



Permit-Exempt Equipment Registration (PEER) General Application

- Existing Emissions Unit (A unit that has been operated prior the PEER application date)
- Modification to a Valid PEER
- New Emissions Unit (A unit that is first operated on or after the PEER application date)

1. PEER(s) TO BE ISSUED TO (FACILITY NAME):		
2. MAILING ADDRESS (STREET / PO BOX):		
CITY:	STATE:	ZIP CODE (9-digit):
3. CURRENT LOCATION WHERE THE EQUIPMENT IS OPERATED (STREET / SEC-T-R/LAT-LONG/UTM COORD):		
CITY:		
4. GENERAL NATURE OF BUSINESS:		
5. DESCRIPTION OF EQUIPMENT OR MODIFICATION FOR WHICH APPLICATION IS MADE (Include PEER #'s if known, use additional sheets if necessary, and attach a Supplemental PEER Application for <u>each</u> unit.)		
PEER NUMBER(S)	DESCRIPTION	
6. CHECK WHETHER YOU ARE A PARTICIPANT IN EITHER OF THESE VOLUNTARY PROGRAMS:		
	HEALTHY AIR LIVING (HAL) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Send Info	 INSPECT <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Send Info
7. NAME OF APPLICANT:	TITLE OF APPLICANT:	
8. SIGNATURE OF APPLICANT	DATE:	PHONE No.: FAX No.: E-MAIL:

---- FOR APCD USE ONLY ----

DATE STAMP	FILING FEE RECEIVED: \$ _____	CHECK NUMBER: _____
	DATE PAID: _____	
	PROJECT NO.: _____	
	FACILITY ID.: _____	