General Account Information



authorizing your representation of the account.*

This form is required to establish a general account in the NOx Allowance Tracking System (NATS) and should be submitted to EPA by any person, company, or organization wishing to open such an account for the purpose of holding and transferring allowances under the NOx BudgetTrading Program. To open a new general account, complete all steps in this form, leaving the NATS account number and the Authorized Account Representative (AAR) ID blank for EPA to assign (unless you are an AAR for another account in NATS, in which case you should write in your AAR ID number). Both the AAR and the alternate (if applicable) must sign and date the certification statement in Step 6. To revise information associated with an existing general account, enter your NATS account number and AAR ID number and complete only those steps covering the information you wish to change. You must complete Step 6 to authorize the change of information. Only the AAR or alternate AAR can authorize the change, and only one signature is needed. The AAR should notify all

p N	ersons who have an ownership into IOx Budget Trading Program subn	erest in the allowances held in an a nittal.	account every time he or she makes a	J
	This submittal is: ~ New (to open a new general account)			
		Revised (to revise information	on an existing general account)	
	NATS Account Number		AAR ID Number	
	Name of Account			
STEP 1 Enter requested information for the Authorized Account Representative.	Name Firm (Optional)			
	Phone Number		Fax Number	
	E-mail Address			
STEP 2 (Optional) Enter requested information for the Alternate Authorized Account Representative.	Name			
	Firm (Optional) Phone Number		Fax Number	
	E-mail Address			
STEP 3 Enter the mailing address for the account.				
	Address			
STEP 4 Enter the names of all parties (persons or	Name			
companies) subject to the binding agreement authorizing your representation	Name			

^{*}Identify all parties with an ownership interest in the allowances held in this account. All of these parties must be subject to a binding agreement authorizing the representation of the account by the AAR, and, if applicable, the alternate AAR, identified in Steps 1 and 2. If you (the AAR) are the only person with an ownership interest in the allowances held in the account, list your name here.

NATS Account Number (from page 1)		

STEP 5 (Optional) Respond to the questions by marking all appropriate boxes (this information will be used for program evaluation purposes only).

TS Account Number (from page 1)
Is the Authorized Account Representative employed by an allowance brokerage firm?
~ No
∼ Yes (if yes, please mark all boxes that apply)
→ This account will be used to transfer allowances between clients
 This account will be used to hold allowances for investment purposes
This account will be used for other purposes (please specify)
What types of business are represented by the owner(s) of allowances in this account? (Mark all boxes that apply)
∼ Utility
∼ Non-Utility Generator of Electricity
∼ Industrial Boiler
∼ Fuel Supplier
Coal Oil
GasOther
∼ Pollution Control Equipment
~ Public Interest Group
Consumer Other
Environmental

STEP 6 Read the certification and sign and date. (Only one signature is needed if the form is being used to revise account information.) Leave the account number blank if you are opening a new account.

I certify that I was selected as the NO_X authorized account representative or the NO_X alternate authorized account representative, as applicable, by an agreement that is binding on all persons who have an ownership interest with respect to allowances held in the general account. I certify that I have all the necessary authority to carry out my duties and responsibilities under the $NO_{\rm X}$ Budget Trading Program on behalf of such persons and that each such person shall be fully bound by my representations, actions, inactions, or submissions and by any order or decision issued to me by the Administrator or a court regarding the general account.

Signature (Authorized Account Representative)	Date
Signature (Alternate Authorized Account Representative, if any)	Date

Submission Information

U.S. Mail:

~ Other

U.S. Environmental Protection Agency NOx Budget Trading Program (6204J) Attention: NOx Allowance Tracking System 1200 Pennsylvania Ave., NW Washington, D.C. 20460

Overnight Mail: U.S. Environmental Protection Agency NOx Budget Trading Program (6204J) Attention: NOx Allowance Tracking System 1310 L Street, N.W. Washington, D.C. 20005

If you have any questions, please call the CAMD Hotline at 202-343-9620.

EPA Form 7620-15

Paperwork Burden Estimate

The public reporting and recordkeeping burden for this collection of information is estimated to average 30 hours per response. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. 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.

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, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 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.