

Account Emissions
TCEQ Emissions Inventory Year _____

TCEQ Air Emissions Inventory

Company Name: _____	Site Name: _____	TCEQ Air Account Number: _____	RN: _____
----------------------------	-------------------------	---------------------------------------	------------------

REPORT TOTAL EMISSIONS

CONTAMINANT	ANNUAL (tons/year)	OZONE (pounds/day)	SMSS (tons/year)	Emissions Events (EE) (tons/year)
PM ₁₀				
Lead				
Sulfur Dioxide				
Nitrogen Oxides				
Carbon Monoxide				
Volatile Organic Compounds				
PM _{2.5}				

SITE QUANTIFIABLE EVENT TOTALS

Note: Report TOTAL NUMBER of each event type for the reported EIQ Year per 30 TAC Sections 101.201 and 101.211.

Reportable Emission Events: _____ Reportable Scheduled Maintenance, Startup, Shutdown Activities: _____

Non-Reportable Emission Events: _____ Non-Reportable Scheduled Maintenance, Startup, Shutdown Activities: _____

Excess Opacity Events: _____

EMISSIONS EVENTS CERTIFICATION

Pursuant to Texas Health and Safety Code Section 382.0215(f) I do hereby certify that no emissions events were experienced at this account during the Emissions Inventory reporting calendar year.

Signature: _____

SIGNATURE OF LEGALLY RESPONSIBLE PARTY

I do hereby certify that information reported in this inventory is true, accurate, and fully represents the emissions that occurred during the Emissions Inventory reporting calendar year to the best of my knowledge.

Signature: _____ Printed Name: _____

Title: _____ Date: _____