



Instructions for the Allowance Transfer Form

The regulations for the Acid Rain Program (ARP), the Cross-State Air Pollution Rule (CSAPR) trading programs, and the Texas SO₂ Trading Program (TXSO₂) allow for the transfer of emissions allowances between Allowance Tracking System (ATS) accounts. Upon receipt of a complete Allowance Transfer Form, EPA will move the allowances from the transferor's account to the transferee's account. For the Acid Rain Program, you may transfer a portion of your allowance allocation or the entire allocation in perpetuity from a facility account to another account in the ATS, unless the allocation is made to an Acid Rain opt-in unit.

You are encouraged to use the CAMD Business System (CBS) to submit allowance transfers online. To register for CBS, go to <https://camd.epa.gov/CBS/login/auth>.

If you need more space, photocopy page three. When you have completed the form, indicate the page order and total number of pages (*e.g.*, 1 of 4, 2 of 4, etc.) in the spaces provided in the upper right-hand corner of each page.

Remember, for the Acid Rain Program (under 40 CFR 72.21(d)), you must notify the persons you represent in this transaction, (*i.e.*, the owners or operators of the affected source and units).

Either the authorized account representative (AAR) or the alternate AAR may sign this form. For facility accounts, the designated representative (DR) is the AAR and the alternate DR is the alternate AAR.

STEP 1 Make sure you select the correct allowance program. Only check one box. If you want to transfer allowances under more than one program, submit a separate form for each program.

STEPS 2&3 Enter the requested information for the transferor and transferee accounts.

STEP 4 For the Acid Rain Program, the AAR or alternate AAR from the transferee account must sign the form or have a signature on file authorizing acceptance of allowances transferred into his or her accounts.

STEP 5 If you are transferring SO₂ allowances (under the Acid Rain Program only), you may elect to transfer "in perpetuity" (*i.e.*, specific blocks of allowances for all years following a specified year) unless the allowances are allocated to an Acid Rain opt-in unit. To transfer an SO₂ allowance in perpetuity, check the Perpetuity box. "In perpetuity" allows you, for years beginning in 2010, to select only the first year you would like to transfer. For all years thereafter, the same transfers are recorded.

STEP 6 Enter the vintage year and serial numbers of the allowances to be transferred. Enter the number of allowances to be transferred in the "Total" column. Verify the accuracy of your entries by computing one of the following simple equations reflecting the equivalent relationships:

$$\text{Start Number} = \text{End Number} - \text{Total} + 1$$

or

$$\text{End Number} = \text{Start Number} + \text{Total} - 1$$

Allowances with different vintage years must be entered on separate lines.

Submission Deadline

This form must be postmarked no later than the Allowance Transfer Deadline:

- **Acid Rain Program**: by midnight 60 days after the end of the year following a given control period (March 1 most years; February 29 in leap years)
- **CSAPR and TXSO2 Programs**: by midnight June 1 the year following a given control period

Paperwork Burden Estimate

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control Nos. 2060-0258 and 2060-0667). Responses to this collection of information are voluntary (40 CFR 73.50, 97.422, 97.522, 97.622, 97.722, 97.822, 97.922 and 97.1012). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information is estimated to be 2 hours per response annually. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.



Allowance Transfer Form

(Page 1 of 3 in this submission)

Choose one only:

STEP 1
Select the type of allowances to be transferred.

- Acid Rain
- CSAPR NO_x Annual
- CSAPR NO_x Ozone Season Group 1
- CSAPR NO_x Ozone Season Group 2
- CSAPR NO_x Ozone Season Group 3
- CSAPR SO₂ Group 1
- CSAPR SO₂ Group 2
- Texas SO₂

STEP 2
Enter account information about the transferor (in whose account the allowances currently reside).

Transferor:

| |
|--|
| Account # |
| Authorized Account Representative (AAR) Name |
| AAR Phone Number |
| AAR Fax Number |
| AAR Email Address |

STEP 3
Enter account information about the transferee (into whose account the allowances are being transferred).

Transferee:

| |
|--|
| Account # |
| Authorized Account Representative (AAR) Name |
| AAR Phone Number |
| AAR Fax Number |
| AAR Email Address |

| |
|------------------------------------|
| Transferor Account # (from page 1) |
|------------------------------------|

STEP 4
Complete Steps 5 and 6. Read the certification, print name, and sign and date.

For Designated or Alternate Designated Representatives

I am authorized to make this submission on behalf of the owners and operators of the source or units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

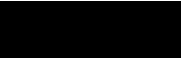
For Authorized or Alternate Authorized Representatives (For General Accounts)

I am authorized to make this submission on behalf of the persons with an ownership interest with respect to the Acid Rain Program allowances, CSAPR NO_x Annual allowances, CSAPR NO_x Ozone Season Group 1 allowances, CSAPR NO_x Ozone Season Group 2 allowances, CSAPR NO_x Ozone Season Group 3 allowances, CSAPR SO₂ Group 1 allowances, CSAPR SO₂ Group 2 allowances, or Texas SO₂ Trading Program allowances (as designated in Step 1 above) held in the general account. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting material information, including the possibility of fine or imprisonment for violations.

Transferor:

| | | |
|-----------|--|------|
| Name | | |
| Signature |  | Date |

Transferee (Acid Rain allowances only): Check if signature on file (see instructions)

| | | |
|-----------|--|------|
| Name | | |
| Signature |  | Date |

STEP 5
Acid Rain Only
Mark the box if all allowances listed below are to be transferred in perpetuity. To correctly list the allowances in perpetuity, see instructions.

- The Acid Rain allowances listed at Step 6 and the allowances with corresponding serial numbers in successive future year subaccounts will be transferred in perpetuity to the Transferee's account. This does not apply for transfers of Acid Rain allowances allocated to Acid Rain opt-in units.

Transferor Account # (from page 1)

STEP 6
List the allowances to be transferred by serial number (see example).

You may specify single allowances or a series of allowances. In the total column, enter the total number of allowances to be transferred. Enter separate series or series with a different use date on a separate line.

| | Start Number | End Number | Total |
|---------------|-------------------------------|-------------------------------|-------|
| Year | Start | End | Total |
| 2 0 2 0 | 0 5 2 5 1 9 9 3 | 0 5 2 5 2 0 1 7 | 25 |
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Submission Information

If you already have a general account or facility account in the CAMD Business System, we encourage you to complete this workflow electronically (<https://camd.epa.gov/CBS/login/auth>). Click on Help for step-by-step instructions.

Otherwise, please mail to **one** of the following addresses (**please note the different zip codes**):

Regular or Certified mail:

U.S. EPA
CAMD – Market Operations Branch
Attn: Allowance Tracking
1200 Pennsylvania Avenue, NW
Mail Code 6204A
Washington, DC **20460**

Overnight mail:

U.S. EPA
CAMD - Market Operations Branch
Attn: Allowance Tracking
1200 Pennsylvania Avenue, NW
WJC South, 4th Floor, Room # 4153C
Washington, DC **20004**
(202) 564-8717