

**FORM 19-APPLICATION FOR A CHANGE IN OWNERSHIP OF AN EXISTING REGISTRATION**

**COMPANY INFORMATION**

Registration To Be Released To (Company Name):	
Mailing Address:	City/State/Zip Code:
Street Address (if different from above):	City/State/Zip Code:
Telephone Number:	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	

**EQUIPMENT INFORMATION**

Registration Number:	
Serial Number (Submit a photograph of the engine label to avoid processing delays):	
For engine registrations that include renewal: <input type="checkbox"/> No Discount <input type="checkbox"/> 25% Discount: 4-9 engines inspected at one time <input type="checkbox"/> 35% Discount: 10 or more engines inspected at one time	
Hour Meter Reading:	Date:
Company Unit ID (Optional):	New Home District (Only Upon Renewal):
Check the box below if this is an auxiliary engine on a two-engine vehicle, or on a harbor craft vessel, and fill in the blank:	
<input type="checkbox"/> Crane	DOORS EIN#:
<input type="checkbox"/> Snow blower	DOORS EIN#:
<input type="checkbox"/> Other auxiliary engine	DOORS EIN#:
<input type="checkbox"/> Water well drill rig (Submit copy of current C-57 license)	DOORS EIN#:
<input type="checkbox"/> Sweeper (privately-owned only)	TRUCRS ID#:
<input type="checkbox"/> Harbor Craft	Harbor Craft Vessel Type:

**FORM 19-APPLICATION FOR A CHANGE IN OWNERSHIP OF AN EXISTING REGISTRATION**

ED/CREB-172 (REV.06/2020) PAGE 2 OF 3

**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 Official:	Title:
Signature of Responsible Official:	Date of Signature:

**FORM 19-APPLICATION FOR A CHANGE IN OWNERSHIP OF AN EXISTING REGISTRATION**

ED/CREB-172 (REV.06/2020) PAGE 3 OF 3

**INSTRUCTIONS FOR COMPLETING THIS FORM**

---

By submitting this request, you are agreeing to complete the registration process including payment of application fees.

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**

---

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.