (I	merade appropriate des	ngn miormation)			

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EMISSION CONTROL UNIT (FORM 3.8-G2)

DISTRICT:		→ DISTRICT U	USE ONLY ◀
		DISTRICT ID:	
COMPANY NAME:		FACILITY NAME:	
IV. OPERATIONAL INFO	RMATION		
	(hours/day)		
2. Raw products used by control d	levice:		
3. Operating information:			
PO	LLUTANTS AND EMISSIO	N CONTROL INFORMATI	ON
POLLUTANT (name)	INLET CONCENTRATION (ppm or gr/DSCF ¹)	OUTLET CONCENTRATION (ppm or gr/DSCF ¹)	CONTROL EFFICIENCY (% weight)
Specify percent O ₂ or percent	it CO ₂ .		

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EXEMPT EQUIPMENT (FORM 3.8-H)

DISTRICT:	→ DISTRICT USE ONLY ◆
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:

I. EQUIPMENT EXEMPT FROM DISTRICT PERMIT REQUIREMENTS

EXEMPT EQUIPMENT	EQUIPMENT DESCRIPTION	BASIS FOR EXEMPTION
_		

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COMPLIANCE PLAN (FORM 3.8-I1)

DISTRICT:	→ DISTRICT USE ONLY ◆
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:

I. PROCEDURE FOR USING FORM 3.8-I

This form shall be submitted as part of the Title V Application. The Responsible Official shall identify the applicable federal requirement(s) to which the source is subject. In the Compliance Plan (Form 3.8-I), a Responsible Official shall identify whether the source identified in the Title V Application currently operates in compliance with all applicable federal requirements.

II. APPLICABLE FEDERAL REQUIREMENTS

APPLICABLE FEDERAL REQUIREMENT	EMISSION UNIT or PERMIT NUMBER	IN COMPLIANCE (yes/no/exempt ¹)	EFFECTIVE DATE ²

If exempt from applicable federal requirement, attach explanation for exemption.

Indicate the date during the permit term that the applicable federal requirement will become effective.

COMPLIANCE PLAN (FORM 3.8-12)

DISTRICT:	→ DISTRICT USE ONLY ◆
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:
III. COMPLIANCE CERTIFICATION	
Under penalty of perjury, I certify the following:	
Based on information and belief formed after reasonable inqui	ry, the source identified in this application will continue to comply with

effective applicable fed	leral requirem <i>e</i> r	ıt(s) identified	l in form 3.8-II, on a	a timely basis ¹ ;	••		-
D 1	1 1 -1: -C C	. 1 64			1. : 1: 4:	! / ! / !	41. 41.

Based on information and belief formed after reasonable inquiry, the source identified in this application will comply with the future-

the applicable federal requirement(s) with which the source is in compliance identified in form 3.8-11;

Based on information and belief formed after reasonable inquiry, the source identified in this application is not in compliance with the
applicable federal requirement(s), identified in form 3.8-11, and I have attached a compliance plan schedule. ²

Signature of Responsible Official	Date

- 1. Unless a more detailed schedule is expressively required by the applicable federal requirement.
- 2. At the time of expected permit issuance, if the source expects to be out of compliance with an applicable federal requirement, the applicant is required to provide a compliance schedule with this application, with the following exception. A source which is operating under a variance that is effective for less than 90 days need not submit a Compliance Schedule. For sources operating under a variance, which is in effect for more than 90 days, the Compliance Schedule is the schedule that was approved as part of the variance granted by the hearing board.

The compliance schedule shall contain a schedule of remedial measures, including an enforceable sequence of actions with milestones, leading to compliance with this applicable federal requirement. For sources operating under a variance, the compliance schedule is part of the variance granted by the hearing board. The compliance schedule shall resemble, and be at least as stringent as that contained in any judicial consent decree or administrative order to which the source is subject. For sources not operating under a variance, consult the Air Pollution Control Officer regarding procedures for obtaining a compliance schedule.

COMPLIANCE PLAN CERTIFICATION (FORM 3.8-J1)

DISTRICT:			→ DISTRICT USE ONLY →	
COMPANY NAM	E:	DISTRICT ID: FACILITY NAME:		
I. CERTIFICA	ΓΙΟΝ STATUS			
Indicate the dates term. The distric	the applicant intends to submit the COMPLIA t federal operating permits rule requires the app	NCE CERTIFICATION REPORT to the dolicant to submit this report at least annually.	istrict during the entire perm	
2. For sources requi PROGRESS RE report at least ser	red to have a schedule of compliance to remedy PORTS to the district during the permit term. T niannually.	y a violation, indicate the dates the applicant in The district federal operating permits rule requi	ntends to submit CERTIFIEI res the applicant to submit thi	
3. Describe the com Section 114(a)(3)	pliance status of the source with respect to app of the Clean Air Act:	olicable enhanced monitoring, and compliance	e certification requirements o	

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COMPLIANCE PLAN CERTIFICATION (FORM 3.8-J2)

DISTRICT:		→ DISTRICT USE ONLY ◆
		DISTRICT ID:
COMPANY NAME:		FACILITY NAME:
II. CERTIFICATION	INFORMATION	
EMISSION UNIT or PERMIT NUMBER:		APPLICABLE FEDERAL REQUIREMENT:
METHOD	DESCRIPT	TION OR REFERENCE METHOD
Monitoring		
Reporting		
- corp or mag		
Record Keeping		
Total Modernia		
Test Methods		
EMISSION UNIT or PERMIT NUMBER:		APPLICABLE FEDERAL REQUIREMENT:
метнор		TION OR REFERENCE METHOD
	DESCRIFI	ION OR REFERENCE METHOD
Monitoring		
Reporting		
Record Keeping		
Test Methods		

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CERTIFICATION REPORT (FORM 3.8-K1)

DISTRICT:		→ DISTRICT USE ONLY ◆
		DISTRICT ID:
COMPANY NAME:		FACILITY NAME:
		<u> </u>
I. FACILITY INFORMATI	ON	
1. Company Name:		
2. Facility Name (if different than C	ompany Name):	
3. Mailing Address:		
4. Street Address or Source Location	n:	
5. Facility Permit Number:		
II. GENERAL INFORMATI	ON	
1. Reporting period (specify dates):		
2. Due date for submittal of report:		
3. Type of submittal:	[] Monitoring Report (complete	e Section III below)
	[] Compliance Schedule Progre	ess Report (complete Section IV of Form 3.8-K2)
	[] Compliance Certification (co	omplete Section V of Form 3.8-K2)
III. MONITORING REPOR	T INFORMATION	
1. Were deviations from monitoring	requirements encountered during t	he reporting period?
	[] No [] Yes (If Yes, comple	ete Form 3.8-L)

CERTIFICATION REPORT (FORM 3.8-K2)

DISTRICT:	→ DISTRICT USE ONLY ◆
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:
IV. COMPLIANCE SCHEDULE PROGRESS INFORM	IATION
1. Dates the activities, milestones, or compliance required by schedule	of compliance was achieved/will be achieved:
2. Provide explanation of why any dates in schedule of compliance wer	e not/will not be met:
Describe in chronological order preventive or corrective action taken	1:
V. COMPLIANCE CERTIFICATION	
 Was source in compliance during the reporting period specified in Sapplicable federal requirements and permit conditions. 	ection II of Form 3.8-K1 and is source currently in compliance with a
[] Yes [] No (If no, re-sub	omit Forms 3.8-I and 3.8-J)
certify based on information and belief formed after reasonable inquare true, accurate, and complete.	iry, the statement and information in this document and supplement
Signature of Responsible Official	Date
Print Name of Responsible Official	
Title of Responsible Official and Company Name	
Telephone Number of Responsible Official: ()	

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DEVIATION REPORT (FORM 3.8-L)

DISTRICT:	→ DISTRICT USE ONLY → DISTRICT ID:
COMPANY NAME:	FACILITY NAME:
. DEVIATION INFORMATION	_
1. Permit number(s) of emission unit or control unit affected:	
2. Description of deviation:	
	d:
4. Associated equipment and equipment operation (if any):	
5. Date and time when deviation was discovered:	
6. Date, time and duration of deviation:	
7. Probable cause of deviation:	
8. Preventive or corrective action taken:	

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CERTIFICATION STATEMENT (FORM 3.8-M)

	→ DISTRICT USE ONLY ◆
	DISTRICT ID:
OMPANY NAME:	FACILITY NAME:
	that are part of your application. If the application contains forms or attachments to the blank space provided below. Review the instructions if you are unsure of the follication.
Forms included with application	Attachments included with application
_ Stationary Source Summary Form	Description of operating scenarios
Total Stationary Source Emission Form	Sample emissions calculations
_ Compliance Plan Form	Fugitive emissions estimates
Certification Statement Form	List of applicable requirements
_ Exempt Equipment Form	Discussion of units out of compliance with applicable federal requirements and, if required, submit a schedule of compliance
Certification Statement Form	Facility schematic showing emission points
ify under penalty of law, based on information and be osed of the forms and attachments identified above, a ify that I am the responsible official, as defined in (tit	-
osed of the forms and attachments identified above, a	are true, accurate, and complete.
osed of the forms and attachments identified above, a lify that I am the responsible official, as defined in (tit	le of district Title V permitting rule).
sosed of the forms and attachments identified above, a lify that I am the responsible official, as defined in (tit Signature of Responsible Official	le of district Title V permitting rule).

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