

**Butte County Air Quality Management District  
 Compression Ignition Engine Used in  
 Agricultural Operations**

2525 Dominic Drive, Suite J  
 Chico, CA 95928  
 (530) 891-2882  
 (530) 891-2878 Fax



**FORM 2A - Additional Locations** (Auto-fill format: Use "Tab" or up/down arrows to enter information.)

<b>13. Supply at least ONE of the following Location Descriptions (attach Form 2A with additional locations):</b> <input type="checkbox"/> Latitude/Longitude ____ ° ____ ' ____ " ____ ° ____ ' ____ " OR Decimal ____ by ____	
<input type="checkbox"/> Universal Trans Meridian (UTM): Zone 10 ____ E ____ N (if not NAD83, Datum: ____ )	
<input type="checkbox"/> PLSS data: Town: ____ Range: ____ Section: ____	<input type="checkbox"/> Parcel/Plot Number: ____
<input type="checkbox"/> Address, town, names and distance/direction to nearest crossroads/ Other:	
14. Distance to Nearest Receptor Location: ____ feet	
<b>15. Is Engine Located within 1/4 mile of a permanent residence, school, or business?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If "Yes", Please continue: Receptor Type:</b> <input type="checkbox"/> Residence <input type="checkbox"/> School <input type="checkbox"/> Business	
Distance to Receptor: ____ feet	Direction to Receptor: ____ Location of Receptor: ____
Please provide at least ONE:	
<input type="checkbox"/> Latitude/Longitude ____ ° ____ ' ____ " ____ ° ____ ' ____ " OR Decimal ____ by ____	
<input type="checkbox"/> Universal Trans Meridian (UTM): Zone 10 ____ E ____ N (if not NAD83, Datum: ____ )	
<input type="checkbox"/> PLSS data: Town: ____ Range: ____ Section: ____	<input type="checkbox"/> Parcel/Plot Number: ____
<input type="checkbox"/> Address, town, names and distance/direction to nearest crossroads/ Other:	
<b>13. Supply at least ONE of the following Location Descriptions (attach Form 2A with additional locations):</b> <input type="checkbox"/> Latitude/Longitude ____ ° ____ ' ____ " ____ ° ____ ' ____ " OR Decimal ____ by ____	
<input type="checkbox"/> Universal Trans Meridian (UTM): Zone 10 ____ E ____ N (if not NAD83, Datum: ____ )	
<input type="checkbox"/> PLSS data: Town: ____ Range: ____ Section: ____	<input type="checkbox"/> Parcel/Plot Number: ____
<input type="checkbox"/> Address, town, names and distance/direction to nearest crossroads/ Other:	
14. Distance to Nearest Receptor Location: ____ feet	
<b>15. Is Engine Located within 1/4 mile of a permanent residence, school, or business?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If "Yes", Please continue: Receptor Type:</b> <input type="checkbox"/> Residence <input type="checkbox"/> School <input type="checkbox"/> Business	
Distance to Receptor: ____ feet	Direction to Receptor: ____ Location of Receptor: ____
Please provide at least ONE:	
<input type="checkbox"/> Latitude/Longitude ____ ° ____ ' ____ " ____ ° ____ ' ____ " OR Decimal ____ by ____	
<input type="checkbox"/> Universal Trans Meridian (UTM): Zone 10 ____ E ____ N (if not NAD83, Datum: ____ )	
<input type="checkbox"/> PLSS data: Town: ____ Range: ____ Section: ____	<input type="checkbox"/> Parcel/Plot Number: ____
<input type="checkbox"/> Address, town, names and distance/direction to nearest crossroads/ Other:	
<b>16. Printed Name of Owner/Operator:</b> _____ <b>Title:</b> _____	
<b>17. Signature of Owner/Operator:</b> _____ <b>Date:</b> _____	