



Instructions: Authority To Construct Action Form

Introduction

Use the following instructions to guide you through the **Authority To Construct Action form**.

Who should use this form?

This form is for owners or operators with an expired Authority to Construct (A/C) permit. If your A/C has not expired, you can still submit your start-up notification form. This form informs the Air District of the status of the devices/sources under the expired A/C.

What if I already submitted a start-up notification?

- If you submitted a notification 30 days ago or more, feel free to contact us or resubmit using this form.
 - If you submitted your notification less than 30 days ago, the Air District should take action or contact you soon, but feel free to contact us about the status.
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General Information

Facility ID or Plant number - The Facility ID or Plant Number is available on the A/C issued by BAAQMD.

Application number - The application number is available on the A/C permit issued by BAAQMD.

Notification of Start-Up

For new devices and sources – Provide device/source ID & the start-up date for when each source began operation.

- For engines, provide the serial number(s).

For existing devices and sources modified under the A/C – Provide the source ID and the start-up date for when each source began operating after modification.

Request Renewal of A/C

Identify any source/device for which you want to request a renewal of the A/C.

A/C no longer needed

Identify any source/device for which you no longer need an A/C.

Additional information

Building or operating sources or devices without a valid permit may be subject to enforcement action.

Next steps

1. Mail or email the completed form to the address on the form.
 2. If a start-up was indicated, the Air District will either issue a Permit to Operate or contact you on further steps needed to receive a Permit to Operate.
 3. If A/C renewal was requested, the Air District will contact you.
 4. If A/C is no longer needed, then no further action is required under this application. You must reapply if a permit is needed in the future.
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Still need help?

Email (preferred): permits@baaqmd.gov – Include your Facility ID/Plant # AND Application #.
Call: Your permit contact or the Engineering Division at (415) 749-4990.



BAY AREA AIR QUALITY MANAGEMENT DISTRICT
AUTHORITY TO CONSTRUCT ACTION FORM
 Please type or print.

Mail or email to:
 BAAQMD
 Engineering Division
 375 Beale St., Suite 600
 San Francisco, CA 94105
permits@baaqmd.gov

1. General Information (Required)

Facility Name	Facility ID or Plant #
Facility Address (Street address and city)	Application Number

2. Please complete 2a, 2b, 2c based on what action is requested

2a. Notification of Start-Up

Device/Source ID	Start-up Date (M/D/YYYY)	Serial Number (Engines only)

2b. Request Renewal of Authority to Construct

Device/Source ID	Device/Source ID	Device/Source ID

2c. Authority to Construct no longer needed

Device/Source ID	Device/Source ID	Device/Source ID

3. Additional information

- Any source or device in the application above with an expired Authority to Construct that is not listed on this form will be considered expired by default. If the device/source requires a permit, you will be required to re-apply for a new Authority to Construct.
- For devices/sources that have started up (2a above), issuance of a Permit to Operate is contingent upon:
 - Verification of compliance with any start-up conditions or requirements.
 - Payment of additional fees, if applicable.
- Renewal of your Authority to Construct (2b above) is contingent upon:
 - Meeting the requirements of BAAQMD Regulation 2, Rule 1, Section 407. If a device/source cannot meet the requirements to renew the Authority to Construct, you will be required to reapply for a new Authority to Construct.
 - Payment of 'Fee for Renewing an Authority to Construct'. (BAAQMD Regulation 3, Section 330)
- For any devices/sources listed in parts 2a and or 2b, you will either receive a Permit to Operate or a BAAQMD staff person will notify you if additional action is required. Allow 30 days for processing.

4. Certification/Signature of person responsible for the information on this form. (Required)

I hereby certify that I am authorized to complete this form for the facility and that all information contained herein is true and correct.

Name	Title
Phone (xxx-xxx-xxxx)	Email
Signature	Date (M/D/YYYY)