|  | MTED STATE  | U.S. Enviro                               | nmental Protection Agency |   | Form Approval                                    |  |
|--|---|---|---------------------------|---|--|--|
| Office of Transportation and Air Quality |   |   |                           |   | OMB No. 2060-0150<br>Approval Expires 01/31/2004 |  |
|  |   |   |                           |   | Leave Blank                                      |  |
| Fuel Additive Manufacturer Annual Report |   |   |                           |   |  |  |
| 1.                                       | Company Name:   |   |                           |   | 1a. Company ID:                                  |  |
| 2.                                       | Report Year:  | 3. Report Type: (Check Or Origi           |                           | mission                                 |  |  |
| 4.                                       | For any additive below, do you have information, not previously reported, on the levels of impurities greater than 0.1 percent by weight?   |   |                           |   |  |  |
|  | No Yes If "Yes," attach separate sheet(s) giving, to the extent known, the highest, lowest, and average values of impurities, and the methods of analysis used.   |   |                           |   |  |  |
| 5.                                       | For any additive below, do you have information, not previously reported, concerning the mechanisms of action of the additive; reactions between the additive and gasoline and/or diesel fuel; the identification and measurement of the emission products of the additive when used in gasoline and/or diesel fuel; the effects of the additive on all emissions; the toxicity and any other public health or welfare effects of the emissions products of the additive; and/or the effects of the emission products of the additive on the performance of emission control devices/systems? |   |                           |   |  |  |
|  | No ☐ Yes If "Yes," attach separate sheet(s) providing summaries of such information and a description of the test procedures used in obtaining the information.   |   |                           |   |  |  |
| 6.                                       | Production Values:  |   |                           |   |  |  |
|  | a. Additive ID:   | b. Market:<br>A – Aftermarket<br>B – Bulk | c. Production Volume:     | d. Productio<br>gal – Gall<br>lb – Poun | ons<br>ds  |  |
|  |   | C – Don't Know                            |                           | kg – Kilog                              | grams  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |
|  |   |   |                           |   |  |  |

| <ol> <li>Confidential Business Information - You may assert a busines<br/>information may be made available to the public without further<br/>to 40 CFR 2.</li> </ol>  | es confidentiality claim for certain items. If no claim is made, the er notice. All questions of confidentiality will be handled pursuant                 |  |  |  |                         |        |
|--|---|--|--|--|-------------------------|--------|
| Do you wish to assert a claim of confidentiality for items 4, 5 and/or 6?  |   |  |  |  |                         |        |
| ☐ No ☐ Yes If "Yes," indicate "Yes" or "No" f  | ☐ No ☐ Yes If "Yes," indicate "Yes" or "No" for each item below:  |  |  |  |                         |        |
| Item 4: Yes No   |   |  |  |  |                         |        |
| Item 5: Yes No   |   |  |  |  |                         |        |
| Item 6: Yes No   |   |  |  |  |                         |        |
| 8. Certification  To the best of my knowledge, the above is complete and correct.  |   |  |  |  |                         |        |
| I am authorized by the manufacturer to submit this information.  |   |  |  |  |                         |        |
| Signature:  Date:  |   |  |  |  |                         |        |
|  |   |  |  |  | Name of Signer (print): | Title: |
|  |   |  |  |  |                         |        |
| Telephone:   | Fax:  |  |  |  |                         |        |
| E-mail:  |   |  |  |  |                         |        |
| Are any Supplemental Additive Manufacturer Annual Reports (EPA Form 3520-13B) attached?  |   |  |  |  |                         |        |
| ☐ No ☐ Yes If "Yes," how many?   |   |  |  |  |                         |        |
| Comments:  |   |  |  |  |                         |        |
|  |   |  |  |  |                         |        |
|  |   |  |  |  |                         |        |
| Mail the completed form to:  | or, via courier:  |  |  |  |                         |        |
| U.S. Environmental Protection Agency<br>Attn: Fuel Additive Registration/Suite L-103<br>Mail Code - 6406J<br>1200 Pennsylvania Avenue, NW<br>Washington, DC 20460-0001 | U.S. Environmental Protection Agency<br>Attn: Fuel Additive Registration/Suite L-103<br>Mail Code - 6406J<br>501 Third Street, NW<br>Washington, DC 20001 |  |  |  |                         |        |
| Telephone (202) 564-9754 Fax (202) 565-2153 email: caldwell.jim@epa.gov, fernandes.joseph@epa.gov  |   |  |  |  |                         |        |
| This office is operated by a contractor for the EPA.   |   |  |  |  |                         |        |