

Instructions for EPA Form 3520-20B (Rev. 06-94); Reformulated Gasoline & Anti-dumping Facility Registration

Complete the form once for each facility (refinery, importer, oxygenate blending facility and import facility) that applies to a facility under the Reformulated Gasoline and Anti-dumping Program. Please type (best results are obtained from standard typefaces such as 10 or 12-pitch Courier) or print information using a dark-colored ink. **Use all capital letters and enter one character in each box, without touching the lines that separate boxes.** If using a photocopied version of the form, please ensure the copy is clean and has been copied to 100% of the original page size.

- 1.1 **Registration Type:** Shade or "X" only one. Indicate whether this is the first time this facility has been registered (original) with this facility for the Reformulated Gasoline and Anti-Dumping Program or if this is an update of a previously submitted registration.
- 2.1 **Company ID #:** EPA-assigned four-digit Company ID. If this registration accompanies an original company registration, leave blank.
- 2.2 **Company Name:** Company's legal name (up to 30 characters).
- 3.1 **Facility ID#:** EPA-assigned five-digit ID. Leave blank for original registrations.
- 3.2 **Facility Name:** Facility's legal name, or if no legal name, the common name (up to 30 characters).
- 3.3 **Facility Address:** The address of the facility. This must be a physical street address for the facility and not a P.O. box.
- 3.4 **City, State, Zip:** The city, state and Zip code of the facility address. If the 9-digit Zip code is not known enter the 5-digit Zip code, leaving the last four positions to the right blank
- 3.7 **Contact Name:** The person EPA should contact if there are questions concerning this registration as well as records, if records relevant to the Reformulated Gasoline and Anti-Dumping Program are stored on-site (see question 16).
- 3.8 **Title:** Title of the contact person identified on line 10.
- 3.9 **Telephone # Ext.:** Telephone number, including area code(between parentheses) and extension, of the facility contact person.
- 3.11 **Fax#:** Facsimile number, including area code, for the facility contact person.
- 3.12 **Facility Type:** Shade or "X" only one. This indicates whether the facility is or will be acting as a refinery, oxygenate blending facility, or import facility. **A separate registration must be filed for each facility type that applies to a facility.**
- 4.1 **Location of Records:** Shade or "X" only one. Indicate whether the facility's records relevant to the Reformulated Gasoline and Anti-Dumping Program will be stored on-site, off-site or both.

Questions 4.2-4.11 must be answered if the facility's records are stored off-site.

- 4.2 **Off-Site Facility Name:** Off-Site Facility's legal name or if no legal name, the common name (up to 30 characters).
- 4.3 **Off-Site Facility Address:** The address of the off-site facility used for storing records. This must be a physical street address for the off-site facility and not a P.O. box.
- 4.4-4.6 **City, State, Zip:** The city, state and Zip code of the off-site facility address. If the 9-digit Zip code is not known enter the 5-digit Zip code, leaving the last four positions to the right blank.

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- 4.7 **Contact Name:** The person EPA should contact if there are questions concerning the records.
- 4.8 **Title:** Title of the records contact person identified on line 22.
- 4.9 **Telephone #, Ext :** Telephone number, including area code(between parentheses) and extension, of the records contact person.
- 4.11 **Fax # :** Facsimile number, including area code, for the records contact person.

Questions 5.1 - 6.3 must be answered if the facility's records are stored off-site.

- 5.1 **Independent Testing Options:** Shade or "X" one option and/or "Exemption". (Indicate which testing option - 100% or 10% - the laboratory will use or, if an in-line blending waiver has been granted, shade "Exemption". If both in-line blending and batch production are expected at the facility, shade "Exemption and the appropriate testing option.)
- 5.2 **Independent Lab ID #:** EPA-assigned four-digit ID. Contact lab for the number. For numbers less than 1000, pad to the left with zeros.
- 5.3 **Lab Name:** Independent Lab's legal name(up to 30 characters).
- 5.4 **Lab Address:** The address of the Independent lab. This must be the physical street address where the independent lab work is done and not a business address or P.O. box.
- 5.5-5.7 **City, State, Zip :** The city, state and Zip code of the independent lab address. If the 9-digit Zip code is not known enter the 5-digit Zip code, leaving the last four positions to the right blank.
- 6.1 **Name of Responsible Corporate Officer:** The business owner, an officer of the corporation, or a person delegated authority in writing by the business owner or an officer of the corporation to sign this registration. This person should be knowledgeable about the requirements of the Reformulated Gasoline and Anti-dumping programs and hold a position of authority.
- 6.2 **Title:** Title of the responsible corporate officer or business owner.
- 6.3 **Date:** Date upon which the registration form was signed. Use the format MM/DD/YY.
- 6.4 **Signature:** The form must be signed by the responsible corporate officer or business owner to constitute a valid registration.

Mail your completed registration form to: U.S. Environmental Protection Agency
Attn: REFGAS (6406J)
1200 Pennsylvania Ave, NW
Washington, DC 20460

Paperwork Reduction Act Statement

This collection of information has an estimated recordkeeping and reporting burden averaging 1 hour per response. This estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing the collection of information. The collection of this information has been approved by the Office of Management and Budget under information collection request number OMB 2060-0277. OMB review of this form is pending. **Send comments regarding the burden estimates or any other aspects of this collection of information, including suggestions for reducing this burden to Chief, Information Policy Branch; U.S. EPA(2136); 401 M St., S.W.; Washington, DC 20460; and to the Office of Management and Budget; Washington, DC 20503; marked "Attn.: Desk Officer for EPA."**