



El Dorado County Air Quality Management District
330 Fair Lane, Placerville, CA 95667
Phone: (530) 621-7501 Fax: (530) 295-2774

**Emergency Generator Instructions For Completing
2025 Calendar Year THROUGHPUT/PRODUCTION**

Reports are due by April 1, 2026

A separate Throughput Report is required for each permit to operate. Ensure that the reported usage corresponds to the correct permit number. Make sure to specify the permit number on each report. The form must be completed each calendar year whether the permitted equipment was used or not. This information is necessary to track emission within the District.

Report your ACTUAL usage, not your maximum throughput limit(s) listed on the permit. Email the completed report **on page 2** to aqmd@edcgov.us to receive a confirmation of receipt. We also accept faxes at (530) 295-2774, mail or hand delivery.

1. **REPORT YEAR** - Print the report year, for example, 2025 is the report year for the 2026 submittal.
2. **COMPANY NAME** - Print the complete name of the company. The company name placed on the Throughput Report must match the company name listed on the permit.
3. **SITE ADDRESS** - Print the street address where the equipment is located.
4. **PERMIT TO OPERATE #** - You can find this number located on the first page of the permit. The number will look like Permit to Operate # XX-XXXX.
5. **STACK HEIGHT** - The height from ground level to the top of the exhaust stack.
6. **RESPONSIBLE PERSON** - Print the name of the person responsible for the permitted operation.
7. **TITLE** - Print the title of the responsible person listed.
8. **E-MAIL**: Print the e-mail address for the responsible person listed.
9. **PHONE NUMBER** - Print the area code and phone number of the responsible person listed.
10. **ACTUAL PERMIT PROCESS USAGE** - Print the hours of operation for the engine in the appropriate row (e.g. testing/maintenance).

Please contact Cory Gutierrez, Air Quality Engineer, at (530) 621-7571 or email: cory.gutierrez@edcgov.us for general questions.

1. Report Year

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CALENDAR YEAR THROUGHPUT/PRODUCTION REPORT EMERGENCY GENERATOR

2. COMPANY NAME LISTED ON PERMIT:	3. SITE ADDRESS:	4. PERMIT TO OPERATE# : (one form per permit):
5. STACK HEIGHT (feet):	6. RESPONSIBLE PERSON'S NAME: (print)	7. TITLE:
8. E-MAIL ADDRESS:	9. PHONE NUMBER:	

10. Actual Permitted Process Usage:

Type	1st Qtr (Jan-Mar)	Units	2nd Qtr (Apr-Jun)	Units	3rd Qtr (Jul-Sep)	Units	4th Qtr (Oct-Dec)	Units	Total Annual Product*	Units
Testing/maintenance use		Hours		Hours		Hours		Hours		Hours
Emergency use		Hours		Hours		Hours		Hours		Hours
Total use		Hours		Hours		Hours		Hours		Hours

**Review your calculations before submitting. Total annual throughput covers the previous calendar year commencing on January 1 and ending on December 31.*

It is a violation of Health and Safety Code 42303.5 to make a false statement: "No person shall knowingly make any false statement in any application for a permit, or in any information, analyses, plans, or specifications submitted in conjunction with the application or at the request of the air pollution control officer."

Under penalty of perjury, I certify that based on information and belief formed after reasonable inquiry, that the information provided is true and accurate.

Signature:

Date:

Email: aqmd@edcgov.us (Preferred) • Fax: (530) 295-2774 • Mail: 330 Fair Ln, Placerville, CA 95667