**Operational Air Quality Mitigation Plan (AQMP)/Greenhouse Gas Reduction Plan (GHGRP) Form**

**Instructions**: Please complete this form and submit it to ProjectReview@airquality.org for review. Include modeling files and other files as indicated.

The sections expand as you type so you will not run out of space.

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| **Basic Information** | |
| Project name (Include any previous names.) | Enter information here. |
| Land use types and sizes | Enter information here. |
| Targeted buildout year | Enter information here. |
| Type of plan | Air Quality Mitigation Plan (AQMP/AQ-15/AQ-35)  Greenhouse Gas Reduction Plan (GHGRP)  Combination Air Quality Mitigation Plan and Greenhouse Gas Reduction Plan (AQMP/GHGRP)  Other type of plan: Enter information here. |
| Plan name | Enter information here. |

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| **Applicant** | |
| Business name | Enter information here. |
| Contact name | Enter information here. |
| Phone (office) | Enter information here. |
| Phone (other) | Enter information here. |
| Email | Enter information here. |

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| **Consultant** | |
| Business name | Enter information here. |
| Consultant name | Enter information here. |
| Phone (office) | Enter information here. |
| Phone (other) | Enter information here. |
| Email | Enter information here. |

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| **Land Use Jurisdiction** | |
| Jurisdiction (city/county/other) | Enter information here. |
| Planner name | Enter information here. |
| Phone (office) | Enter information here. |
| Phone (other) | Enter information here. |
| Email | Enter information here. |

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| **Existing Land Use Designations** | |
| List all existing or planned specific plans, master plans, community plans, design guidelines, AQMP/GHGRPs, special zoning or other related land use requirements that the project is currently subject to.  Append or provide links to the documents. | Enter information here. |
| Status of public facilities financing plan/urban services plan, if applicable.  Append or provide links to the documents. | Enter information here. |
| Is this project requesting a change to the Urban Services Boundary or the Urban Planning Area? | Enter information here. |
| Is the project as proposed assumed in the currently adopted MTP/SCS (year 2020)? | Enter information here. |

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| **Environmental Review Timeline** | |
| Date of most recent NOP | Enter information here. |
| Level of review requested (preliminary/admin stage, DEIR stage, revision review, etc.) | Enter information here. |
| Is this a recirculation or does this supersede a previous version? | Enter information here. |
| Status of environmental review (for example, Admin, DEIR, FEIR) | Enter information here. |

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| **Air Quality Mitigation Plan** | | | |
| Reduction Goal(s)  Enter information here. For example, 15%. | Threshold(s) of Significance  Enter information here. For example, 85 lbs/day NOx. | Source of Thresholds  Enter information here. For example, Sac Air District. | Notes  Enter information here. |

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| **Greenhouse Gas Reduction Plan** | | | |
| Reduction Goal(s)  Enter information here. For example, 2,668.12 MT CO2e/yr by 2030. | Threshold(s) of Significance  Enter information here. For example: 0.78 MT CO2e/yr, per capita, residential sector. | Source of Thresholds  Enter information here. | Notes  Enter information here. |

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| **Other Plan Type (if applicable)** | | | |
| Reduction Goal(s)  Enter information here. | Threshold(s) of Significance  Enter information here. | Source of Thresholds  Enter information here. | Notes  Enter information here. |

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| **Traffic Analysis**  Fill out this section if a traffic analysis was used to determine trip information. | |
| Name | Enter information here. |
| Date | Enter information here. |
| List any other projects that share this traffic analysis. | Enter information here. |

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| **Concerns & Considerations for Individual Emissions Reduction Measures** |
| Global and Categorical Maximums (aka caps): Be sure to remain under the caps described in the CAPCOA Guidance. See CAPCOA’s Understanding and Using Fact Sheets.  Project Setting: CalEEMod project setting must match CAPCOA’s project setting in which caps are determined.  Enforcement Mechanisms: Include a description of the enforcement mechanisms necessary to fund and carry out activities such as TMA membership, transportation passes, etc. |

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| **Mobile Emissions** | |
| Were the mobile emissions calculated in CalEEMod or off-model?  If CalEEMod was used, what version? | Enter information here. |
| List the EMFAC version, if not using CalEEMod. | Enter information here. |
| Include any additional relevant information. | Enter information here. |
| **Energy Emissions** | |
| SMUD year | Enter information here. |
| California Building Standards Code  (Title 24 energy compliance year) | Enter information here. |

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| **Emissions Summary Table**  Complete for the applicable pollutants. | | | | |
| *Pollutant* | *Unmitigated Business-As-Usual Baseline (tons/year)* | *Mitigated Project (tons/year)* | *Reduction target*  *(tons/year, efficiency metrics, performance standards)* | Target met? (Yes/No) |
| NOX | Enter information here. | Enter information here. | Enter information here. | Enter information here. |
| ROG | Enter information here. | Enter information here. | Enter information here. | Enter information here. |
| PM10 | Enter information here. | Enter information here. | Enter information here. | Enter information here. |
| PM2.5 | Enter information here. | Enter information here. | Enter information here. | Enter information here. |
| GHG (CO2e) | Enter information here. | Enter information here. | Enter information here. | Enter information here. |

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| **AQMP/GHGRP Reduction Measures** |

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| **Measure Name:** Enter information here. |
| Type of measure  Design feature/assumed in baseline  Condition of approval # **:** specify  Mitigation measure # **:** specify  Quantification method  CAPCOA Guidance  Traffic study  Off-model calculation  Air District staff guidance  Air District CEQA Guide  Other specify  Provide a brief description of measure and how it is valid to your project:  Enter information here.  Describe the enforcement mechanism for this measure.  Enter information here. |
| You may provide more details in an attachment. |

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| **Measure Name:** Enter information here. |
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| You may provide more details in an attachment. |

**Copy and paste more sections if needed**

I have appended all relevant air quality and greenhouse gas calculations including modeling files (for example, CalEEMod files), hand calculations, etc. for review.

Submitted on Click or tap to enter a date. to Sac Metro Air District / Land Use Jurisdiction

Submitted by enter name and title of person submitting this form

Electronic or written signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_