20__/20__ INTER COUNTY BURN AGREEMENT ACCOUNTING

GROWER NAME _____

COUNTY *COLUSA*

PERMIT NAME _____ PERMIT NO. _____

TOTAL RICE ACRES PLANTED _____

PERMIT NAME _____ PERMIT NO. _____

TOTAL RICE ACRES PLANTED _____

COUNTY _____

PERMIT NAME _____ PERMIT NO. _____

TOTAL RICE ACRES PLANTED _____

PERMIT NAME _____ PERMIT NO. _____

TOTAL RICE ACRES PLANTED _____

COUNTY _____

PERMIT NAME _____ PERMIT NO. _____

TOTAL RICE ACRES PLANTED _____

PERMIT NAME _____ PERMIT NO. _____

TOTAL RICE ACRES PLANTED _____

GRAND TOTAL PLANTED RICE ACRES _____

_____ TOTAL DISEASED RICE ACRES ALLOWED IN SACRAMENTO VALLEY AIR BASIN
(NOT TO EXCEED 25% OF TOTAL PLANTED RICE ACRES)

_____ ACRES OF DISEASED RICE TO BURN IN *COLUSA* COUNTY.

_____ ACRES OF DISEASED RICE TO BURN IN _____ COUNTY.

_____ ACRES OF DISEASED RICE TO BURN IN _____ COUNTY.

_____ GRAND TOTAL ACRES TO BE BURNED IN SACRAMENTO VALLEY AIR BASIN

The above statements are true to the best of my knowledge. I affirm that I have not violated any provisions of the rice straw burning reduction act (Ch & Cs section 41865) within the previous three years.

Name of Applicant	Signature of Applicant	Date

I certify that the above is true to the best of my knowledge.

Signature of Air Pollution Control Officer (APCO) or representative from each county involved.

APCO or Representative	County	Date
	COLUSA	
APCO or Representative	County	Date
APCO or Representative	County	Date
APCO or Representative	County	Date