

EASTERN KERN AIR POLLUTION CONTROL DISTRICT

2700 "M" STREET SUITE 302, BAKERSFIELD, CA 93301-2370 PHONE: (661) 862-5250 • FAX: (661) 862-5251 • www.kernair.org

APPLICATION FOR COMMERCIAL SOLAR POWER GENERATION FACILITY AUTHORITY TO CONSTRUCT AND PERMIT TO OPERATE

A \$130 filing fee paid by check or money order is required for each application.

Facility Information				
Business Name to Appear on Permit::	Site Operator:			Site Phone No:
Site Location/Address:	District Permit No:			FAX:
City:	Zip: Business E-mail Ad		ness E-mail Address	:
	_			
Assessors' Parcel No: OR	/4 SECTION TOWN		TOWNSHIP	P RANGE
Air Monitoring Plan Included: Yes No	Total Acreage:	Total Acreage:		Total Megawatts:
Billing Information (Notify District as soon as	possible if billing	g informatio	n changes)	
Business Site:	Billing Contact:			Billing Phone No:
Billing Address:				FAX:
City:		State	:	Zip:
Complete this Section if application is being su	ibmitted by Cont	tractor/Con	zultant	
Contractor/Consulting Company:	Contact:		, uitant	Contact Phone No:
Contractor/Consulting Address:	Contractor/Consulting E-mail Address:			
City:	State:	Zip:		FAX:
Reason for Application (Check all that apply)				
□ New Facility □ Modifying Existing Facility □ Other □ Violation (List Number):				
Briefly describe project:				
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Where should Authority to Construct be maile	ed? Facility	Address [Billing Addres	s Contractor/Consultant Address
Print Contact Name: Consultant? \[\subseteq \text{YES} \text{NO} \] If YES, please attach Assignment of Agent				
Title: Phone	E-Mail Address:			
Print Signing Authority Name If Different:				
Signature: Date:				
DATE RECEIVED	Validation (for EKAP	CD use)	
	,		,	Filing Fee: \$
				Receipt No:
				-
				Date:

PER-02 Revised 4/1/2022