Facility Name: ________________________________

San Joaquin Valley Air Pollution Control District
1990 E Gettysburg Ave
Fresno, CA 93726-0244

Attention: Permit Services Manager

Subject: Assignment of Agent

I, (print name and title) ___________________________________________(assignor), an authorized representative of the above facility, authorize the following individual(s) to act on my behalf for the following:

☐ ATC/PTO project
  ☐ Specific project #’s (list): ________________________________
  ☐ All applications
☐ Review all documents (including confidential information) related to the facility
  ☐ Access to facility documents as authorized user of online web portal
  ☐ Submit applications/upload documents as authorized user of online web portal
☐ Other: ________________________________

This authorization is valid until:
  ☐ The specific applications listed above are finalized or cancelled
  ☐ Revoked by assignor
  ☐ Expires on (date): ________________________________
  ☐ Other: ________________________________

The agent(s) I am authorizing:

Name(s): ________________________________________________
Company: ________________________________________________
Phone #: ________________________________________________
E-mail: ________________________________________________

Assignor Signature: ________________________________ Date: ________________