**RFS2 RNG RIN Separator – Total Volume Report (Report Form ID: RFS5200): Instructions for Completing**

**Who must report**

* Generally, a RNG RIN separator must comply with the reporting requirement found at 40 CFR § 80.150(g).

**Reporting Deadlines**

* RNG RIN Separators must submit on a quarterly basis.

|  |  |  |
| --- | --- | --- |
| Production Calendar Quarter | Time Period Covered | Quarterly Report Deadline |
| Quarter 1 | January 1 – March 31 | June 1 |
| Quarter 2 | April 1 – June 30 | September 1 |
| Quarter 3 | July 1 – September 30 | December 1 |
| Quarter 4 | October 1 – December 31 | March 31 |

Please check the RFS reporting web site for updated instructions and templates:

 <https://www.epa.gov/fuels-registration-reporting-and-compliance-help/reporting-fuel-programs>

For information on submitting this report using EPA’s Central Data Exchange (CDX) visit: <https://www.epa.gov/fuels-registration-reporting-and-compliance-help/user-guides-otaqdcfuel-central-data-exchange-cdx>

**Field Instructions:**

| Field | Field Name | Units | Field Formats, Codes & Special Instructions |
| --- | --- | --- | --- |
| 1. | Report Form ID |  | **AAAAAAA**; *Character*.**RFS5100:** Form ID for the RFS Biogas Closed Distribution System Total Report. |
| 2. | Report Type |  | **A**; *Character*. Indicate whether this is the original report or a resubmission. Submit only one Original report, submit any corrections or updates as Resubmission(s):**O**: Original**R**: Resubmission |
| 3. | CBI |  | **A**; *Character*. Specify if the data contained within the report is being claimed as Confidential Business Information (CBI) under 40 CFR Part 2, subpart B:**Y**: Confidential Business Information**N**: Non-Confidential Business Information |
| 4. | Report Date |  | **MM/DD/YYYY**; *Character*. Enter the date the original or resubmitted report is submitted. |
| 5. | Report Year |  | **YYYY**; *Character*. Indicate the compliance period (year) of the report. |
| 6. | Company/Entity ID |  | **AAAA**; *Character*. Enter the four-*digit,* EPA-assigned company/entity ID. |
| 7. | Company Name |  | **AAAAAAA…;** *Character (125 Max).* The reporting party’s name (Your company name). |
| 8 | Facility ID |  | **AAAAA**; *Character.* Enter the five-*digit* EPA-assigned ID of the biogas closed distribution system facility or reporting ID. |
| 9 | Compliance Period Code |  | **AA**; *Character*. Indicate the compliance period for which the information is being reported. Month ranges are provided below to assist in labeling quarters:**Q1**: First Quarter (January – March) **Q2**: Second Quarter (April – June) **Q3**: Third Quarter (July – September)**Q4**: Fourth Quarter (October – December) |
| 10 | Commercial pipeline system name |  | **AAAA…**; *Character.* Enter the Commercial pipeline system name. |
| 11 | Commercial pipeline system street address |  | **AAAA…**; *Character.* Enter the Commercial pipeline system street address. |
| 12 | Commercial pipeline system city |  | **AAAA…**; *Character.* Enter the Commercial pipeline system city. |
| 13 | Commercial pipeline system state |  | **AAAA…**; *Character.* Enter the Commercial pipeline system state. |
| 14 | Commercial pipeline system zip |  | **AAAA…**; *Character.* Enter the Commercial pipeline system zip code |
| 15 | Total volume (Btu) of RNG withdrawn | Btu | **999999999999;** *Number.* Enter the total volume of RNG withdrawn |
| 16 | Comments |  | **AAAAAAA...;** *Character (1000 Max). Optional.* Enter any necessary comments or recordkeeping information. |

Paperwork Reduction Act Statement

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2060-####). Responses to this collection of information are mandatory (40 CFR part 80). 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 less than one hour per response. 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.