

FORM 1-COMPANY INFORMATION

COMPANY INFORMATION

| | | |
|--|--------|-----------|
| Registration To Be Issued To (Company Name): | | |
| Mailing Address: | | |
| City: | State: | Zip Code: |
| Street Address (if different from above): | | |
| City: | State: | Zip Code: |
| Telephone Number: | | |
| Fax Number: | | |
| Company Email Address: | | |
| General Nature of Business: | | |
| Is this an agricultural source? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Is this a rental business? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Is this a provider of essential public service? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

SIGNATURE

I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

| | |
|---------------------------------|--------------------|
| Name of Responsible Party: | Title: |
| Signature of Responsible Party: | Date of Signature: |

FORM 1-COMPANY INFORMATION

ED/CREB-160 (REV. 09/2019) PAGE 2 OF 2

INSTRUCTIONS FOR COMPLETING THIS FORM

Forward the completed application without payment to:

California Air Resources Board
Portable Equipment Registration Program
P.O. Box 2038
Sacramento, CA 95812

Upon receipt of completed application, we will provide you with an invoice for the fees due.

PRIVACY STATEMENT

Please note that under the California Public Records Act (Gov. Code, § 6250 et seq.), your submissions, including associated contact information (e.g., your address, phone, email, etc.) become public records and may be released to the public upon request. Personal information will be protected from disclosure as required by law, including under the Information Protection Act (Cal. Civ. Code, § 1798, et seq.). Information that is claimed to be confidential should be submitted as provided in CARB's regulations for submitting confidential data, California Code of Regulations, title 17, section 91011.