

## Utah Division of Air Quality

New source Review Section

Form 1c

## Ownership Change/Company Name Change Notification

The following information is necessary before the Division will be able to make the name change you have requested. Please return this document within 30 days of receipt.

Please be aware that <u>all</u> records associated with this company will change to the new name unless you specifically indicate otherwise. The fee assessed for making these changes is authorized by the legislature for the actual time spent by the reviewer.

Note: If this name change is the result of a sale or acquisition, **both the buyer & the seller must sign this document** as proof of the closure of the agreement.

| Reason for Ownership Change/Company                                               | Name Change _                    |                                                                                                                                              |  |
|-----------------------------------------------------------------------------------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--|
| Company Name                                                                      |                                  |                                                                                                                                              |  |
| Current                                                                           |                                  | Previous                                                                                                                                     |  |
| Parent Company:                                                                   |                                  | Parent Company:                                                                                                                              |  |
| Company Address                                                                   |                                  |                                                                                                                                              |  |
| Current                                                                           |                                  | Previous                                                                                                                                     |  |
|                                                                                   |                                  |                                                                                                                                              |  |
| Approval Orders Affected and Sites For                                            |                                  |                                                                                                                                              |  |
| Approval Order # (DAQE-ANxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx                     |                                  | Site Name & Address (for each Approval Order)                                                                                                |  |
|                                                                                   |                                  |                                                                                                                                              |  |
|                                                                                   |                                  |                                                                                                                                              |  |
| The undersigned, as an authorized represe and requests that the company name char | entative of the co               | mpany, acknowledges that the above information is correct, ll Air Quality records.                                                           |  |
| Present Owner Prev                                                                |                                  | vious Owner                                                                                                                                  |  |
| Signature                                                                         | Sign                             | Signature                                                                                                                                    |  |
| Name (please print)                                                               | Nar                              | Name (please print)                                                                                                                          |  |
| Title                                                                             | Titl                             | Title                                                                                                                                        |  |
| Contact Name (Please print)  () - Phone Number                                    | Stat<br>Div<br>Attu<br>195<br>PO | Return this form to:  State of Utah Division of Air Quality Attn: NSR – Ownership/Name Change Notification 195 North 1950 West PO Box 144820 |  |
| E-mail                                                                            |                                  | Salt Lake City, Utah 84114-4820                                                                                                              |  |