EPA Forn	Page 1 of 2										
U.S. Environmental Protection Agency Office of Transportation and Air Quality						Form Approval OMB No. 2060-0150 Approval Expires 01/31/2020					
ROMINI	Leave Blank										
ENTAL PE											
* 1. Com	* 1a. Company ID:										
* 2. Report Year: (Year format:YYYY)				eport Type: (Check Only One)							
2. Report Teal. (Teal formative)				☐ Original ☐ Resubmission							
4. For any additive below, do you have information, not previously reported, on the levels of impurities greater than 0.1 percent by weight?											
☐ No	No Yes If "Yes," attach separate sheet(s) giving, to the extent known, the highest, lowest, and average values of impurities, and the methods of analysis used.										
5. For any additive below, do you have information, not previously reported, concerning the mechanisms of action of the additive; reactions between the additive and gasoline and/or diesel fuel; the identification and measurement of the emission products of the additive when used in gasoline and/or diesel fuel; the effects of the additive on all emissions; the toxicity and any other public health or welfare effects of the emissions products of the additive; and/or the effects of the emission products of the additive on the performance of emission control devices/systems?  No  Yes  If "Yes," attach separate sheet(s) providing summaries of such information and a description of the test procedures used in obtaining the information.											
6. Production Values:											
	a: Additive ID:	b. Market: - Aftermarket - Bulk - Both		c: Production Volume:	- G - Po	Productions Units: allons (gal) ounds (lb) ilogram (kg)					

* 7. Confidential Business Information - You may assert a business confidentiality claim for certain items. If no claim is made, the information may be made available to the public without further notice. All questions of confidentiality will be handled pursuant to 40 CFR 2.										
Do you wish to assert a claim of confidentiality for items 4, 5 and/or 6?										
*	Yes If "Yes," indicate "Yes" or "No" for each item below:									
	Item 4:	Yes	No							
	Item 5:	Yes	□No							
	Item 6:	Yes	□No	-						
8. Certification										
To the best of my knowledge, the above is complete and correct.  I am authorized by the manufacturer to submit this information.										
Signature:										
* Date:										
* Name of Signer:  First Name:  Lagrange Lagrang			_ast Name:		Title:					
Check if th	ie Contact P	erson is the	same as the signer ak	oove.						
* Contact Perso	* Contact Person: First Name: La					Title:				
* Telephone:					Fax:					
( ) Extension:				:						
E-mail:	E-mail:									
Comments										
Mail the completed form to:			or, via c	ourier:						
U.S. Environmental Protection Agency William Jefferson Clinton Building				U.S. Env	U.S. Environmental Protection Agency					
Mail Code - 6405 1200 Pennsylvan		1		Room 5	William Jefferson Clinton Building - North Room 5512D; (202) 343-9038 1200 Pennsylvania Ave, NW					
Washington, DC	20460				gton, DC 20004					
<b>Program Suppo</b> Telephone (202)	343-9648									
Fax (202) 343-2825 Email: caldwell.jim@epa.gov This office is operated by a contractor, CSRA LLC, a General Dy						CSRA LLC, a General Dynamics Information				
Email: solar.jose@epa.gov https://www.epa.gov/fuels-registration-reporting-and-compliance-help					logy company, for the EPA.					