

**Account Information**

TCEQ Emissions Inventory Year \_\_\_\_\_

**TCEQ Air Emissions Inventory**

<b>Company Name:</b>		<b>TCEQ Air Account Number:</b>		
<b>Company Role (Mark one):</b> <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Both		<b>Customer Reference Number (CN):</b>	<b>Regulated Entity Reference Number (RN):</b>	
<b>SITE INFORMATION</b>				
<b>Status:</b> <input type="checkbox"/> New Point Source    OR <input type="checkbox"/> Merger If merger, provide the other site's TCEQ Air Account number:		<b>Point Source Type:</b> <input type="checkbox"/> Stationary <input type="checkbox"/> Portable		
<b>Site Name:</b>		<b>Location Description:</b>		
<b>Near City:</b>		<b>County:</b>	<b>ZIP Code:</b>	
<b>CENTROID GEOGRAPHICAL COORDINATES</b>				
<b>Latitude and Longitude in NAD of 1983</b>		<b>OR</b>	<b>UTM Coordinates in NAD of 1983</b>	
Latitude ____ deg ____ min ____ sec	Longitude ____ deg ____ min ____ sec		Zone <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15	East Meters _____
<b>STANDARD INDUSTRIAL CLASSIFICATION CODES (SIC)</b>				
<b>Primary SIC:</b> _____ <b>Secondary SIC:</b> _____ <b>Business Description:</b> _____				
<b>SITE STATUS AND OPERATING SCHEDULE</b>				
<b>Site Status (Mark only one box below)</b> <input type="checkbox"/> Operational <input type="checkbox"/> Temporarily Shut Down <input type="checkbox"/> Permanently Shut Down <input type="checkbox"/> Planned <input type="checkbox"/> Seasonal <input type="checkbox"/> Under Construction <input type="checkbox"/> NESHAP Demolition <input type="checkbox"/> NESHAP Renovation <input type="checkbox"/> NESHAP Spraying		<b>Operating Schedule:</b> _____ hours/day    _____ days/week    _____ weeks/year		
		<b>Total Annual Operating Time:</b> _____ hours		
<b>Seasonal Operating Percentages (NOTE: Spring % + Summer % + Fall % + Winter % must equal 100%)</b>				
Spring: _____ %    Summer: _____ %    Fall: _____ %    Winter: _____ %				