

**ANNUAL REPORTING FORM FOR:
AUTOBODY REPAIR OR PAINTING SHOPS**

AQRB-001

1. Permit Number 2. Reporting period (calendar year):

3. Company information:

Legal Name:	Other company name (if different than legal name):
Mailing Address:	Site Address (if different than mailing address):
City, State, Zip Code:	City, County, Zip Code:

4. Site Contact Person:

Name:	Telephone number:
Title:	Fax Number:

5. Number of automobiles painted within the last calendar year:

6. Number of gallons of paint used during the previous calendar year:

7. Please list any air quality/nuisance complaints received within the last calendar year? How were the complaints addressed?

8. I am currently in compliance with the motor vehicle refinishing requirements set forth in conditions 2.2 and 2.3 of the Basic Air Contaminant Discharge Permit:

9. Certifying Signature

Name of official (Printed or Typed):	Title of official and phone number:
Signature of official:	Date:

SUBMISSION INSTRUCTIONS:

Email this completed form to the Environmental Coordinator at permitting@lrpa-or.gov

Lane Regional Air Protection Agency
1010 Main Street
Springfield, OR 97477
(541) 736-1056