



Michigan Department of Environmental Quality - Air Quality Division
Michigan Air Emissions Reporting System (MAERS)
2008 P-101 SIGNATURE AND PASSWORD
(Required Form)

Authorized under 1994 P.A. 451, as amended. Completion of information is required. Civil and/or criminal penalties possible for providing false information.

GENERAL INSTRUCTIONS: Refer to the General Instructions Booklet for more detailed instructions.

FORM REFERENCE	
1. Form Type P-101	2. AQD Source ID (SRN)

SOURCE IDENTIFICATION			
3. Source Name			
4A. Street Number and Name (where emission unit(s) is located)			
4B. Address Continued			
5. County	6. City	7. Zip Code	
8. Submittal Method		9. Amended Submittal	
<input type="checkbox"/> E-Mail <input type="checkbox"/> CD/DVD <input type="checkbox"/> Paper <input type="checkbox"/> FTP		<input type="checkbox"/> Yes <input type="checkbox"/> No	

OPERATOR'S CERTIFICATION		
Based on information and belief formed after reasonable inquiry, the statements and information in this submittal are true, accurate, and complete.		
10A. Clearly print name of Operator	10B. Telephone Number ()	10C. Telephone Extension
11. E-Mail Address (if available)		
12. Signature		13. Date

OPERATOR'S CERTIFICATION		
Based on information and belief formed after reasonable inquiry, the statements and information in this submittal are true, accurate, and complete.		
10A. Clearly print name of Operator	10B. Telephone Number ()	10C. Telephone Extension
11. E-Mail Address (if available)		
12. Signature		13. Date

PASSWORD AUTHORIZATION FOR ELECTRONIC SUBMITTAL	
For electronic submittal, Password authorization is required to confirm that the data is securely available for receipt by the Air Quality Division. Please keep a record of your Password for future reference.	14 Password (length 4 to 8 characters)