

EASY Air User Deactivation Form

The Deactivation Form should be used by Facility Users to discontinue the completion or submission of data using the EASY AIR System.

DNR	Records	Center	ONLY
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R. Series/Initials:	CON 10-1 /
Facility Number:	

Facility Number Format: 00-00-000

WK ACT/ Doc Code: MS / CL

*Required Fields

*1. Contact Information

EASY Air User Name:			
First Name	Last Name		
Facility Name	Title		
Mailing Address			
City	State	Zip Code	
Phone Number	E-Mail Address		

Please allow at least 30 days for processing. Please remove the facility user identified above from the EASY AIR System.

*2. Associated Facilities (Fill at least one row)

Facility Name	Facility Number
Facility Name	Facility Number

*3. User Certification and Signature

I understand that I am obligated to continue to use EASY AIR System to conclude any business (reporting, correcting or submitting data) that occurred during the time this facility user was an active EASY AIR System user

I understand that this request in no way changes the submission obligations of any facility. This request is only an indication that the facility user will no longer use EASY AIR System.

User's Legal Full Name (type or print)		Official Title		
User's Signature	Date			
IMPORTANT – Sign and mail or hand-deliver this completed form to: Air Quality Bureau	Iowa DNR Use Only			
		Name	Date	
Attn: Iowa EASY Air Administrator 502 E 9 th St	Received by:			
Des Moines, IA 50319	Approved by:			
	EASY AIR Updated by:			





Form Instructions

This form is used to request the deactivation of a User Account and any Associated Facilities

How to complete this form:

Navigation: Use the Down Arrow key or Tab to move through the fields.

- **1.** Complete the contact information section.
- 2. Identify all facilities associated with the user that will be removed from account access.
- 3. Read the Certification then Sign and Date the form to complete the deactivation process.

I understand that I am obligated to continue to use EASY AIR System to conclude any business (reporting, correcting or submitting data) that occurred during the time this facility user was an active EASY AIR System user.

I understand that this request in no way changes the submission obligations of any facility. This request is only an indication that the facility user will no longer use EASY AIR System.

Your User Deactivation request confirmation will be emailed to you

How to handle this form:

- 1. Complete the contact information section.
- Mail the completed form to: Air Quality Bureau Attn: Iowa EASY Air Administrator 502 E 9th St Des Moines, IA 50319

For questions regarding the status of your request send an e-mail to: EASY Air Number & Facility Change (easyair_fn@dnr.iowa.gov).