| Form 2. | EGLE COMPLIANCE ASSURANCE MONITORING (CAM) MONITOR DOWNTIME INCIDENT SUMMARY REPORT FORM <sup>2</sup> |  |  |  |  |  |
|---------|---|--|--|--|--|--|
|         | FACILITY NAME/SRN#:   |  |  |  |  |  |
|         | PEROPTING PERIOD:   |  |  |  |  |  |

| D . 1               | ROP Emission Unit or Flexible | Monitoring<br>Device or |           |        |                    |           |
|---------------------|-------------------------------|-------------------------|-----------|--------|--------------------|-----------|
| Date <sup>1</sup> : | Group ID:                     | Method:                 | Duration: | Cause: | Corrective action: | Comments: |
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<sup>&</sup>lt;sup>1</sup> If there were no monitor downtime incidents during the reporting period, enter a value of "none" in the date column. <sup>2</sup> This form should be sent with the semiannual Renewable Operating Permit Certification form.