



**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
FEDERAL MINOR NEW SOURCE REVIEW PROGRAM IN INDIAN COUNTRY  
40 CFR 49.151**

**Check List - Change in Company Ownership Notification  
(Form OWN)**

**Use of these forms is voluntary.** The following is a check list of information that this office will need to process the change in ownership or operators at your facility.

While this form is not required, it does offer details on the information we will need to complete your requested change and providing the information as presented here may help expedite the process.

**Please submit information to following two entities:**

Federal Minor NSR Permit Coordinator  
U.S. EPA, Region 6  
1445 Ross Ave., suite 1200, MS: 6PD-R  
Dallas, TX 75202  
[R6airpermits@epa.gov](mailto:R6airpermits@epa.gov)

For more information, visit:

<http://www2.epa.gov/caa-permitting/tribal-nsr-implementation-epas-south-central-region>

The Tribal Environmental Contact for the specific reservation:

If you need assistance in identifying the appropriate Tribal Environmental Contact and address, please contact:

[R6airpermits@epa.gov](mailto:R6airpermits@epa.gov)

**FACILITY INFORMATION**

<b>Facility Name and Description</b>			
<b>Minor Source Permit To Construct Number</b>			
<b>Physical Address</b> (home base for portable sources)			
<b>Reservation</b>	<b>County*</b>	<b>Latitude</b> (decimal format)*	<b>Longitude</b> (decimal format)*
<b>Quarter Quarter Section*</b>	<b>Section*</b>	<b>Township*</b>	<b>Range*</b>

\*Provide all proposed locations of operation for portable sources

**NEW COMPANY****PREVIOUS COMPANY**

<b>Company Name</b> (Who owns this facility?)	<b>Company Name</b> (Who was the previous owner?)
<b>New Company Contact/Title</b> (Who is the <u>primary</u> contact for the new company that owns this facility?)	
<b>Mailing Address</b>	
<b>Email Address</b>	
<b>Telephone Number</b>	
<b>Facsimile Number</b>	

**INFORMATION ON HOW TO HANDLE MULTIPLE SITES**

On a separate piece of paper continue the list of the facility source name, permit number, and location descriptions for each facility/source for which ownership has changed.

The undersigned, as an authorized representative of the company, acknowledges that the above information is correct, and requests that the name change be made in all Air Permitting records.

**AUTHORIZATION**

New Company	Previous Company
Company Owner's Signature	Previous Company Owner's Signature
Name (Please Print)	Name (Please Print)
Title	Title