

# Mojave Desert Air Quality Management District

## TITLE V SEMI-ANNUAL MONITORING REPORT

**I. FACILITY INFORMATION**

1. FACILITY NAME:	2. FACILITY ADDRESS:
3. COMPANY NAME:	4. COMPANY ADDRESS:
5. FACILITY ID:	6. TITLE V PERMIT #:
7. THIS REPORT IS DUE:	
8. THIS REPORT COVERS THE PERIOD FROM: _____ TO: _____	

**II. Indicate the status of deviations during this reporting period:**

- a.  This facility has not experienced any deviations.
- b.  This facility has experienced one or more deviations as indicated in the table below:

**SUMMARY OF DEVIATIONS**(Attach additional pages as necessary)

9. Permit Unit #	10. Permit Condition #	11. Parameters Monitored	12. Periods of Deviation	13. Permit Limit	14. Actual Emissions or Operating Condition	15. Deviation or Excess	16. Notes (e.g. cause, corrective action, etc.)

**Was all monitoring as required by the permit conducted?**

- a.  Yes
- b.  No

If no, please explain:

**III. RESPONSIBLE OFFICIAL SIGNATURE STATEMENT**

I declare, under penalty of perjury under the laws of the state of California, that, based on information and belief formed after reasonable inquiry, all information provided in this certification package is true, accurate, and addresses all deviations during the reporting period.

**Signature of Responsible Official Date**

\_\_\_\_\_

**Name of Responsible Official (please print) Title of Responsible Official (please print)**

\_\_\_\_\_

Mail to:  
MDAQMD,  
14306 Park Avenue  
Victorville, CA 92392

And Mail to:  
EPA Region IX, Air Division,  
75 Hawthorne Street  
San Francisco, CA 94105-3901

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## TITLE V MONITORING REPORT Instructions

### I. FACILITY INFORMATION

1. Enter the name of the facility
2. Enter the address of the facility
3. Enter the name of the owner
4. Enter the address of the owner
5. Enter the MDAQMD Facility ID
6. Enter the Title V permit number
7. Enter the due date of the report
8. Enter the date range that the report covers

### II. SUMMARY OF DEVIATIONS

9. Permit Number: Reference the District permit unit by permit number.
10. Cite the permit condition number to identify each term or condition that contains the monitoring requirement
11. Identify the parameters monitored (e.g. ppm NO<sub>x</sub>, exhaust temperature, etc.)
12. Periods of Deviation – Identify all periods of deviation by date and time.
13. Limit – Identify the limit for the parameter being monitored (e.g. 30ppm NO<sub>x</sub>, 100 °F, etc.)
14. Actual – Identify the highest actual result for the parameter being monitored for each period of deviation (e.g. 25 ppm NO<sub>x</sub>, 110 °F, etc.)
15. Deviation or Excess – Identify the difference between the actual result for the parameter being monitored and the limit for each period of deviation (e.g. +5ppm NO<sub>x</sub>, +10 °F, etc.)
16. Notes – Identify any probable cause of deviations, and any corrective actions or preventative measures taken.