

Antelope Valley Air Quality Management District

2551 W Avenue H, Lancaster, CA 93536 661-723-8070 www.AVAQMD.ca.gov

CHANGE OF OWNER FORM

Section 1: Owner Information			Please refer to Rule 301 for Fee
Permit to Be Issued To (Company name):			Federal Tax ID #:
Mailing/Billing Address (for above company nam	ne) include city, state, and	zip code:	
Facility or Business License Name (for equipmen	t location):		
Facility Address - Location of Equipment (if same	as for company, enter "Sa	nme"):	
Contact Name:	Title:	Email Address:	Phone:
General Nature of Business:			
ype of Organization (Check one):			
Individual Owner Partnership Cor	rporation Utility	Local Stat	te Agency Federal Agency
ection 2: Permit Information			
Current Permit #: Section 3: Certification			
nereby certify that all information contained here	ein is true and correct.		
lame of Responsible Official Official Tit	tle Signatu	re of Responsible Official	Date Signed
hone:	3,6,1444	Email:	Date digited
	Application Subm	nittal Instructions:	
. Submit completed application to Engineering@avaqmo . Pay the corresponding application fee via check or crec			
Payment by check: Make check payable to the Antelope Valley AQMD Mail the check with a copy of this completed application to: Antelope Valley AQMD 2551 W Avenue H, Lancaster, CA 93536		Payment by credit card Pay online at our website: http://www.avaqmd.ca.gov/ Click "Pay Fees" Please note a surcharge applies for all credit card payments.	
If payment is made online via credit card, please email tl Should you have any additional questions, please, do no			il at Engineering@avaqmd.ca.gov
	FOR DISTRIC	Γ USE ONLY	

Company/Facility Number: Application Number: Permit Number: Invoice Number: