**San Joaquin Valley Air Pollution Control District**

#  Application for

 [ ] EMISSION REDUCTION CREDIT (ERC)

[ ] CONSOLIDATION OF ERC CERTIFICATES

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| 1. ERC TO BE ISSUED TO: Facility ID: \_\_\_-\_\_\_\_\_\_\_\_\_\_ (if known) |
| 2. MAILING ADDRESS: Street/P.O. Box: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_ |
| 3. LOCATION OF REDUCTION: Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_/4 SECTION \_\_\_\_\_\_\_\_\_\_\_\_\_\_ TOWNSHIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RANGE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | 4. DATE OF REDUCTION:  |
| 5. PERMIT NO(S): EXISTING ERC NO(S): |
| 6. METHOD RESULTING IN EMISSION REDUCTION: [ ] SHUTDOWN [ ] RETROFIT [ ] PROCESS CHANGE [ ] OTHER DESCRIPTION: (Use additional sheets if necessary) |
| 7. REQUESTED ERCs: (In pounds per calendar quarter except CO2e)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | VOC | NOx | CO | PM10 | SOx | Other |
| 1st Qtr |  |  |  |  |  |  |
| 2nd Qtr |  |  |  |  |  |  |
| 3rd Qtr |  |  |  |  |  |  |
| 4th Qtr |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| CO2e |  | metric ton/yr |

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|  8. SIGNATURE OF APPLICANT:  |  TYPE OR PRINT TITLE OF APPLICANT: |
|  9. TYPE OR PRINT NAME OF APPLICANT: |  DATE: | PHONE #: CELL PHONE #: FAX #:E-MAIL: |

FOR APCD USE ONLY:

|  |  |
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|  DATE STAMP |  FILING FEE RECEIVED: $ \_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_  DATE PAID: PROJECT NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FACILITY ID.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |