



Statewide Portable Equipment Registration Program
FORM 3-C - Application for Portable Confined Abrasive Blasting Registration*
(Auto-fill format. Press "Tab" or up/down arrows to enter information. Additional form information is provided on the reverse side.)

PERP Registration forms are available at <http://www.arb.ca.gov/portable/portable.htm>.

1. Company Name:		
2. Equipment Manufacturer:		3. Model:
4. Nozzle Diameter (Indicate One): inches or gauge Operating Pressure: psi		5. Serial Number:
		6. Company Unit ID (Optional):
7. Abrasives Used		
Abrasive Type	Abrasive Name	Manufacturer
<input type="checkbox"/> Aluminum Oxide		
<input type="checkbox"/> Mineral Slag		
<input type="checkbox"/> Black Beauty		
<input type="checkbox"/> Plastic Shot		
<input type="checkbox"/> Garnet		
<input type="checkbox"/> Silicon Carbide		
<input type="checkbox"/> Glass Bead		
<input type="checkbox"/> Steel Shot		
<input type="checkbox"/> Steel Grit		
<input type="checkbox"/> Sand		
<input type="checkbox"/> Walnut Shell		
<input type="checkbox"/> Other		
8. Control Equipment Information		
Type of Filters: <input type="checkbox"/> Fabric <input type="checkbox"/> Cartridge		
Attach manufacturer's specifications or engineering data which demonstrates a minimum particulate matter control of 99% for dust collection equipment.		
Are fabric dust collectors equipped with operational pressure differential gauges? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> N/A (No Fabric Collectors)		
9. Home District Designation (Required):		
10. Do you intend to use this unit in State Territorial Waters (STW)? <input type="checkbox"/> STW only <input type="checkbox"/> Onshore <input type="checkbox"/> Both		
<i>*Please note: This form is used to register abrasive blasting equipment units. If you wish to register the engine that drives a compressor used to power the unit, please complete Form 2.</i>		

Form 3-C Instructions

1. *Company Name* - Legal name of entity, business, organization, agency or private individual that operates equipment.
2. *Manufacturer* - For example: Simons, Rexnord, or your company name if built in-house.
3. *Model* - May be a series of numbers or letters or combinations of numbers and letters. For example: 3612.
4. *Nozzle Diameter and Pressure* - Enter the nozzle diameter in inches or nozzle gauge and the operating pressure at the nozzle in pounds per square inch (psi).
5. *Serial Number* - A unique, unit specific number, usually on the equipment nameplate. The serial number is necessary to ensure that each piece of registered equipment can be uniquely identified and matched to its respective registration certificate number.
6. *Company Unit ID (Optional)* – For your reference. Enter your company's unit or equipment number.
7. *Abrasives Used* – Provide all the abrasives used, including name and manufacturer for each.
8. *Control Equipment Information* - Particulate control equipment must be listed and described. Attach manufacturer's specifications or engineering data showing at least 99% dust control.
Operational Pressure Differential Gauge - Fabric dust collectors must be equipped with an operational pressure differential gauge to measure the pressure drop across the filters. If you do not have a pressure gauge, explain how filters are monitored. If fabric collectors are not used indicate N/A. Vent filters do not require pressure gauges.
9. *Home District Designation (Required)* - Indicate the one air pollution control or air quality management district in which this unit is most commonly operated. This district will be designated as your "home" district. It is required that a home district be designated.
10. *State Territorial Waters* - Please check the appropriate box indicating whether or not you are intending to operate your equipment unit in State Territorial Waters.