



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

South Coast AQMD Complete one form per equipment.

**Section A - Operator Information**

1. Facility Name (Business Name of Operator):	2. Valid AQMD Facility ID (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**      **Section C - Business Mailing Address**

4. Equipment Location Is:      Fixed Location      Various Location (For equipment operated at various locations, provide main facility address.)	5. Correspondence Information: Check here if same as equipment location address
Street Address _____, CA _____	Address _____
City _____ Zip _____	City _____ State _____ Zip _____
Contact Name _____ Title _____	Contact Name _____ Title _____
Phone # _____ Ext. _____ Fax # _____	Phone # _____ Ext. _____ Fax # _____
E-Mail: _____	E-Mail: _____

**Section D - Equipment Information**

Rule 222 (c)(5) ASPHALT PAVEMENT HEATER is any mobile equipment used to heat asphalt or coal tar pitch for purposes of road maintenance or new road construction. (Amended May 3, 2013)

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

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

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

                            Maximum Heat Input Rating: \_\_\_\_\_ BTU/HR

                            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 USE ONLY	APPLICATION TRACKING #		EQUIPMENT CATEGORY CODE:	FEE		VALIDATION	
	A	R		CLASS	ASSIGNMENT		CHECK/MONEY ORDER #
DATE	ENG.A	R	I III	Unit	Engineer	\$	TRACKING #