



Rick Snyder, Governor
Dan Wyant, Director

Michigan Department of Environmental Quality
Air Quality Division

MICHIGAN AIR EMISSIONS REPORTING SYSTEM (MAERS)

PPP-101 PRIMARY PREPARER PROXY FORM INSTRUCTIONS AND EXAMPLE

This form is an optional form used by a Primary Preparer to authorize the DEQ to associate a Secondary Preparer, Consultant, and/or an EI Viewer with a specific Source (SRN). In order for a user other than a Primary Preparer to edit or view a specific MAERS report, the user must first be associated with the SRN by the Primary Preparer. If a Source's Primary Preparer does not have the means to access the MAERS website, the Primary Preparer can use this form to authorize other users to access their specific electronic MAERS Report. Access to the source's MAERS report is limited to the inventory year in field 1; a new form is required each year the Primary Preparer requires DEQ to grant access to other users.

INVENTORY YEAR

1. **Inventory Year – (Required)** the inventory year in which the company representative is authorizing the DEQ to associate Secondary Preparers, Consultants and/or EI Viewers with the specific Source (SRN). The inventory year is the time period the facility is required to report emission inventory. Example: 2011 is the inventory year for the 2011 MAERS report, which is due March 15, 2012.

FORM REFERENCE SECTION:

2. **Form Type** - DEQ Air Quality reference identification for the form.
3. **AQD Source ID (SRN) – (Required)** AQD Source ID (SRN) is where the SRN must be entered.

Primary Preparer IDENTIFICATION:

4. **Source Name – (Required)** Enter the source name from the S-101 Source form.

5-14. Primary Preparer Information – (Required) Enter the Primary Preparer's name, mailing address, telephone number including extension and fax number, and e-mail address (enter NA if no email address).

SECONDARY PREPARER / CONSULTANT IDENTIFICATION:

15-19. Secondary Prepare / Consultant Information - Enter the Email address, name, company, and phone number of the individual that the Primary Preparer wants to be associated with SRN identified in field 3. In order for the Secondary Preparer/Consultant to be associated, they must have already self registered in MAERS (see Registration Instructions for more info on registration) and an email address must be provided in field 15.

20. Access to be Granted – Read / Write access will allow the individual to edit and make changes to most fields on the electronic forms (Secondary Preparer / Consultant). Read Only access will only allow the individual the ability to view the data (EI Viewer).

Note: Fields 15-20 can be repeated as many times as needed to identify additional users.

SIGNATURE:

21. Signature - The Primary Preparer's signature to authorize the DEQ to provide the users identified in items 15 – 20 with the appropriate access (identified in Field 20) to the electronic MAERS Report.

22. Date - Date Signed.

Please mail the signed form to:

Michigan Department of Environmental Quality
Attention: MAERS Coordinator – Air Quality Division
P.O. Box 30260
Lansing, MI 48909-7760



Michigan Department of Environmental Quality - Air Quality Division
Michigan Air Emissions Reporting System (MAERS)
PPP-101 PRIMARY PREPARER PROXY FORM

1. INVENTORY YEAR
2011

(Optional Form)

Authorized under 1994 P.A. 451, as amended.

GENERAL INSTRUCTIONS: Refer to the General Instructions Booklet for more detailed instructions. This MAERS form is used to authorize the Department of Environmental Quality to grant a secondary preparer or consultant access to the source's MAERS report for a **specific inventory year**. Enter the **specific inventory year** in field 1. The access to the source's MAERS report is limited to the inventory year in field 1; a new form is required each year. Please mail the signed form to: Michigan Department of Environmental Quality, Attention: MAERS Coordinator – Air Quality Division, P.O. Box 30260, Lansing, MI 48909-7760.

FORM REFERENCE	
2. Form Type PPP-101	3. AQD Source ID (SRN) Z9999

PRIMARY PREPARER'S IDENTIFICATION		
4. Source Name Sample Corp.		
5. First Name Joe	6. Last Name Sample	7. Title Manager
8A. Street Number and Name (where emission unit(s) is located) 555 W. Main Street		
8B. Address Continued		
9. City Lansing	10. State MI	11. Zip Code 48933
12. E-Mail Address Joes@samplecorp.com		
13A. Telephone Number (517) 555-5555	13B. Telephone Extension	14. Fax Number (517) 555-5555

SECONDARY PREPARER / CONSULTANT IDENTIFICATION		
15. Email Address <u>mike.consultant@testco.com</u>	16. First Name Mike	17. Last Name Consultant
18. Company Test Co	19. Telephone Number (517) 666-6666	20. Access to be Granted <input checked="" type="checkbox"/> Read / Write <input type="checkbox"/> Read Only
15. Email Address <u>marys@samplecorp.com</u>	16. First Name Mary	17. Last Name Sample
18. Company	19. Telephone Number ()	20. Access to be Granted <input type="checkbox"/> Read / Write <input checked="" type="checkbox"/> Read Only
15. Email Address	16. First Name	17. Last Name
18. Company	19. Telephone Number ()	20. Access to be Granted <input type="checkbox"/> Read / Write <input type="checkbox"/> Read Only
15. Email Address	16. First Name	17. Last Name
18. Company	19. Telephone Number ()	20. Access to be Granted <input type="checkbox"/> Read / Write <input type="checkbox"/> Read Only

Signature	
I authorize the Department of Environmental Quality to provide the Secondary Preparers / Consultants listed above access to the MAERS Report for the Source identified by the SRN provided above and I am authorized by the Source named in item 3 to allow the individuals identified above, access to the Source's MAERS Report.	
21. Signature	22. Date