

**State of California
AIR RESOURCES BOARD**

**Application for Certification of Abrasives
for Permissible Dry Outdoor Blasting**

Instructions and Shipping Directions

- A. This application must be filled out completely.** Please note that the “*Plant Location*” must be a physical location sufficient to find the facility. A street address is ideal. The Multiple Name Information Sheet is only needed if your company sells one abrasive under several names.
- B. Be sure to include the desired “*Disposition*” of each abrasive sample after testing.** We need to know whether your company would like the abrasive sample returned, or whether we should dispose of it. If your company would like us to return the abrasive sample, please complete and return the Statement of Reuse. We will then contact you to arrange a collect shipment to your company’s facility. If you would like us to dispose of the abrasive sample, we will arrange the appropriate means of disposal. All costs associated with the disposition of the abrasive sample will be billed to your company.
- C. Send a completed application and a Material Safety Data Sheet (MSDS) for each abrasive sample to:**

Kathryn M. Gugeler
California Air Resources Board
Monitoring and Laboratory Division
P.O. Box 2815
Sacramento, California 95812 USA

If you have any questions, please call Ms. Gugeler at (916) 322-0221.

D. Shipping Instructions:

Ship a minimum 200 lb. sample of each grade of abrasive in five (5) gallon plastic shipping buckets with lids and handles. The contents of each shipping bucket must not weigh more than 40 lbs. Each plastic shipping bucket must be labeled on the outside with the following:

1. Company Name and address
2. Abrasive name
3. Plant location

The above information, along with a copy of the MSDS, must also be inserted with the abrasive inside of each bucket.

Important shipping directions on the following page!!!!

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- Important: SHIP ONLY IN 5 GALLON PLASTIC SHIPPING BUCKETS WITH LIDS AND HANDLES. NO OTHER TYPES OF CONTAINERS WILL BE ACCEPTED.**
- Important: MATERIAL MUST BE SHIPPED POSTAGE-PAID. COD AND/OR COLLECT SHIPMENTS CANNOT BE ACCEPTED.**
- Important: DAMAGED OR BROKEN CONTAINERS WILL NOT BE TESTED.**
- Important: DELIVERY LOCATION IS AN UNSTAFFED WAREHOUSE. FOR DELIVERY APPOINTMENTS, CALL KATHRYN GUGELER AT (916) 322-0221**

Ship containers to:

Kathryn Gugeler/CARB
2703 5th Street, Suite 1
Sacramento, California 95818 USA

- E. At the completion of the abrasive certification testing, arrangements will be made for the disposition of the abrasive sample, and your company will be billed for the cost of the testing and for the abrasive sample disposition. The test results will be sent upon payment of the invoice.**

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Read instructions on first page before filling out this application

Certification to be issued to:

_____ *(Business license name and Fed ID # of organization to receive certification)*

_____ *(Name(s) of owner or principle partners doing business as above)*

Contact Person: *(Print if different than above)*

_____ **Mailing Address:**

_____ **Abrasive description for certification:** *(Use another sheet if more space is necessary)*

_____ *Name for certification list Plant Location Abrasive Type Disposition*

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By signing below, I obligate the company, or vendor, listed above to pay all costs associated with certification testing of the abrasives listed above and on attached pages of this application.

Signature of Officer of the Company: _____

Title: _____

Type or print name: _____

_____ *(Telephone Number)* _____ *(FAX Number)* _____ *(Date)*

_____ *Web Address*

_____ *E-mail address*

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Multiple Name Information Sheet

There are no differences between the abrasives named below, except their names. The abrasives named below are all the same chemically and physically, are the same grade, and were mined/produced at the same location using the same processes. These abrasives are all represented by the sample of the abrasive indicated below.

I hereby certify under penalty of perjury that this statement is true and correct.

Signature of Responsible Person: _____

Print Name: _____

Title: _____

Company: _____

Date: _____

Abrasive Sample Submitted for:

Print or type the name for the certification list for the Abrasive Sample submitted

Other identical Products to be listed as Certified:

List each additional name for the certification list for the Abrasive Sample Submitted

