Butte County Air Quality Management District
629 Entler Avenue, Suite 15 Chico CA 95928
Office: 530-332-9400 www.BCAQMD.org

Facility Name: _____ Permit to Operate Number: _____
Street Address: _____City: _____ Zip Code: _____

Maintenance & Repair Log

Date of Inspection (MM/DD/YY)	Description of Damage / Defect	Date of Repair	Maintenance/ Test Performed (List of components repaired, replaced & installed including make, model & applicable serial numbers and/or test performed)	Technician (Repair person's name, company name, address & phone #)	ICC Certification (VI#)

Instruction: All vapor recovery repairs are to be logged onto the form.