



**Class II Change of Location Approval (COLA)  
Completion of Operations Reporting Form**

Submit to:  
**Compliance and Enforcement Branch**  
**Bureau of Air Pollution Control**  
**901 South Stewart Street Suite 4001**  
**Carson City, NV 89701-5249**  
**Fax # (775) 687-6396**

Change of Location Approval # \_\_\_\_\_  
 Source Name: \_\_\_\_\_  
 Under Authorization #: AP \_\_\_\_\_  
 Actual Completion Date: \_\_\_\_\_

Completing this Form will comply with the reporting provisions of the Bureau of Air Pollution Control Class II General Temporary Change of Location Approval Restriction: *Actual production and hours of operation will be submitted within 30 days of completion of the operation on the form provided by the Bureau of Air Pollution Control. The reports will be compiled on a per location basis. Failure to provide the required production reports will result in the disapproval of future change of location requests until the reports are received, and may subject permittee to a Notice of Alleged Violation in accordance with NAC 445B.275.*

Unit # (i.e. PF1.001)	Process Description (i.e. Jaw Crusher, Generator)	Air Pollution Controls	Throughput Rates (tons/hr) or (gal/hr)	Total Throughput at this Location (tons or gals)	Hours Operated at this Location	
					hrs/ day	Total hrs

If you have any questions on filling out this form call (775) 687-9350, and ask for Class II Permitting. If you need more room for emission units, use a copy of this form to cover the additional units.

Signed: \_\_\_\_\_  
 Data prepared by (Signature)

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Form **must** be signed by a **Responsible Official or his designee**, approved by the Director, pursuant to NAC 445B.156.

I hereby certify that the above information is true and accurate under penalty of perjury:

Signed: \_\_\_\_\_  
 Responsible Official Signature

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone No.: \_\_\_\_\_