



South Coast Air Quality
 Management District
 21865 Copley Drive
 Diamond Bar, CA 91765
 (909) 396-2000

RULE 1173 STATISTICS SUMMARY SHEET (FORM D) REPORT FOR THE _____ QUARTER OF _____

Company Name	
Address	
Contact/Phone Number	
SCAQMD ID #	Report Date

Component Type: VALVES

Total Number Inspected: _____ Total Liquid Leaks: _____
 Total Gas Leaks: _____ Total Leak %: _____
 >500 but ≤ 10,000 ppm: _____ > 10,000 but ≤ 25,000 ppm: _____ >25,000 ppm: _____
 Number replaced under section (g) (2): _____ (BACT/BARCT)
 Number of Annual Inspections under section (f) (1) (C): _____ (inaccessible components)

Component Type: FITTINGS (Flanges, Threaded Connectors, etc.)

Total Number Inspected: _____ Total Liquid Leaks: _____
 Total Gas Leaks: _____ Total Leak %: _____
 >500 but ≤ 10,000 ppm: _____ > 10,000 but ≤ 25,000 ppm: _____ >25,000 ppm: _____
 Number replaced under section (g) (2): _____ (BACT/BARCT)
 Number of Annual Inspections under section (f) (1) (C): _____ (inaccessible components)

Component Type: OTHERS (Hatch, Meter, Diaphragm, Sight Glass)

Total Number Inspected: _____ Total Liquid Leaks: _____
 Total Gas Leaks: _____ Total Leak %: _____
 >500 but ≤ 10,000 ppm: _____ > 10,000 but ≤ 25,000 ppm: _____ >25,000 ppm: _____
 Number replaced under section (g) (2): _____ (BACT/BARCT)
 Number of Annual Inspections under section (f) (1) (C): _____ (inaccessible components)

Component Type: PUMPS (Light Liquid)

Total Number Inspected: _____ Total Liquid Leaks: _____
 Total Gas Leaks: _____ Total Leak %: _____
 >500 but ≤ 10,000 ppm: _____ > 10,000 but ≤ 25,000 ppm: _____ >25,000 ppm: _____
 Number replaced under section (g) (2): _____ (BACT/BARCT)
 Number of Annual Inspections under section (f) (1) (C): _____ (inaccessible components)

Component Type: PUMPS (Heavy Liquid)

Total Number Inspected: _____ Total Liquid Leaks <500 ppm: _____
 Total Gas Leaks: _____ Total Leak %: _____
 >100 but ≤ 500 ppm: _____ > 500 ppm: _____
 Number replaced under section (g) (2): _____ (BACT/BARCT)
 Number of Annual Inspections under section (f) (1) (C): _____ (inaccessible components)

Component Type: COMPRESSORS

Total Number Inspected: _____ Total Liquid Leaks: _____
 Total Gas Leaks: _____ Total Leak %: _____
 >500 but ≤ 10,000 ppm: _____ > 10,000 but ≤ 25,000 ppm: _____ >25,000 ppm: _____
 Number replaced under section (g) (2): _____ (BACT/BARCT)
 Number of Annual Inspections under section (f) (1) (C): _____ (inaccessible components)

Component Type: PRESSURE RELIEF DEVICES'S (PRD'S)

Total Number Inspected: _____ Total Liquid Leaks: _____
Total Gas Leaks: _____ Total Leak %: _____
>200 but ≤ 25,000 ppm: _____ >25,000 ppm: _____
Number replaced under section (g) (2): _____ (BACT/BARCT)
Number of Annual Inspections under section (f) (1) (C): _____ (inaccessible components)

Quarterly Summary

Total Number Of Components Inspected: _____
Total Number Of Leaks: _____
Total Leak %: _____