

Application for ERMS Special Participant Account Instructions

GENERAL INFORMATION

This form is to be used when applying for an account to become a special participant or when changing information associated with a special participant.

TYPE OF REQUEST

This section identifies the action to be performed with the account.

Special Participant Number – Enter the ERMS account number assigned to you if you are requesting information to be updated. If you are applying for a new account, an account number will be assigned to you.

Initial Registration – Select this if you are applying for an account for an entity that has never had an account.

Update of Information – Select this if you are changing information on an existing account. Describe the changes you wish to make in the area following the check box.

ADDRESS INFORMATION

This section is used to provide contact information for the account.

Contact Name – Enter the name of the person to contact regarding this account.

Address – Enter the address (and business name if applicable) where correspondence is to be sent.

Phone – Enter the phone number where the account representative can be reached.

Fax – Enter the fax number where the account representative can be reached.

E-mail – Enter the e-mail address of the account representative.

Pager/Other number – This phone number is meant to provide alternate means of reaching the account representative. Typically, this number will be a pager or cell phone. Enter the applicable information for the account representative.

SIGNATURE BLOCK

Provide the information in this section. When the form is completed, mail to:

Illinois EPA
Bureau of Air
Air Quality Planning Section
PO Box 19276
Springfield, Illinois 62794-9276