



UPSET/BREAKDOWN & EMISSION EXCEEDANCE
PART II: CORRECTIVE ACTION REPORT

(Report submittal to AQMD required within one week after event correction)

COMPANY:

EXCEEDANCE EMISSIONS: (estimate emissions which exceeded the allowed rate(s))

NOx: _____ #/hr SOx: _____ #/hr PM/PM₁₀: _____ #/hr TOG: _____ #/hr CO: _____ #/hr
 _____ #/day _____ #/day _____ #/day _____ #/day _____ #/day
 _____ #/total _____ #/total _____ #/total _____ #/total _____ #/total

Opacity: _____ % _____ minutes

Other: _____

EXCEEDANCE, UPSET/BREAKDOWN CORRECTED:

Yes, Emission Exceedance Ceased Date: _____ Time: _____
 Yes, Upset/Breakdown Corrected Date: _____ Time: _____
 Yes, Non-complying Equipment Shutdown * Date: _____ Time: _____

** Actions result in compliance*

Total Duration of Non-Compliance Event: Days, Hrs, Min: _____
 Commencement of Complying Operations: Date: _____ Time: _____

No, Emission Exceedance Not Terminated Variance #: _____
 No, Upset/Breakdown Not Corrected Variance #: _____

PROOF OF COMPLIANCE: (use attachments as necessary)

CORRECTIVE MEASURE TAKEN: (to avoid reoccurrence of exceedance or upset/breakdown)

NOTIFICATION: By Fax By Telephone Hand Delivered Email

By: _____ Title: _____
 Telephone #: _____ Date: _____ Time: _____

FOR AQMD USE ONLY

Received _____ Date: _____
 By: _____ Time: _____