South Coast Air Quality Management District
P.O. Box 4944
Diamond Bar, CA 91765
(909) 396-2000

FORM 2: PROPOSED RULE - 1188 VACUUM TRUCK OPERATIONS

TRUCK OPERATOR SURVEY For Range of Operator Log Dates (Identify Survey Period)

Note: The information supplied pursuant to this survey is not intended to be used and will not be used to support the issuance of a Notice of Violation

Section I. Administrative Information

LEGAL NAME OF VACUUM TRUCK OPERATOR	SCAQMD ID. NO. (IF APPLICABLE)	RANGE OF OPERATOR LOG DATES (Start and End Date)

STREET ADDRESS	CITY	STATE	ZIP CODE

CONTACT	POSITION WITH THE COMPANY	PHONE NUMBER	E-MAIL ADDRESS

Section II. Equipment Information

A	B	C	D	E	F	G	H	I
Affected Facility Serviced	**No. of Trucks Used at Affected Facility**	**Truck Description (Make and Model)**	**Vacuum Truck Fuel Type**	**Vacuum Truck Capacity (gals, bbls)**	**Type of Material Loaded**	**Estimated Volume of Material Loaded (gals, bbls)**	**Integrated Controls (Y/N)**	**If Integrated, Identify Control Type**

Section III. Skid-Mounted Control Equipment Inventory

A	B	C	D
Existing AQMD Permit (Y/N)	**Control Equipment Type**	**Capacity (Identify Unit of Measure)**	**Types of Material Handled**

Please incorporate into Excel Tables and add more lines as necessary to report on your entire inventory of trucks and control equipment as well as types of material transferred

An Excel version of this form may be obtained by contacting Ken Ellis at (909) 396-2457 or kellis@aqmd.gov