

Transport Refrigeration Unit Airborne Toxic Control Measure Third Party Agreement Confirmation Form for Contractors/Consultants

This form may be used by a transport refrigeration unit (TRU) or TRU generator set owner to delegate the TRU Airborne Toxic Control Measure (ATCM) responsibilities for equipment registration to a third party contractor or consultant. Compliance and registration requirements are defined in the California Air Resources Board (ARB) TRU ATCM (Title 13, California Code of Regulations, section 2477). Delegation of the responsibility for registration does not release the owner of the equipment from any of the responsibilities of ownership as defined in the TRU ATCM. The owner is expected to ensure that their equipment is in compliance and that compliance information has been properly conveyed to ARB by the third party. The third party (contractor/consultant) shall submit to the owner a copy of the ARB Equipment Registration (ARBER) TRU Registration Confirmation. (Note: "Owner" is defined in the TRU ATCM and excludes banks and financial institutions.)

Owners/operators of TRUs and TRU generator sets (gen sets) operating in California are required to meet the in-use performance standards defined in the TRU ATCM on a phased-in compliance schedule beginning December 31, 2008 (See TRU Advisory 08-15 for grace period information). Owners/operators of all California-based TRUs and TRU gen sets are also required to apply for ARB Identification Numbers (IDN) and submit Operator Reports by January 31, 2009 (delayed until March 16, 2009).

Owners may delegate to a third party (contractor/consultant) the responsibilities for IDN application submittal. Responsibility for compliance with in-use performance standards and operator report cannot be delegated to another party. Only one party can be delegated responsibility for IDN application per this confirmation form.

This form must be submitted to ARB at least 10 days prior to applying for an IDN using ARB's online equipment registration system (ARBER) (<http://www.arb.ca.gov/arber/arber.htm>.)

Instructions:

1. Complete sections A, B, and C (below) and obtain the responsible official's signature. A federal tax identification number (EIN) is required for each party involved in the delegation of responsibility.
2. Submit this form to ARB by mail, fax, or email (as described below) and retain a copy for your records.
3. Provide a copy of this form to the delegated third party (contractor/consultant).

By signing this form the owner agrees to the terms and conditions set forth above. If the owner chooses to sever this agreement, he/she must contact ARB directly.

A. Provide Unique Identification Numbers for Each Piece of Equipment (each row is a separate piece of equipment):

Item	Unique Company Equipment Number	Vehicle License Plate No.	Vehicle Identification Number (VIN)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

Additional equipment may be added to a separate sheet.

TOTAL NUMBER OF TRU AND TRU GEN SETS LISTED WITH THIS AGREEMENT:

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B. Owner of Equipment:

Name of Company:		EIN:
Address:		
City:	State:	Zip
Name (last, first, m.i.) of Contact Person:		
Contact Person 10-digit Phone Number:	Email Address:	

C. Delegated Third Party (Contractor/Consultant):

Name of Company:		EIN:
Address:		
City:	State:	Zip
Name of Contact Person (last, first, m.i.):		
Contact Person 10-digit Phone Number:	Email Address:	

Certification: I certify under penalty of perjury under the laws of the State of California that the information on this document is true and correct, and that the third party contractor/consultant has been provided a copy of this signed agreement confirmation form.

Printed Name of Equipment Owner¹ Signature of Equipment Owner Date

Upon receipt of this agreement, ARB will send a confirmation email to the owner and delegated third party with instructions for accessing the on-line TRU registration system. The delegated third party shall be responsible for registering the TRU, completing all compliance information, and providing the owner with a copy of the ARBER TRU Registration Confirmation. TRU owners shall be responsible for the accuracy of the information submitted to ARB. The owner of the equipment (as identified on this form) may contact ARB at 888-TRU-ATCM or 888-878-2826 to obtain or verify registration information. The owner may also access ARBER and view equipment compliance status by entering the IDN, VIN, or vehicle license number on the Public Access page of the website. The ARBER website address is <http://www.arb.ca.gov/arber/arber.htm>. Send a copy of the completed and signed form by mail, fax, or scanned PDF to the following:

**Mail: CALIFORNIA AIR RESOURCES BOARD
SSD/ARBER
TRU REGISTRATION PROGRAM
1001 I STREET – P.O. BOX 2815
SACRAMENTO, CA 95812**

**Fax: CALIFORNIA AIR RESOURCES BOARD
SSD/ARBER
TRU REGISTRATION PROGRAM
916-327-6251**

Email: tru@arb.ca.gov

¹ Responsible Officials are the individuals employed or otherwise retained by the owner that has authority to certify the legal agreement described above is in effect and the responsibilities for compliance with the TRU ATCM are delegated to the third party contractor/consultant.