CERTIFICATION REPORT  
(FORM 1101-K1)

DISTRICT: Butte County Air Quality Management District
district use only

COMPANY NAME:  FACILITY NAME:

I. FACILITY INFORMATION

1. Company Name: ________________________________________________________________
2. Facility Name (if different than Company Name): ________________________________
3. Mailing Address: _____________________________________________________________
4. Street Address or Source Location: _____________________________________________
5. Facility Permit Number: ______________________________________________________

II. GENERAL INFORMATION

1. Reporting period (specify dates): ________________________________________________
2. Due date for submittal of report: ______________________________________________
3. Type of submittal:  
   [ ] Monitoring Report (complete Section III below)   
   [ ] Compliance Schedule Progress Report (complete Section IV of Form 1101-K2)   
   [ ] Compliance Certification (complete Section V of Form 1101-K2)

III. MONITORING REPORT INFORMATION

1. Were deviations from monitoring requirements encountered during the reporting period?  
   [ ] No   [ ] Yes (If Yes, complete Form 1101-L)

IV. COMPLIANCE SCHEDULE PROGRESS INFORMATION

1. Dates the activities, milestones, or compliance required by schedule of compliance was achieved/will be achieved: 
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

2. Provide explanation of why any dates in schedule of compliance were not/will not be met: ______________________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

3. Describe in chronological order preventive or corrective action taken: _________________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________
V. COMPLIANCE CERTIFICATION

1. Was source in compliance during the reporting period specified in Section II of Form 1101-K1 and is source currently in compliance with all applicable federal requirements and permit conditions.

[ ] Yes  [ ] No (If no, re-submit Forms 1101-I and 1101-J)

I certify based on information and belief formed after reasonable inquiry, the statement and information in this document and supplements are true, accurate, and complete.

________________________________________  _______________________
Signature of Responsible Official             Date

________________________________________
Print Name of Responsible Official

________________________________________  _______________________
Title of Responsible Official and Company Name  Telephone Number of Responsible Official: (_______) ___________ - ______________