



South Coast Air Quality Management District

Form 222-TP

Registration for Tar Pot or Tar Kettle



Complete one form per facility.

Mail To:  
SCAQMD  
P.O. Box 4944  
Diamond Bar, CA 91765-0944Tel: (909) 396-3385  
www.aqmd.gov**Section A - Operator Information**

|  |   |
|--|---|
| 1. Facility Name (Business Name of Operator):  | 2. Valid AQMD Facility ID<br>(Leave blank if a new business): |
| 3. Owner's Business Name (If different from Business Name of Operator): Check here if change of operator |   |

**Section B - Equipment Location Address**4. Equipment Location Is: Fixed Location Various Location  
(For equipment operated at various locations, provide main facility address.)

Street Address

City, CA Zip

Contact Name Title

Phone # Ext. Fax #

E-Mail:

**Section C - Business Mailing Address**5. Correspondence Information:  
Check here if same as equipment location address

Address

City, State Zip

Contact Name Title

Phone # Ext. Fax #

E-Mail:

**Section D - Equipment Information**

Rule 222(c)(26) TAR POT (also known as a tar kettle) is any mobile equipment used exclusively for the storage, holding, melting, and transfer of asphalt or coal tar pitch and has a maximum holding capacity greater than 600 liters (159 gallons) but no more than 3,785 liters (1,000 gallons) and is equipped with burner(s) that fire exclusively on liquefied petroleum gases. (Amended May 3, 2013)

6. Manufacturer: \_\_\_\_\_

Model No.: \_\_\_\_\_

Serial No.: \_\_\_\_\_

Maximum Holding Capacity: \_\_\_\_\_ Gallons

Type(s) of Fuel Burned: \_\_\_\_\_

*Fees are updated on July 1 of each year.*  
*For current fees, please see Rule 301 or go to [Rule 222 Filing Program Web Page](#).*

**Section E - Authorization/Signature***I hereby certify that all information contained herein and information submitted with this application are true and correct.*

|                                       |                                   |
|---------------------------------------|-----------------------------------|
| 7. Signature of Responsible Official: | 8. Title of Responsible Official: |
| 9. Print Name:                        | 10. Date:                         |

|                  |                        |                           |                          |                             |                     |
|------------------|------------------------|---------------------------|--------------------------|-----------------------------|---------------------|
| 11. Check List:  |                        | Authorized Signature/Date |                          | Fees Enclosed               |                     |
| AQMD<br>USE ONLY | APPLICATION TRACKING # |                           | EQUIPMENT CATEGORY CODE: | FEE<br>\$                   | VALIDATION          |
| DATE             | A R                    | ENG.A R                   | CLASS<br>I III           | ASSIGNMENT<br>Unit Engineer | CHECK/MONEY ORDER # |
|                  |                        |                           |                          |                             | AMOUNT<br>\$        |
|                  |                        |                           |                          |                             | TRACKING #          |