



South Coast Air Quality Management District
 21865 Copley Drive
 Diamond Bar, CA 91765
 909.396.2000

Rule 1415 Registration Form (For Air Conditioning Systems Only)

FACILITY INFORMATION				<input type="checkbox"/> AQMD ID # OR <input type="checkbox"/> New Business	
FACILITY NAME					
LOCATION ADDRESS					
CITY		STATE CA	ZIP CODE	CONTACT PHONE	
CONTACT PERSON				TITLE OF CONTACT PERSON	
TYPE OF BUSINESS				BUSINESS TYPE CODE (SEE INSTRUCTIONS)	
FOR THIS PROJECT, HAS A CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) DOCUMENT BEEN REQUIRED BY ANOTHER GOVERNMENT AGENCY? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, ENTER NAME OF AGENCY:				DO YOU CLAIM CONFIDENTIALITY OF DATA? YES <input type="checkbox"/> NO <input type="checkbox"/>	

EQUIPMENT INFORMATION							ANNUAL ADDITIONAL REFRIGERANT (lbs.)	
FOR EACH AIR CONDITIONING SYSTEM AT THE ABOVE FACILITY LOCATION THAT HOLDS >50 LBS. OF HIGH GLOBAL WARMING POTENTIAL REFRIGERANT, E.G., CFC (CHLOROFLUOROCARBON), HCFC (HYDROCHLOROFLUOROCARBON), HFC (HYDROFLUOROCARBON), PFC (PERFLUOROCARBON), ETC, PLEASE PROVIDE THE FOLLOWING INFORMATION:								
UNIT >50 lbs.	MANUFACTURER	MODEL YEAR	SERIAL NUMBER	REFRIGERANT TYPE	STORAGE CAPACITY (lbs. of refrigerant)	DATE OF LAST AUDIT/ MAINTENANCE	USAGE YEAR (2009)	USAGE YEAR (2010)
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								

So that your account can be credited properly, please mail the completed form(s), along with a check for **\$114.66** to cover the Rule 1415 Registration Plan fee for your facility, to the following address:

**Area Sources
 South Coast Air Quality Management District
 21865 Copley Drive
 Diamond Bar, CA 91765**

If there are more than 8 units please attach an additional form.

COMPANY INFORMATION					
COMPANY NAME				CONTACT PERSON	
MAILING ADDRESS			CITY	STATE	ZIP CODE
CONTACT PHONE		E-MAIL		FAX	
SIGNATURE				DATE	
AQMD USE	APPLICATION NO.	DATE	CHECK NO.	AMOUNT \$	ASSIGNMENT UNIT
NUMBER OF FACILITIES	EQUIP. CAT. NO.	ENGINEER A R DATE INITIAL			

Rule 1415 REGISTRATION FORM INSTRUCTIONS

FACILITY INFORMATION	EQUIPMENT INFORMATION
<p>FACILITY NAME For identification purposes, please enter the name of the facility which owns/operates the subject air conditioning equipment.</p>	<p>MANUFACTURER Please identify the manufacturer of the unit.</p>
<p>AQMD ID# OR New Business. This information is used for identification purposes. Please enter the AQMD company identification number. If you are a new business check that box and we will create an AQMD ID for your business.</p>	<p>MODEL YEAR Please identify the model year of the unit.</p>
<p>LOCATION ADDRESS Please identify the address where the equipment or facility is located. If no street address is available, please provide a location description and zip code.</p>	<p>SERIAL NUMBER Please identify the serial number of the unit.</p>
<p>CONTACT PERSON, TITLE, AND PHONE NUMBER Please identify the name, title and phone number of the person who would be contacted at the equipment location.</p>	<p>REFRIGERATION TYPE Please indicate the type of chlorofluorocarbon (CFC), hydrochlorofluorocarbon (HCFC), hydrofluorocarbon (HFC), or blends used as refrigerant in each system.</p>
<p>TYPE OF BUSINESS This information is used by the AQMD for planning and statistical purposes. Please state the type of business you conduct in this facility (e.g. hotel, retail store, etc.).</p>	<p>STORAGE CAPACITY Enter the total refrigerant storage capacity of each unit.</p>
<p>BUSINESS TYPE CODE This information is used by the AQMD for planning and statistical purposes. Referring to the provided list of business codes, please enter the code which best describes your business activity at this facility.</p>	<p>DATE OF LAST AUDIT/MAINTENANCE In accordance with Rule 1415 (d)(2), an annual audit/maintenance inspection is required for all refrigeration systems subject to this rule. Indicate the last date the appropriate audit/inspection was conducted.</p>
<p>CALIFORNIA ENVIRONMENTAL QUALITY ACT A California Environmental Quality Act (CEQA) document (e.g., environmental impact report, negative declaration) is required for any project which results in significant effect on the environment. If such a document has been required by another governmental agency, please enter the name of that agency. A copy of this document is also required before the registration can be deemed complete. Therefore, please submit a copy of the approved document. In most cases the answer to this question is "no."</p>	<p>ANNUAL ADDITIONAL REFRIGERATION Usage Year 2009 Indicate the total quantity of refrigerant (in pounds) that was added to each system during the 2009 calendar year. Usage Year 2010 Indicate the total quantity of refrigerant (in pounds) that to date has been added to each system for the 2010 calendar year.</p>
<p>CONFIDENTIALITY District records are subject to the California Public Records Act. To claim confidentiality of information submitted with this registration, check "yes." Please be sure that all submitted information that you wish to be kept confidential is clearly marked as such. Please also state the reason(s) for claiming confidentiality. Examples of acceptable reasons are trade secrets and production data. Please note that state law prevents emissions data and permit documents from being kept secret.</p>	<p>COMPANY INFORMATION COMPANY NAME For identification purposes, please enter the name of the entity responsible for the submittal of the registration, typically the owner/operator of the equipment. The information in this section of the registration form will be used for all future correspondence, including information about subsequent registrations. In the event that the registration form is prepared and submitted by a party other than the equipment owner/operator, it is important that the AQMD be notified of any changes to this information.</p>
	<p>CONTACT PERSON, MAILING ADDRESS, PHONE, E-MAIL, FAX Please identify the person's name that is responsible for the completion and submittal of the Rule 1415 Registration Form, include the appropriate mailing address information, telephone number, E-mail and fax number.</p>
	<p>QUESTIONS? If you have questions regarding this registration form or Rule 1415, please contact Rizaldy Calungcagin at (909) 396-2315. He may be reached by E-mail at rcalungcagin@aqmd.gov.</p>

DID YOU REMEMBER?

1. To provide all requested information (business type code, last audit/maintenance and refrigerant added)
2. To sign and date the registration form?
3. To include the required filing fee with your hardcopy registration submittal?