



Final Reporting Form ENF-48B for Breakdowns

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

ELECTRONIC SUBMITTAL ONLY

Email this completed report to enfr@sbcapcd.org within 7 days of the end of the breakdown. Attach supporting documentation or photographs, if available. Report submittal extension requests may be granted for good cause, contact enfr@sbcapcd.org for extension requests. Failure to submit this final breakdown report within 7 days of the end of the breakdown without an approved extension will void any breakdown protection granted and subject the violation to enforcement action.

District Breakdown Tracking Number:

(This number was provided after you submitted your initial report)

I. Source Information

Company Name	<input type="text"/>	Permit Number	<input type="text"/>
Facility Name	<input type="text"/>	Facility Number	<input type="text"/>

II. Breakdown Description

<input type="text"/>

III. Affected Equipment and Violation Type

If Continuous Monitoring Equipment Breakdown, Check Here ☐

<input type="text"/>							
Device ID	<input type="text"/>	Device ID	<input type="text"/>	Device ID	<input type="text"/>	Device ID	<input type="text"/>
Device ID	<input type="text"/>	Device ID	<input type="text"/>	Device ID	<input type="text"/>	Device ID	<input type="text"/>
Device ID	<input type="text"/>	Device ID	<input type="text"/>	Device ID	<input type="text"/>	Device ID	<input type="text"/>
List All Rules Violated	<input type="text"/>						
List All Permit Conditions Violated	<input type="text"/>						

IV. Breakdown Chronology

(mm/dd/yyyy)

(00:00 - 23:59)

When Did the Breakdown Start? (i.e when did equipment failure begin)	Date:	<input type="text"/>	Time:	<input type="text"/>
When Was The Breakdown Discovered?	Date:	<input type="text"/>	Time:	<input type="text"/>
When Did The Breakdown End?	Date:	<input type="text"/>	Time:	<input type="text"/>
Initial Breakdown Notification Submitted	Date:	<input type="text"/>	Time:	<input type="text"/>
Duration of Breakdown	Hours:	<input type="text"/>	Minutes:	<input type="text"/>

☐ I understand that if the breakdown condition lasts longer than 24 hours (or 96 hours for continuous monitoring equipment), or until the end of the production run, whichever is sooner unless a variance is obtained. For more information about obtaining an Emergency Variance, please see <https://www.ourair.org/variance/>

V. Breakdown CauseWas the Breakdown due to improperly designed equipment? ☐ Yes ☐ No

Explain:

Was the Breakdown due to lack of preventative maintenance ☐ Yes ☐ No

Last inspection or maintenance date of failed equipment?

Date:

Inspection or maintenance frequency of failed equipment?

Every:

Was the Breakdown due to careless or improper operation? ☐ Yes ☐ No

Explain:

Was the Breakdown due to operator error or willful misconduct? ☐ Yes ☐ No

Explain:

VI. Mitigation Measures

Explain what steps were taken during the Breakdown to reduce emissions?

VII. Corrective Actions

Explain what steps were taken to correct the Breakdown?

Has the Breakdown been corrected? ☐ Yes ☐ No

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VIII. Preventative Measures

Explain what measures have been taken or will be taken to prevent a recurrence of this breakdown?

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IX. Excess Emissions

☐ Emissions Calculated Below

☐ Unqualifiable Emissions

☐ No Excess Emissions

NO _x (lbs)	ROC (lbs)	CO (lbs)	SO _x (lbs)	PM (lbs)	PM ₁₀ (lbs)	H ₂ S (lbs)

If no excess emission occurred or emissions are un-quantifiable explain:

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X. Breakdown Report Checklist *(Have you submitted all the required information? Please check off the boxes)*

- ☐ Are records of the last inspection or maintenance of the failed equipment attached?
- ☐ Are detailed excess emission calculations attached? Breakdown may not be accepted without a full accounting of excess emissions.
- ☐ Are pictures of the equipment or controls which failed attached (if available)
- ☐ If a final breakdown report extension was granted by a District representative, is documentation or correspondence confirming the extension attached?

XI. Additional Details

Report Filed by (print name)	
Job Title or Position of Person Filing Form	
Telephone Number of Person Filing Form	
Email Address of Person Filing Form	
Date of Report	
Signature	

***Submittal of a final breakdown does not guarantee breakdown protection for the violation. Only breakdown requests which comply with Rule 505 shall be granted breakdown protection.**