



APPLICATION FOR PERMIT TRANSFER (CHANGE OF OWNERSHIP)

PART I – TRANSFEREE (New Owner) Completes:

- 1. Attach a copy of current certificate to operate a source of air contamination
2. Name of Transferee: Phone Number ()
Mailing Address: Email:
3. Name of Facility:
FacilityAddress
4. Will there be any modifications to the current operation as permitted? Yes No . If yes, submit details on separate sheet.
5. Provide Proof of Insurance: Worker’s Compensation Insurance Form C-105.2 or U-26.3, and Disability Insurance Form DB-120.1.
6. If new owner is a corporation or LLC, complete Certificate of Resolution for Authorization form.
7. CERTIFICATION: This certifies that the Transferee seeks to be the legally responsible party for operations, authorized by the permits identified above.

Printed Name and Title of Transferee

Signature of Transferee . Date

PART II – TRANSFEROR (Present or Former Owner) Completes:

- 1. Name of Transferor : Phone ()
Mailing Address:
Email:
2. Name of Facility if different from Facility name in Part 1:
3. CERTIFICATION: This certifies that ownership for the facility identified in Part 1 of this form will be/ was conveyed to the party identified as the Transferee on (date). I affirm that this conveyance includes the rights and obligations of the permits, approvals, or applications identified above.

Printed Name and Title of Transferor

Signature of Transferor . Date

PART III – PERMIT TRANSFER VALIDATION SECTION - (FOR OFFICIAL USE ONLY)

Transfer of Permit Approved, effective as of . Transferee subject to conditions of original permit, without exception.
Attached find revised permit (CTO) reflecting new owner information

Signature . Date