

\_

. .

. .

## San Joaquin Valley Air Pollution Control District

## State Portable Equipment Registration Program (PERP) Inspection Request

Article 5, Section 2460(b) of the California Code of Regulations (CCR) requires owners or operators of registered portable engines or equipment units to contact their Home District within 45 days of the initial registration or renewal date to schedule an inspection. The inspection shall be completed within one year of the initial registration or renewal date, at a time and place agreed upon in advance. Please complete all applicable sections of the form below. District staff will contact you within 30 days following receipt of this request to schedule the inspection.

Company Information			
Name of Business:		Date of Req	uest:
Mailing Address:	City:	State:	Zip:
Location of Equipment			
Address:	City:	State:	Zip:
Contact Name:	Title:	Phone#:	
Email address:		Alternate Phone #:	
Application #:	# of units in Application:	Initial Registration (I) or	Renewal (R):
Multiple Engine Discount Cla	imed, indicate discount received:	None 4 – 9	10 or more units

List all registration numbers in application and if equipment is "Available" for inspection indicate: "YES", or "OOD" (Out of Home District), or "OOS" (Out of State).

						Application Number:	Registration Number:	Issued/Renewed Date:	Type of Equipment:	Available?	
Only											
e Use											
Office	Region:	by:	ived	Entered:	ned:						
	Rec	Received by:	Received	e Ente	Assigned:						Add More Units
		Re	Date	Date	Inspector	To s print the	ubmit this inspec e form and fax it t	tion request via emai to the Compliance De SUBMIT F	il press the SUBMIT button belo partment of your nearest Distric FORM	w or et office.	

Northern Region Office 4800 Enterprise Way Modesto, CA 95356-8718 (209) 557-6400 ♦ FAX (209) 557-6475 Central Region Office 1990 East Gettysburg Avenue Fresno, CA 93726-0244 (559) 230-6000 ♦ FAX (559) 230-6062 www.valleyair.org Southern Region Office 34946 Flyover Court Bakersfield, CA 93308-9725 (661) 392-5500 ♦ FAX (661) 392-5585

## **Additional Units**

Application Number	Registration Number:	Issued/ Renewed Date:	Type of Equipment:	Available:	Application Number	Registration Number:	Issued/ Renewed Date:	Type of Equipment:	Available:
									-
									<u> </u>
			<u> </u>					ļ	L