



PORTABLE EQUIPMENT REGISTRATION APPLICATION FORM

Registration is an alternative to permitting. Equipment currently exempt from permitting is also exempt from registration.

1. REGISTRATION TO BE ISSUED TO: _____

2. MAILING ADDRESS:

Street/PO Box: _____

City: _____ State: _____ Zip Code: _____

3. IS THIS APPLICATION FOR RENTAL EQUIPMENT? YES NO

4. EQUIPMENT STORAGE LOCATION:

Street: _____

City: _____ State: _____ Zip Code: _____

5. PLEASE CHECK THE APPROPRIATE BOXES AND FURNISH THE REQUESTED INFORMATION:

a) Did the unit reside in California at any time during 1993? YES NO

If yes, please attach documentation, as proof (e.g., existing permits, tax records, maintenance records, etc.)

b) Initial date unit was operated in California: _____

c) Is the unit an Equivalent Replacement of a previously registered unit? YES NO

If yes, please provide Registration #: _____

6. PLEASE CHECK THE APPROPRIATE SOURCE CATEGORIES AND COMPLETE THE APPROPRIATE SUPPLEMENTAL APPLICATION FORMS:

- Abrasive Blasting (Confined) Portland Cement Batch Plant Air Curtain Burn Box
- Abrasive Blasting (Unconfined) Mineral Processing Internal Combustion Engine
- Other: _____

7. GENERAL NATURE OF BUSINESS: _____

8. ADDITIONAL AIR DISTRICTS IN WHICH THE UNIT MAY BE OPERATED: _____

9. IS THIS APPLICATION SUBMITTED AS THE RESULT OF EITHER A NOTICE OF VIOLATION (NOV) OR A NOTICE TO COMPLY (NTC)? YES NO *If yes, NOV/NTC # _____*

10. APPLICANT INFORMATION: NAME: _____ TITLE: _____ DATE: _____ SIGNATURE: _____	11. APPLICANT CONTACT INFO: PHONE #: _____ CELL #: _____ EMAIL: _____
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DATE STAMPED	FILING FEE RECIEVED: _____ DATE PAID: _____ PROJECT NO: _____ FACILITY ID: _____
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