



Air Pollution Control District  
San Luis Obispo County

3433 Roberto Court, San Luis Obispo, CA 93401  
TEL: (805) 781-5912 FAX: (805) 781-1002  
Email: [info@slocleanair.org](mailto:info@slocleanair.org)  
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Santa Barbara County  
Air Pollution Control District

260 N. San Antonio Road, Suite A  
Santa Barbara, CA 93110-1315  
TEL: (805) 961-8800 FAX: (805) 961-8801  
Email: [enqr@sbcapcd.org](mailto:enqr@sbcapcd.org)  
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Ventura County  
Air Pollution  
Control District

669 County Square Drive, Ventura CA 93003  
TEL: (805) 645-1401 FAX: (805) 645-1444  
Email: [engineering@vcapcd.org](mailto:engineering@vcapcd.org)  
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## AGRICULTURAL ENGINE REGISTRATION APPLICATION FORM

*(Application must be typewritten, computer generated, or hand printed in ink. Complete all pages of the application.)*

**IMPORTANT:** To assure that your application is complete include all of the following when submitting this application:

- Registration Fee    
  Complete all sections    
  Signature on Application    
  One Engine per Application

**San Luis Obispo APCD: \$217**

**Santa Barbara APCD: \$249**

**Ventura APCD: \$200**

This application form is for the registration of existing and new stationary and portable diesel engines rated greater than or equal to 50 bhp that are used in Agricultural Operations. To the extent allowed by law, the engine registered in this application may be operated in San Luis Obispo, Santa Barbara or Ventura Counties. The registration will denote any geographic operational restrictions. You do not need to register diesel engines used to power agricultural wind machines or engines that provide motive power (i.e., motor vehicles, tractors). You are required to register the engine in the County that the engine resides. See Form AG-2 for instructions and common definitions of the terms used in this application and the Airborne Toxic Control Measure. **Submit this application to the District in which the engine resides.**

**1. Facility Name:**

Facility <b>Street</b> Address	Assessor Parcel Number(s) (APN)
City, State ZIP:	

**2. ENGINE OWNER:** (If a rental unit, fill in the rental company's information here.) Is this a Rental Unit?  Yes  No

Contact Person:	Work Phone:
Company Name:	FAX:
<b>Mailing</b> Address:	Cell Phone:
City, State ZIP:	
E-Mail:	

**3. OTHER CONTACTS:** (Are the contacts below the same as Engine Owner? If not, complete Section 16 also)

Operator: <input type="checkbox"/> Same as Owner	Inspections: <input type="checkbox"/> Same as Owner
Billing: <input type="checkbox"/> Same as Owner	Correspondence: <input type="checkbox"/> Same as Owner

**4. AUTHORIZED AGENT:** Is this application filled out by an Authorized Agent?  Yes  No

If Yes, fill in Section 17.

**5. PURPOSE OF APPLICATION:** (check all that apply)

New Engine    
  Existing In-Use Engine    
  Install Emission Controls    
  Replace Existing Engine  
 Other (describe): \_\_\_\_\_

(CONTINUED ON NEXT PAGE)

*(District Use Only)*

Date Received Stamp	APCD Application		
	Number:	Registration No.	Fee:
	Receipt No.	Check No.	
Comments			



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## AGRICULTURAL ENGINE REGISTRATION APPLICATION FORM (Continued)

**6. DISTRICT :** (Check the Counties where this engine currently resides and/or may operate in the future)

San Luis Obispo County       Santa Barbara County       Ventura County

**7. ENGINE USE:**

Water Well Pump       Booster Pump       Electrical Power       Irrigation Pump

Other (describe): \_\_\_\_\_

**8. ENGINE CLASSIFICATION:** (Check one. See the definitions **Form AG-2** for clarification)

Stationary     Seasonal     Portable (*note: booster and well pumps are considered stationary for this ATCM*)

If portable, describe how this was determined: \_\_\_\_\_

**9. ENGINE DATA:** (Enclose a copy of the engine data sheet and a photo of the engine nameplate, if available)

Installation Date: \_\_\_\_\_ Manufacture Date \_\_\_\_\_ or Approximate Engine Age: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial No: \_\_\_\_\_

Maximum Rated Brake Horsepower: \_\_\_\_\_ bhp      EPA Engine Tier: \_\_\_\_ (options: Tier 0, 1, 2, 3 or 4)

Fuel Used:  CARB Diesel     Other (describe): \_\_\_\_\_ Operator ID: \_\_\_\_\_

Estimated Average Fuel Use: \_\_\_\_\_ gallons per year    Average Operating Hours: \_\_\_\_\_ hours per year

(Provide the following if known)

EPA Family Name: \_\_\_\_\_

(Provide the following if known)

ARB Executive Order No: \_\_\_\_\_

**10. STANDBY ELECTRICAL GENERATORS:** (Provide this generator data in addition to the engine data above)

Generator Mfgr: \_\_\_\_\_ Model: \_\_\_\_\_ Rating: \_\_\_\_\_ kW

Is the generator only used during emergencies as defined in the ATCM?       Yes     No

Is the engine equipped with a non-resettable hour meter with minimum display of 9,999 hours?       Yes     No

Is the generator enrolled in an electrical utility Interruptible Service Contract (ISC)?       Yes     No

If part of an ISC program, does the contract require the engine to be used during Stage II/III alerts?       Yes     No

**11. REMOTE ENGINE EXEMPTION:**

Are you claiming the remote engine exemption? (*note: only applies to Existing In-Use engines*)       Yes     No

Will this engine ever be used in Ventura County?       Yes     No

Is the engine located more than one-half mile from any residential area, school, or hospital?       Yes     No

**12. NEW ENGINES:** (fill in for all engines installed after January 1, 2005)

Date of engine purchase: \_\_\_\_\_

EPA Family Name: \_\_\_\_\_



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### 13. ENGINE LOCATION

ENGINE GEOGRAPHIC COORDINATES. Provide the exact point where the engine is located. This data can be obtained by many methods including: handheld GPS, cell phone enabled GPS, using free online tools such as Google Earth.

Geographic Coordinates: \_\_\_\_\_ and \_\_\_\_\_ (circle the units): Lat/Long, UTM

If UTM Coordinates are used, circle the reference Datum: NAD27, NAD83, WGS84

If available, provide a map or aerial/satellite picture showing the entire property. Use a pen or marker to outline the property boundary and the location of the engine. Such maps/pictures may be obtained using Google Earth, Google Maps, Yahoo Maps, the Farm Works *Farm Trac* software or a similar type of package. Are such maps/pictures enclosed?  Yes  No

Does the engine ever change location at this farm?  Yes  No

Is the engine located within one-quarter mile of (1,320 feet) of a residential area, school, or hospital? (Include engines that *may* change location from outside 1,320 feet as identified in the answer above). If Yes, answer the following two questions:  Yes  No

(a) Distance from the engine to the residential area, school or hospital = \_\_\_\_\_ feet

(b) Direction from the engine to the residential area, school or hospital = \_\_\_\_\_ (e.g. NE)

### 14. EMISSION CONTROLS: (Please complete this section if emission controls are proposed or are on the engine)

Diesel Particulate Filter  Oxidation Catalyst  Other (describe): \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ ARB Executive Order No: \_\_\_\_\_

Particulate Matter Reduction Efficiency: \_\_\_\_\_ % (by mass)

### 15. SIGNATURE:

I hereby certify that all information provided on this application, and any attachments, is true and correct. I agree to pay any and all fees required by District rules for processing this application and for issuance of any Registration. If I abandon this project and withdraw my application, or should my application be disapproved, I understand that the registration fee is not refundable.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_



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## AGRICULTURAL ENGINE REGISTRATION APPLICATION FORM (Continued)

### 16. ADDITIONAL CONTACTS:

Use this Section to add the contact information associated with your registration application. The registration holder/owner is assumed to be the contact in all of the below categories unless the District is otherwise informed. You may provide additional contact information, such as cell phones, FAX numbers, or email, as you desire.

#### OPERATOR

Contact Person \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Company Name \_\_\_\_\_ FAX: \_\_\_\_\_  
 Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_

#### BILLING

Contact Person \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Company Name \_\_\_\_\_ FAX: \_\_\_\_\_  
 Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_

#### CORRESPONDENCE

Contact Person \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Company Name \_\_\_\_\_ FAX: \_\_\_\_\_  
 Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Email \_\_\_\_\_

#### INSPECTION / OTHER

Contact Person \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Company Name \_\_\_\_\_ FAX: \_\_\_\_\_  
 Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_

STATE THE NATURE OF  
THIS CONTACT:  
(e.g.: inspection contact)



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### 17. AUTHORIZED AGENT: (Complete this Section if appropriate)

I hereby designate \_\_\_\_\_  
(agent's name - print)

of \_\_\_\_\_  
(agent's business name - print)

to serve as the Authorized Agent for my company:

\_\_\_\_\_  
(applicant company's name - print)

at \_\_\_\_\_  
(facility name(s) - print)

in dealing with either the San Luis Obispo County APCD, Santa Barbara County APCD or Ventura County APCD in matters regarding (check as appropriate):

- |  |   |
|--|---|
| <input type="checkbox"/> Engine Registration Application | <input type="checkbox"/> Billing          |
| <input type="checkbox"/> Air Toxics/HRA                  | <input type="checkbox"/> Source Testing   |
| <input type="checkbox"/> Inspections and compliance      | <input type="checkbox"/> All of the above |
| <input type="checkbox"/> Other (state purpose): _____    |   |

This Designation includes written correspondence, telephone discussions and meetings and shall remain in effect until it is suspended in writing by my company or the following date: \_\_\_\_\_ whichever is earlier.

As a designated Responsible Official, I hereby authorize the above mentioned agent to represent my company in the matters identified above:

Name (print)	
Title	
Phone	
Address	
City, State, ZIP	
Signature	