

## **APPLICATION FOR CHANGE IN RESPONSIBLE OFFICIAL**

Facility Name:		
Facility Address:		
Facility Phone #:		
Responsible Official Na	me:	
Responsible Official's Ti	itle:	
Responsible Official's P	hone #:	
Facility Contact Title:		
	#:	
Facility Contact E-mail	Address:	
	that the new Responsible Official will oversed	
Existing Permit Number		Source Description or operating permit under "Emission Source Description")
	pest of my knowledge that each sour	rce listed above is operating and will continue to applicable air pollution regulations.
Signature of Responsible Official or Designated Representative		Date

207-00-019 (Rev. 8/16)