

## **Exposure Location Change Request**

Facility Name:	Source Number:
exposure location based on the current land u	ocation in a manner that differs from underlying zoning for that se [OAR 340-245-0210(1)(a)(F)]. In order to request a se submit this form with the following documents when you tocol:
exposure location(s) (for more information webpage).  2. Complete the AQ522 Form (Excel formation zoning designations (State or local zoning requesting a change to exposure location Note: You do not need to submit this form	exposure locations for which you are requesting a change to on on zoning and exposure locations, please see our FAQ at) – listing exposure locations, their corresponding land use ng), and an explanation of each location for which you are n.  In the property of the prope
permit with annual reporting requirements. An	tion and a risk assessment is completed, DEQ will issue a nual verification that the current land use has not changed, and , will be determined using form AQ540, submitted as part of
	that based on information and belief formed after ormation in this document are true, accurate, and
Name of Certifying or Responsible Official	Title of Certifying or Responsible Official  11/09/2021
Signature of Certifying or Responsible Of	