



GILARIVER INDIAN COMMUNITY
DEPARTMENT OF ENVIRONMENTAL QUALITY

Return completed form to:
GRIC DEQ Air Quality Program
168 S Skill Center Rd, Sacaton, AZ 85147
Phone (520) 562-2234
www.gricdeq.org
air@gric.nsn.us

CONTACT INFORMATION UPDATE

Use this form to update the types of contacts listed below. Update forms may be emailed to air@gric.nsn.us

Important: Please note that email will be our primary means for routine communication with you, unless you do not have an email account. Please be sure that your email address is entered correctly.

Permit Number: _____ Existing Business Name: _____

Contact Type: New Owner Address (Business owner who will receive any failed mailing attempts and violation/enforcement documents)
Contact Name: _____ Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile Phone: _____ Email: _____

Contact Type: New On-Site Contact (designated on-site contact at the facility; this person will be contacted before AQ staff enters property)
Contact Name: _____ Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile Phone: _____ Email: _____

Contact Type: New Permit Contact (designated representative to handle all permit-related questions; may or may not be located on-site)
Contact Name: _____ Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile Phone: _____ Email: _____

Contact Type: New Permit Mailing (this contact will receive routine documents mailed by Air Quality such as Invoices, Permits, and Renewals)
Contact Name: _____ Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Mobile Phone: _____ Email: _____

Contact Type: New Facility Address (physical address of the facility)
Address: _____ City: _____ State: _____ Zip: _____

Certification by the current permit holder:
I certify that I am authorized to make the changes requested on this form and that the information provided in this document is true, correct and complete to the best of my knowledge.
Signature: _____ Date Signed: _____
Type or Print Name: _____ Title: _____ Company: _____