

# DEVIATION REPORT

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## I. FACILITY IDENTIFICATION

1. Facility Name: \_\_\_\_\_
2. Street Address or Source Location: \_\_\_\_\_

## II. DEVIATION INFORMATION

3. Permit number(s) of emission unit or control unit affected: \_\_\_\_\_
4. Description of deviation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Description and identification of permit condition(s) deviated: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Associated equipment and equipment operation (if any): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Date and time when deviation was discovered: \_\_\_\_\_  
\_\_\_\_\_
8. Date, time and duration of deviation: \_\_\_\_\_  
\_\_\_\_\_
9. Probable cause of deviation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Preventive or corrective action taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_