# **American Innovation and Manufacturing Act - HFC Inter-Compan**

Worksheet Instructions:	
Version:	
r0.3	
Updated:	
9/23/2021	
External Links:	
Reporting Form Navigation:	
Section 1 - Transferor Identification	
Section 2 - Transferee Information	
Section 3 - Transfer Request Information	

### **Section 1 - Transferor Identification**

Instructions: Complete the following company information.

Company Name:	
AIMRS Company ID:	
Reporting Year:	

#### **Section 2 - Transferee Identification**

Instructions: Complete the following company information.

Transferee Company Name:	
AIMRS Transferee Company ID:	

## Section 3 - Transfer Request Information

Enter data for each transfer request. For all regulated substances that are transferred, all field transferee certifying that the transferee will use the application-specific allowances only for th

1	2	3
Transaction Number	Allowance Type §84.19(a)(2)(iii)	Type of Application (If Applicable) §84.19(a)(2)(iii)
1		
2		
3		

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 350 sponsor, and a person is not required to respond to, a collection of information unless it displays a cull Send comments on the Agency's need this formation, the accuracy of the provided burden estimates Support Division, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Was

EPA Form # 5900-537

OMB Control Number: 2060-XXXX Expiration Date: X/XX/202X

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Is are required unless otherwise indicated. For transfers of application-specific allowances, additionally provide same application for which the application-specific allowance was allocated (§84.19(a)(2)(viii)).

5	6	7
Total Cost of Allowances Transferred (USD) §84.19(a)(2)(v)	Quantity of Allowances Being Transferred (MTEVe) §84.19(a)(2)(iv)	Amount of Offset (MTEVe) §84.19(a)(2)(vii)
	Transferred (USD)	Transferred Being Transferred (USD) (MTEVe)

11 et seq. (OMB Control No. 2060-XXXX). Responses to this collection of information are mandatory (40 CFR 84.19). A rrently valid OMB control number. The public reporting and recordkeeping burden for this collection of information is est and any suggested methods for minimizing respondent burden including through the use of automated collection techn hington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this a

### le a signed document from the

8

Number of Allowances Subtracted from Transferor's Allowance Balance (MTEVe)

in agency may not conduct or timated to be 6 hours per response. iques to the Director, Regulatory address.

[Allowance]
Production
Consumption
Application-Specific

[Application-Specific Allowance]	
Propellants in Metered-dose Inhalers	
Defense Spray	
Structural Composite Preformed Polyurethane Foam (Marine and Trailer Use)	
Etching of Semiconductor Material or Waters and the Cleaning of Chemical Vapor Desposition (CVD) Chambers within the Semiconductor Manufafturing Sector	
On-board Aerospace Fire Suppression	

[Year]	
2022	
2023	
2024	
2025	
2026	
2027	
2028	
2029	
2030	