

Instructions: Shutdown Form

Introduction

Use the following instructions to help guide you through the **Shutdown Form**.

Who should use this form?

Do not use this form if the ownership of the device or facility has changed. Instead, submit a **Transfer of Ownership Form**.

This form is for declaring either:

1. Specific devices at this facility have or will be shut down
2. All devices at this facility have or will be shut down

Notes

Do not submit this form unless you are ready to permanently surrender the permit for the devices selected. Once the form is processed, the permit will be closed immediately in our system, regardless of the shutdown date provided.

Operation of any device after shutdown is not allowed. A new permit application must be submitted and approved prior to operation.

The Air District does not refund any device or facility fees that are shut down prior to the permit expiration date.

Facility Information

- **Air District Facility ID** – The facility ID number is available on any permit or invoice issued by the Air District. This can be found in the upper right of the permit or the invoice.

Select either to shutdown **ALL** or **SOME** devices at the facility.

Devices to Shutdown

- If you select to shutdown **ALL** devices, provide one shutdown date to be applied to all the devices.
- If you select to shutdown **SOME** devices, provide the Air District Device ID, a name or description of the device, and the shutdown date for that device.
 - **Air District Device ID** – The device ID number can be found on the Permit to Operate to the left of the device name (for example: **S1** Emergency Standby Engine) or in the description of the authorized emission flow (for example: **S254** (Semiconductor Manufacturing /Solvent Stations) --> **A111** (Particulate Control /Scrubber /Packed Bed) --> **P114** (Emission Point 114))

If you need more space, attach to this form a list of additional devices in the same table format.

Dismantled

Dismantled means the device has either been removed or been physically changed so that operation is not viable (such as the fuel line for a combustion device being severed).

Submission Information

This form can be submitted by e-mail or by mail:

- E-mail: dataupdate@baaqmd.gov
- Mail: Bay Area Air District, Engineering Division, 375 Beale Street, Suite 600, San Francisco, CA 94105

Still need help?

Contact the Engineering Division: (415) 749-4990 | permits@baaqmd.gov

SHUTDOWN FORM

For permanently surrendering permits.

All fields are required unless otherwise noted. Please type or print.

- **Do not submit this form until you are ready to permanently surrender the permit for these devices.** Once this shutdown is processed, the permit will be closed immediately in our system, regardless of the shutdown date provided.

1. Facility Information

Facility Name	Air District Facility ID (Required)

2. Devices to Shutdown – Select to shutdown ALL or SOME devices and provide the additional information requested

☐ Select to shutdown **ALL** devices at this facility and provide shutdown date (MM/DD/YY):

☐ Select to shutdown **SOME** devices at this facility (identify specific devices to shutdown in the table below)

- If more space is needed, submit the additional information on a separate sheet of paper.
- The Air District Device ID can be found on your permit to the left of the device name or in the description of the authorized emission flow (e.g. **S10, A11, P14**).

Device ID	Device Name/Description	Shutdown Date (MM/DD/YYYY)

3. Dismantled

Are/will the devices selected for shutdown be dismantled by the shutdown date? ☐ Yes ☐ No

- Do not fill out this form for changes in device or facility ownership. Fill out a **Transfer of Ownership Form** instead.

4. Acknowledgement

- ☐ Check if you understand that after shutdown, the owner/operator has surrendered the Bay Area Air District permit for these devices. In order to operate again, the owner/operator must apply for and receive new permits.

5. Certification/Signature of person responsible for the information on this form

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

Name	Title	
Signature	Date	Phone (xxx-xxx-xxxx)