



**Connecticut Department of
Energy & Environmental Protection**
Bureau of Air Management
Engineering & Enforcement Division

DEEP USE ONLY	
Received Date:	_____
Town No.:	_____
Premises No.:	_____
Route Original to the Engineering Section	

Written Authorization Form RCSA section 22a-174-2a(a)(2)(B)

This form is to be used by only those Title V corporations identified in RCSA section 22a-174-2a(a)(2) which are required to obtain approval of a duly authorized representative by the commissioner in accordance with RCSA section 22a-174-2a(a)(2)(B). Please complete this form in accordance with the [instructions](#) (DEEP-TV-SIG-INST-002) to ensure proper handling of your submission.

For corporations seeking initial approval of a duly authorized representative, this completed form must be submitted to the commissioner and approved prior to submitting any signed documents or other information pertaining to Title V required by RCSA section 22a-174-33. Subsequent duly authorized representative approval requests shall be submitted to the commissioner prior to or together with the submission of any application, document, report or certification signed by such representative.

Part I: Site Information

Name of Site or Facility:		
Location of Site or Facility:		
Street Address:		
City/Town:	State:	Zip Code:
Title V Permit No.:	Expiration Date:	

Part II: Company Information

Company Name:		
Mailing Address:		
City/Town:	State:	Zip Code:
Business Phone:	ext.:	
Contact Person:	Title:	
Phone:	ext.	
*E-mail:		
*By providing this e-mail address you are agreeing to receive official correspondence from the department, at this electronic address, concerning the subject application. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify the department if your e-mail address changes.		

Part III: Authorized Individual or Position

1. This written authorization applies to:

Named Individual:

Named Position:

As required by RCSA section 22a-174-2a(a)(2), such named individual or position must be responsible for the overall operation of one or more manufacturing, production or operating facilities subject to RCSA section 22a-174-33.

2. Name, if applicable:

Position:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

*Email:

Effective Date of Authorization:

*By providing this e-mail address you are agreeing to receive official correspondence from the department, at this electronic address, concerning the subject application. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify the department if your e-mail address changes.

3. Is this submittal to **replace** a previously designated individual or position? Yes No

If yes, list the name(s) of the previously designated individual(s) or position(s) to be replaced:

4. Is this submittal to **add** to a previously designated individual or position?

Yes No

If yes, list the name(s) of the previously designated individual(s) or position(s):

Check if indicating more than one authorized individual or position at this time. If so, complete this Part for each such individual or position and attach additional sheet(s) with the required information as requested above.

Part IV: Certification

An officer of the corporation must sign this certification. The form will be considered incomplete unless such signature is provided.

“I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.

I understand that a false statement in the submitted information may be punishable as a criminal offense, under Section 22a-175 of the General Statutes, under Section 53a-157b of the General Statutes, and in accordance with any other applicable statute.

I certify by my signature that the document being submitted herewith complies with Section 22a-174-2a(a) of the Regulations of Connecticut State Agencies.

I certify that this form is as prescribed by the commissioner without alteration of the text.”

Signature of Corporate Officer _____ Date _____

Name of Corporate Officer (print or type) _____ Title _____

Please submit this form to: ENGINEERING SECTION
BUREAU OF AIR MANAGEMENT
DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION
79 ELM STREET, 5th FLOOR
HARTFORD, CT 06106-5127

There is no fee required.

DEEP USE ONLY

Commissioner Approval

The above written authorization submittal naming an individual or position as a duly authorized representative for the purposes of compliance with RCSA section 22a-174-2a(a)(2)(B) has been:

Approved Rejected

Commissioner or Commissioner's Designee _____ Date _____