

**Butte County**  
**AIR QUALITY MANAGEMENT DISTRICT**

629 ENTLER AVENUE, SUITE 15 CHICO, CALIFORNIA 95928  
TELEPHONE (530) 332-9400 FAX (530) 332-9417

**MISC MATERIAL PROCESSING**

**PRODUCTION DATA YEAR:** \_\_\_\_\_

Please complete the annual usage information, sign and return this form to the Butte County Air Quality Management District each year by January 31. Refer to recordkeeping conditions of your permit for further guidance. If you have any questions concerning this form, please contact this office at (530) 332-9400.

Company/Facility Name: \_\_\_\_\_

Address/Location: \_\_\_\_\_

Permit to Operate #(s): \_\_\_\_\_

Total Facility Hours of Operation \_\_\_\_\_ Hrs/Yr

Total Tons of Waste Processed \_\_\_\_\_ Tons/Yr

Particulate Collection Device (Cyclone, Baghouse, Settling Chamber, Other (describe))	Hours of Operation (Hours/year)	Amount of waste collected (Tons/year)
1.		
2.		
3.		
4.		

Other production information as required by Permit to Operate: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The undersigned hereby acknowledges and agrees that an electronic copy of this signed document shall be enforceable in the same manner as the signed original document.

Name (Printed) \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Production data provided on this form is considered trade secret information as defined under Section 6254.7(d) of the Government Code and is therefore exempt from disclosure under the provisions of the California Public Records Act.