



IOWA DNR Minor Source Emission Inventory

FORM INV-1: FACILITY IDENTIFICATION

1. Emissions Inventory Type		<input type="checkbox"/> Initial Information	<input type="checkbox"/> Supplemental Information
2. Facility Identifier			
3. Company/Facility Name			
4. Number of State-Wide Company Employees		<input type="checkbox"/> Less Than or Equal to 100	<input type="checkbox"/> Greater Than 100
5. Emission Year			
6. Facility Street Address			
7. Facility City			IA
8. Zip Code			
9. Emissions Contact Person			
10. Emissions Contact Phone Number / E-Mail Address			
11. Mailing Street/PO Box			
12. Mailing City			
13. State			
14. Zip Code			
15. Parent Company / Owner Name			
16. Parent Company / Owner Mailing Address			
17. City			
18. State			
19. Zip Code			
20. Parent Company Contact/Agent			
21. Parent Company Contact Phone Number			
CERTIFICATION STATEMENT			
<p>"I certify under penalty of law that, based on the information and belief formed after reasonable inquiry, the statements and information contained in this application are true, accurate, and complete. I understand that making false statements, representations, or certifications of this submission may result in civil or criminal penalties."</p>			
22. Name of Responsible Official		23. Title of Responsible Official	
24. Signature of Responsible Official		25. Date of Signature	
26. Primary Standard Industrial Classification (SIC)		Primary North American Industrial Classification System (NAICS)	
27. Activity Description			
28. SECONDARY ACTIVITIES			
SIC		NAICS	
Activity Description		Activity Description	
SIC		NAICS	
Activity Description		Activity Description	
29. PLANT LOCATION			
Latitude (Decimal Degrees)			
Longitude (Decimal Degrees)			