



BAY AREA AIR QUALITY MANAGEMENT DISTRICT
FACILITY NAME & NAICS CODE CHANGE FORM
 Name change allowed if the owning entity of the facility does not change

All fields are required unless otherwise noted. Please type or print.

Mail to:
 BAAQMD
 Engineering Division
 939 Ellis Street,
 San Francisco, CA 94109

Tel: (415) 749-4990

- If the owning entity (ownership) has changed for the facility, use the **Transfer of Ownership Form** and read the instructions for that form.

1. Purpose for submitting this form

This form is being submitted to: (Check all that apply)

- Update facility name (Complete Parts 2, 3, 4 and 6)
- Update North American Industry Classification System Code (Complete Parts 2, 5 and 6)

2. Current Facility Identification – Enter information as it currently appears on your permit.

Current Facility Name	BAAQMD Facility ID

3. New Facility Name

New Facility Name

4. Owning Entity Confirmation

The facility name change above does not affect the current owning entity for the facility.
 Check if you agree with this statement.

5. Facility's Primary North American Industry Classification System Code

NAICS Code (6 digits)

6. Certification/Signature of person responsible for the information on this form.

I hereby certify that I am authorized to complete this form for the facility and that all information contained herein is true and correct.

Name	Title	
Signature	Date	Phone (xxx-xxx-xxxx)