

This form is for requesting a non-technical modification to a Basic, Simple, Standard Air Contaminant Discharge Permit (ACDP), or Assignment to a General ACDP. This form should not be used for requesting name changes or transfer of ownership. Form AQ103 should be used for those changes.

1. **Company:** Enter the legal name of the new company as it is registered with the State of Oregon Corporations Division and mailing address.
2. **Facility Location:** Enter the common name of the facility and address if different from the information provided in question 1. If the information is the same, enter "same".
 - Provide the location (i.e., the street address) for the facility. If the facility is not located on a street, provide other directional information such as nearby cross streets (i.e., northwest of Third Avenue at Howard Street). If the facility is located in an industrial park, provide the name and address of the park.
 - Provide the city name, county, and zip code. If the facility is located in an unincorporated area of a county, enter "unincorporated" and identify the nearest incorporated municipality.
3. **Site Contact Person:** Provide the following information about the individual who should be contacted regarding this permit application.
 - Enter the name of the individual
 - Enter the title of the individual.
 - Enter the area code and telephone number of the individual.
4. **Non-technical modification request:** Describe the non-technical modification.
5. **Signatures:** Sign the form and submit it to the address listed in item 7 below along with a check payable to LRAPA for the total amount due. If this is a sale or merger, then the form must be signed by a representative of each business entity.
6. **Fees:** Include the fees with the application.
7. **Where to submit the application:** Submit two copies of the application along with the fees to LRAPA:

Lane Regional Air Protection Agency
1010 Main St.
Springfield, OR 97477
(541) 736-1056

FOR LRAPA USE ONLY	
Permit Number:	Date Received :
Application No:	
Check No.	Amount \$

1. Company	2. Facility Location
Legal Name:	Name:
Mailing Address:	Street Address:
City, State, Zip Code:	City, County, Zip Code:
3. Site Contact Person	Telephone number:
Name:	Fax. number:
Title:	e-mail address:

4. Describe the permit modification, including revisions to permit conditions, if necessary.

5. Signature	
<i>I hereby apply for permission to discharge air contaminants in Lane County, Oregon, as stated or described in this application, and certify that the information contained in this application and the schedules and exhibits appended hereto, are true and correct to the best of my knowledge and belief.</i>	
_____	_____
Name of official (Printed or Typed)	Title of official and phone number
_____	_____
Signature of official	Date

6. Fee Information: (Make the check payable to LRAPA)

Non-technical permit modification (LRAPA Title 37, Table 2)

7. Where to send the application: Submit two copies of the completed application along with the fees to the LRAPA at 1010 Main St., Springfield, OR 97477.