



State of Oregon
Department of
Environmental
Quality

Section 502(b)(10) Change Notification

Facility name: _____ Permit Number: _____

Part A

1.	Contact Person:	Name	
		Title	
		Phone number	
		e-mail address	
		Fax number	
2.	Describe the change and provide a reason for the change:		
3.	Date change will take effect:		
4.	Will there be any change in emissions within the PSEL? If yes, complete Part B.		
5.	List any permit terms or conditions that will no longer be applicable as a result of the change.		
6.	List any terms or conditions applicable to the change.		
7.	Explain why the change will not contribute to a violation of any applicable requirements,		
8.	Will the change cause or contribute to an exceedance of the PSEL?		
9.	Is the change a Title 1 modification?		

Statement of Certification:

Based on information and belief formed after reasonable inquiry, the statements and information in this document and any attachments are true, accurate and complete.

Name of Responsible Official

Title of Responsible Official

Signature of Responsible Official

Date

Part B

Device/process	Pollutant	PSEL (tons/yr)	
		Before change	After change

Provide documentation below or attach the information to this form.