Tuolumne County
Air Pollution Control District
Annual Reporting Form
Automotive Refinishing / Surface Coating

(Please complete all of the following information)

Company Name: _____

Company Location: _____

Mailing Address: _____

Company Contact: _____

Company E-mail: _____

Company Phone/Fax: _____

1) Calendar year of the information reported: 2023
2) Operating Schedule: Hrs/Day:_____ Days/Week:_____ Weeks/Yr:_____
3) Total hours of operation during the calendar year:_____
4) Types of objects coated: _____

   _____
5) Calendar Year (CY) 2023 Production / Usage:

	Manufacturer Name:	Gals/Year:	VOC Content:
Primer – Surfacer:	_____	_____	_____
Primer – Sealer:	_____	_____	_____
Base Coat:	_____	_____	_____
Clear Coat:	_____	_____	_____
Specialty Coating:	_____	_____	_____
Thinner / Reducer:	_____	_____	_____
Cleaning Solvent:	_____	_____	_____
Other Coating:	_____	_____	_____
Other Coating:	_____	_____	_____
Other Coating:	_____	_____	_____

Use the back of this form for additional comments or clarification.