San Joaquin Valley Unified Air Pollution Control District

Title V - COMPLIANCE CERTIFICATION FORM

In numerical order, list all permitted units that are subject to one or more applicable requirements. List all requirements for a permit, each in a separate box, before moving on to the next permit number. Refer to the attached instructions for more information.

Company Nar	ne:	Facility ID: -		
Reporting Per	iod: from	through		Page: of
COLUMN 1 Permit Unit Number	COLUMN 2 Permit Condition No. Specify each Permit Condition Number Sequentially	COLUMN 3 Compliance Status during Period: "CONTINUOUS", "INTERMITTENT", OR "NOT IN COMPLIANCE"	COLUMN 4 Method for determining Compliance Status.	COLUMN 5 Additional Information: Identify each deviation, each possible exception to Compliance and each excursion or exceedance as defined in 40 CFR, Part 64.

Title V - COMPLIANCE CERTIFICATION FORM (TVFORM-006 Cont'd)

Company Nar	ne:	Facility ID: -		
Reporting Period: from		through		Page: of
COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5

Title V - COMPLIANCE CERTIFICATION FORM

INSTRUCTIONS (TVFORM-006)

Follow the instructions for filling out the Certification Form Table Columns #1 through Column #5 for the requirements for each permitted emissions unit, as well as for facility-wide requirements.

- **Column 1** PERMIT NUMBER References the District permit by permit number (e.g. S-1234-6-0). The entire permit number including the region, facility, equipment, and modification number must be cited.
- **Column 2** CITE PERMIT CONDITION NUMBER to identify each term or condition of the permit that is the basis of the certification (i.e. condition #6).
- **Column 3** COMPLIANCE STATUS Give the compliance status of the permitted unit with respect to the condition.

Continuous - If the permitted unit has been in full compliance with the permit condition for the entire certification period, write **Continuous** in this column.

Intermittent - If the permitted unit has only been in compliance with the permit condition for a portion of the certification period, write **Intermittent** in this column.

Not in Compliance - If the permitted unit was not in compliance with the permit condition during the certification period, write **Not in Compliance** in this column.

- **Column 4** METHOD OF DETERMINING COMPLIANCE Describe how compliance with the condition was determined (e.g. Opacity Measured by EPA Method 9 weekly, Opacity recorded weekly). For monitoring, recordkeeping, and reporting requirements, describe the monitoring, recordkeeping and reporting practices utilized.
- Column 5 NOTES Include or reference any Additional Information: (e.g. breakdown reports, etc) that the District may require for determining compliance status. Identify each deviation, each possible exception to Compliance and each excursion or exceedance as defined in 40 CFR, Part 64.

After completing this form, mail the original along with a Certification of Truth and Accuracy to your nearest regional office, attention to:

Compliance Title V Reporting San Joaquin Valley Air Pollution Control District

And a copy of these forms to:

US EPA Region 9 Air Division 75 Hawthorne Street San Francisco, CA 94105

Northern Region Office (Merced, San Joaquin, & Stanislaus Counties) 4800 Enterprise Way Modesto, CA 95356-8718 Tel: (209) 557-6400 ♦ FAX: (209) 557-6475 Central Region Office (Fresno, Kings, & Madera Counties) 1990 E Gettysburg Ave Fresno, CA 93726-0244 Tel: (559) 230-5950 ♦ FAX: (559) 230-6062 Southern Region Office (Tulare County & Valley portion of Kern County) 34946 Flyover Court Bakersfield, CA 93308-9725 Tel: (661) 392-5500 ♦ FAX: (661) 392-5585

TVFORM-006