

# Southwest Clean Air Agency

11815 NE 99th Street, Suite 1294, Vancouver, WA 98682-2322

Voice: (360) 574-3058 Fax: (360) 576-0925

[www.swcleanair.org](http://www.swcleanair.org) 7:00 am to 5:30 pm M-F

## BUSINESS OR SOURCE CLOSURE NOTIFICATION

(Please Print Legibly)

<b>Date of Facility Closure/Notification:</b>		<b>SWCAA Use Only</b>	
		Rec'd Date:	SWCAA ID:
<b>Facility Owner/Name:</b>		<b>UBI Number:</b>	
<b>Facility Street Location:</b>		<b>Mailing Address:</b>	
<b>City, State, Zip:</b>		<b>City, State, Zip:</b>	
<b>Site Contact Person:</b>		<b>Title:</b>	
<b>Phone No:</b> xxx-xxx-xxxx	<b>Fax No:</b>	<b>E-Mail:</b>	
<b>Nature of Business:</b>			
<b>Closure Type:</b> <input type="checkbox"/> Temporary – How long? _____ or projected restart date: _____ <input type="checkbox"/> Permanent – Effective date? _____			
<b>Description of Equipment or Processes:</b>			
Removed from Site: _____			
_____			
_____			
Made permanently inoperable and how: _____			
_____			
_____			

### **Certification**

I, the undersigned, do hereby certify that the information contained in this notification is, to the best of my knowledge, accurate and complete. I also understand that in order to continue to occupy and/or operate the equipment for this business through this administrative process, I must contact SWCAA to apply for, and receive an Air Discharge Permit from SWCAA prior to installation and/or operation.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Type or Print Name and Title

\_\_\_\_\_

Phone