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| **INSTRUCTIONS: Select one or both check boxes below. Then, complete Sections A and B for the semi-annual and/or annual compliance certification. Submit a hard copy of this form along with the associated XLS spreadsheet completed for all conditions in the Air Quality Operating Permit (AQOP) to the Compliance Branch. (40 CFR 70.5(c)(9))** |
| **Semi-Annual Report** [ ]  | **Annual Report** [ ]  |
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| **A. GENERAL INFORMATION**1. Identifying Information

Company Name: Enter Company NameFacility Name: Enter Facility NameFacility Identification Number: AXXXXAir Quality Operating Permit Number: APXXXX-XXXXMailing Address: Enter Street AddressCity: Enter City State: Enter State ZIP: Enter Zip CodeContact Person: Enter Name Contact Title: Enter TitlePhone Number: (XXX) XXX – XXXX, Include Extension if ApplicableAdditional Contact Information: Include Preferred Phone Number if Different from Above and/or Preferred Email1. Reporting Period

Select all that Apply for this Report:First Half Semi-Annual (January – June) [ ] Second Half Semi-Annual (July – December) [ ] Annual [ ]  |

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| **B. CERTIFICATION OF TRUTH, ACCURACY AND COMPLETENESS FORM**1. Responsible Official Information

Name: (Last) Enter Last Name (First) Enter First Name (Middle) Enter Middle NameTitle: Enter TitleAddress: Enter Street AddressCity: Enter City State: Enter State ZIP: Enter Zip CodePhone Number: (XXX) XXX – XXXX, Include Extension if ApplicableAdditional Contact Information: Include Preferred Phone Number if Different from Above and/or Preferred Email 1. Responsible Official’s Certification of Truth, Accuracy and Completeness

The Responsible Official must sign this statement after the form is completed for each applicable requirement. I certify under penalty of law that, based on information and belief formed after reasonable inquiry, the statements and information contained in these documents are true, accurate and complete. Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: Enter Name Date: Enter Signature Date |