



# State of New Jersey

Department of Environmental Protection  
Air Quality, Energy and Sustainability  
Division of Air Quality  
Bureau of Stationary Sources

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Trenton, NJ 08625-0420

PHILIP D. MURPHY  
Governor

SHEILA Y. OLIVER  
Lt. Governor

CATHERINE R. McCABE  
Commissioner

## COMMON CONTROL QUESTIONNAIRE

For assistance call (609) 633-8248

FACILITY NAME

PROGRAM INTEREST (PI)

**Is this facility co-located with another facility on a single site or on contiguous or adjacent sites?**

**No:** Skip Questions 1 through 4 and complete the Certification.

**Yes:** Provide the name of the other facility below, answer Questions 1 through 4, and complete the Certification.

OTHER FACILITY NAME

PROGRAM INTEREST (PI)

Answer all questions.		Yes	No
1	Does this facility share common workforces, plant managers, any corporate executive officers <u>OR</u> any board members with the other facility?	<input type="checkbox"/>	<input type="checkbox"/>
2	Does this facility share production equipment, pollution control equipment or an emission point with the other facility?	<input type="checkbox"/>	<input type="checkbox"/>
3	Do the facilities in question have any agreements or contracts between the parties to purchase and/or supply raw materials or intermediate/final products which creates a dependency where one or more of the facilities are unable to efficiently function without the other(s)?	<input type="checkbox"/>	<input type="checkbox"/>
4	Is there any contract or other arrangement with a third party or parties that effectively links this facility and the other facility to a common source of control by the same person or persons?	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered "Yes" to one or more questions in the above table, the Department will require the two facilities to include all their operations under a single Air Pollution Control Permit. This is consistent with the provisions at N.J.A.C. 7:27-22.1, N.J.A.C. 7:27-22.3(e) and N.J.A.C. 7:27-8.4(h)(3), unless your facility can demonstrate to the Department's satisfaction that common control is not applicable. In matters concerning common control, the Department may conduct a site visit of the facilities in question.

### CERTIFICATION

"I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this declaration and all attached documents and, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

### FACILITY RESPONSIBLE OFFICIAL

RESPONSIBLE OFFICIAL'S SIGNATURE (N.J.A.C.7:27-1.4)	RESPONSIBLE OFFICIAL'S NAME (PRINT)	RESPONSIBLE OFFICIAL'S TITLE	DATE
TELEPHONE	EMAIL (OPTIONAL)	COMPANY NAME	PI