



**North Coast Unified Air
Quality Management District**
707 L Street
Eureka, CA 95501
(707) 443-3093

**APPLICATION TO CONVERT AN
AUTHORITY TO CONSTRUCT PERMIT
TO A PERMIT TO OPERATE
FORM 1399**

Section I – Company Information

Legal name of owner/operator:

Company mailing address:

Contact person:

Title:

Contact person's phone number:

Contact person's fax number:

Contact person's email address:

Are you the owner of the equipment under this application? yes no
If no, enter the legal name and owner:

Section II – Facility Information

Facility name:

ATC Permit #:

Facility address:

Section III – Facility Status

Date Construction Completed:

Date Operations Commenced:

Date Source Test Completed: pass fail

New Source Test Scheduled?

Does this facility have a Title V permit? yes no

Permit #:

Sections IV – Equipment or Operational Deviations from ATC permit conditions? (complete below)

Unit

Description of deviation

Unit	Description of deviation

Section V - Certification

I hereby certify that all information and data contained in this application and all information submitted with this application are as true and accurate as possible, to the best of my knowledge, professional expertise and experience.

Signed this _____ day of _____, _____.

Signature of responsible official of firm:

Title of responsible official of firm:

Type or print name of responsible official:

Responsible official's Phone No:

Fax Number: