



## Air Quality Registration Program Fee Reduction Application Small Business Extreme Hardship

### Small Business Extreme Hardship Fee Reduction Form

The small business extreme hardship fee reduction is available to a registration program source with a net profit of \$12,000 or less. If you meet the qualifications in this form, answer all the questions on both pages, sign and date the form, and submit it to Ecology's Cashiering Unit in Olympia. You must include the required tax documentation and half of your fee. Your application will be invalid without the required tax documentation so your original invoice applies. Ecology will notify you if you do not qualify for this reduction and full payment is due within 30 days of the notice. **You must reapply each year for this fee reduction.**

Business Name		
Air Quality Program Identification Number		
Business Address		
Business City	State	Zip code
Contact Name		
Mailing Address		
Mailing City	State	Zip code
Telephone Number		
E-mail address		

### Eligibility Requirements

To qualify, a business **must** meet all of the following criteria. Check each as they apply.

- You are a registration program source.
- You are owned and operated independently from all other business (not a subsidiary of a parent company).
- Enter your annual net profit from your most recent income tax return. To be eligible, your net profit must be \$12,000 or less. Annual net profit: \_\_\_\_\_
- Check the tier fee that applies to you. Your new fee will be half the amount of your assessed tier. For fee amounts, see [WAC 173-455-040](#).

<input type="checkbox"/>	Tier 1
<input type="checkbox"/>	Tier 2
<input type="checkbox"/>	Tier 3
<input type="checkbox"/>	Tier 4



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Attach tax documentation of the amount of net profit for the calendar year by providing a copy of one of the following:

Most Recent Tax Form	Line
Schedule C Form 1040 Profit or Loss From Business (Sole Proprietorship)	Line 31. Net profit or loss
Form 1065 U.S. Return of Partnership Income	Line 22. Ordinary business income (loss)
Form 1120 U.S. Corporation Income Tax Return	Line 30. Taxable income

Check the box that applies.

This person must sign this form

Sole proprietorship

Proprietor

Partnership

Authorized partner

Limited Liability Company (LLC)

Member

Corporation

Authorized corporate officer

I certify that all information contained in this application and in supporting documents is true and correct. I understand that omissions or misrepresentations will result in denial of the fee reduction application and revocation of previously granted fee reductions.

Print Name	Title
Signature	Date

Sign this form and mail it along with supporting **tax documentation**, your **check** and the bottom portion of **your Ecology invoice** to:

Department of Ecology – Cashiering Unit P.O. Box 47611, Olympia, WA 98504-7611	<i>For Fiscal Office Use Only:</i> 216-AIREG-02-99-000800
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PLEASE INCLUDE THE INVOICE NUMBER ON YOUR CHECK.

Check the box for the location of your business.	Contact
<input type="checkbox"/> Chelan, Douglas, Kittitas, Klickitat, or Okanogan County CRO Ecology Central Regional Office	Shawn Nolph (509) 454-7845 <a href="mailto:shawn.nolph@ecy.wa.gov">shawn.nolph@ecy.wa.gov</a>
<input type="checkbox"/> Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Stevens, Walla Walla or Whitman County ERO Ecology Eastern Regional Office	Gail Wright (509) 329-3487 <a href="mailto:gail.wright@ecy.wa.gov">gail.wright@ecy.wa.gov</a>

If you need this document in a format for the visually impaired, call the Air Quality Program at 360-407-6800. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.