



air pollution control district
SANTA BARBARA COUNTY

New Residential Diesel-Fired Emergency/Standby (E/S) Engine Application Form -36

Santa Barbara County Air Pollution Control District
260 N. San Antonio Road, Suite A
Santa Barbara, CA 93110-1315

Complete a separate APCD Form -36 for each **new** emergency/standby engine (use Form -37 for engines installed prior to 1/1/2005). Mail the completed form(s) and a **filing fee of \$649** to the Air Pollution Control District (APCD) at the above address. The filing fee may also be paid with a credit card using APCD Form -01C. Additional assistance can be obtained by referencing to the APCD's Diesel Internal Combustion Engine webpage at <http://www.ourair.org/residential-dice> or by calling us at (805) 979-8050.

Purpose of Application

☐ New Engine ☐ Existing Engine (installed after 1/1/2005, otherwise use Form -37) Date of Installation

Property Location

☐ Yes ☐ No Is your property boundary located or proposed to be located within 500 feet from the school grounds (k-12) ?

If yes, provide the name of school(s)

☐ Yes ☐ No Do you have the city and/or county approval to install your new engine?

Assessors Parcel No(s):

Engine Information (Please fill in completely. Use a separate form for each engine)

Engine Use (check all that apply)

☐ Electrical Power ☐ Other (Describe)

☐ Yes ☐ No Is the engine equipped with a 4-digit Non-Resettable Hour Meter?

Engine Data

Manufacturer			
Model Name			
Model Year		Maximum Rated Brake Horsepower (bhp)	
Serial Number			
EPA 12-Character Family Name*			

*Only applicable to new engines. Check engine nameplate or engine manufacturer.

FOR APCD USE ONLY				DATE STAMP
FID		Permit No.		
Project Name				
Filing Fee		DFF ? YES / NO		

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Emergency/Standby (E/S) Engine
Application Form -36**

Contact and Engine Location Information

Owner Info		<input type="radio"/> Yes <input type="radio"/> No	Use as Billing Contact?	
Contact Name			Position/Title	
Engine Location				
Mailing Address				
City		State		Zip Code
Telephone		Fax		Email

Authorized Agent Info*		<input type="radio"/> Yes <input type="radio"/> No	Use as Billing Contact?	
Company Name				
Contact Name		Position/Title		
Mailing Address				
City		State		Zip Code
Telephone		Fax		Email

*Use this section if the application is not submitted by the owner. Complete APCD Form -01A. Owner information above is still required. <http://www.ourair.org/wp-content/uploads/apcd-01a.pdf>

Applicant/Preparer Statement

The person who prepares the application also must sign this form. The preparer may be an employee of the owner/operator or an authorized agent (contractor/consultant) working on behalf of the owner/operator (an *Authorized Agent Form -01A* is required).

I certify pursuant to H&SC Section 42303.5 that all information contained herein and information submitted with this application is true and correct.			
Completed By		Company	
Signature		Date	

**PLEASE NOTE THAT FAILURE TO COMPLETELY PROVIDE ALL REQUIRED INFORMATION OR FEES WILL
RESULT IN YOUR APPLICATION BEING RETURNED OR DEEMED INCOMPLETE.**