

Request for Residential Exemption from the Mandatory Curtailment Requirement

Property Address	City	State	Zip
County	Assessor Parcel Number (APN)	Year the residence was built	
Property Owner's Name	()		Phone Number
Property Owner's Mailing Address	City	State	Zip
Occupant's Name (if different from owner)	()		Phone Number
Occupant's Mailing Address	City	State	Zip

This form is to be used for requesting an exemption from the mandatory curtailment requirement in Section 5.6 of **Rule 4901 – Wood Burning Fireplaces and Wood Burning Heaters**. Rule 4901 prohibits anyone from using any type of wood burning fireplace or wood burning heater when a mandatory curtailment is in effect. The rule does give provisions where wood-burning devices could be used during a declared event. These include wood burning devices that are: (1) in locations where natural gas is not available, or (2) the sole source of heat in a residence.

To request an exemption from the mandatory curtailment provisions in Rule 4901, please answer the following questions:

1. Is natural gas (not propane) service available to the residence? Yes No
(If natural gas service is not available, please provide proof - i.e., current utility bill for this property)
2. Is wood burning the only source of heat in the residence? Yes No
3. Does residence have another source of heat that does not work or is unsafe to use? Yes No
(A copy of a recent repair or replacement estimate from a certified repair company must be included with this form to be considered for any exemption. Exemption granted under this provision can be granted for no more than 30 days after notification by the District or the end February, whichever comes first and cannot be extended for subsequent years.)

Assistance in assessing heater repairs may be available at (800) 933-9555 for PG&E customers or (800) 331-7593 for Gas Co customers.

I certify that the answers to the above questions are true and correct. I authorize an inspector from the San Joaquin Valley Air Pollution Control District to inspect my residence to verify these statements, if needed.

Signature	Print Name	Title	Date
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Please send this form to the nearest regional office:

<p>Northern Office 4800 Enterprise Way Modesto, CA 95356-8718 (209) 557-6400 ♦ FAX (209) 557-6475</p>	<p>Central Office 1990 E Gettysburg Avenue Fresno, CA 93726-0244 (559) 230-6000 ♦ FAX (559) 230-6062 www.valleyair.org</p>	<p>Southern Office 34946 Flyover Court Bakersfield, CA 93308-9725 (661) 392-5500 ♦ FAX (661) 392-5585</p>
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