



Dedicated to protecting and improving the health and environment of the people of Colorado

TRANSFER OF OWNERSHIP CERTIFICATION Construction Permits and/or Air Pollutant Emission Notices

This certification form must be submitted to the Colorado Department of Public Health and Environment's Air Pollution Control Division (the Colorado APCD) along with a copy of the relevant bill of sale or purchase agreement documentation. This documentation must clearly state that the equipment and/or resultant emissions source(s) related to operations at the facility/facilities referenced on this form have been transferred between the named parties. An *Air Pollutant Emission Notice (APEN)* must also be submitted for each individual active and reportable emissions point to be transferred.

Transferred Emissions Sources	
Permit #	AIRS ID

Note: If additional space is needed, please attach a table in the same format.

Transfer of the permit(s)/emissions source(s) conveys to the new owner all responsibility, coverage and liability associated with the permit(s)/emissions source(s), including but not limited to: all fees associated with this ownership transfer application, all outstanding fees, compliance with referenced permit(s) and any/all applicable Air Quality Control Commission regulations, etc. By submitting this Transfer of Ownership Certification form without a request for permit modification, you certify that no change is contemplated which would constitute a new or modified air pollution source. Transfer of the permit(s)/emissions source(s) shall be effective as of the date that the Colorado APCD has received a complete ownership transfer application, including: a completed copy of this form, the appropriate completed APEN form(s) and payment for all applicable application filing fees.

The transfer of the permit(s)/emissions source(s) occurred on (date): _____

The permit(s)/emissions source(s) have been transferred from (company name): _____

New Responsible Party			
Company Name:			
Name of Legally Authorized Person (Please Print):		Title:	
Signature of Legally Authorized Person:	x	Date:	

PLEASE RETURN COMPLETED FORM TO:
 CDPHE-Air Pollution Control Division
 APCD-SSP-B1
 4300 Cherry Creek Drive South
 Denver, CO 80246-1530

