

## **RELATIVE ACCURACY TEST AUDIT NOTIFICATION PROTOCOL**

Ùcæe^Á2[¦{ÁÍÍ€ÍJÁÇR/3Ë25D

Quǎãæ)æ#Ö^]æ4d{ ^}o4{\\_#Ô}çã[}{ ^}cæ4/Tæ)æ\*\*{ ^}c

INSTRUCTIONS: Please complete this form and mail it back to: 100 N Senate Avenue, Mail Code 61-53, IGCN Room 13W, Indianapolis, IN 46204-2251; or e-mail it to: Test\_Protocol@idem.IN.gov.

Date Prepared: Proposed Test Date:			Plant Address:			Plant Location:		
1. SOURCE INFO: ID/Permit No.:				6. Check Applicable:		AGENCY USE C	DNLY: Date Received:	
Ô[{]æ}^K				OĘ}}ča¢ÁÜOE/OBEÁ∵´´´ÚæioÂĺĺKÁ´´´´´ Inspec		Inspector:	Approval Date:	
TæäjÁŒaå¦∧∙∙k‱				Ù^{ãĐੋ;}ૻæ₩Áᠱ໌໌໌໌໌ÚæloÂi€KÁ΄΄΄΄ Reviewer:		Reviewer:		
ÔãĈÊÂUcæ®^ÊÂZQÚK				Uc@¦K Comments:				
Ô[{]æ}^ÁÔ[}œæådK V^ ^]@[}^ká				Ô^¦cãa8æaaāį}Ká Ü^&^¦cãa8æaaāį}K				
2. TEST COMPANY INFORMATION:								
Þǽ ^K								
Œå¦^∙∙K				7. SAMPLE SITE LOCATION				
Ôã°ÊÚœe^ÊZOÚKÁ								
Ô[}cæ8d\$\$\$\$\$\$\$						Ö[^•Áæ{] ^Á,[¦ơÁ[&ææã]}Á, ^^ơA,€ÁÔ⊘ÜÂ,€ÉAQE]]¢ÈADEÂ		
3. PROCESS INFORMATION: (Submit a separate form for each unit to test.)							T^cq⊉åÁFÉÁÚ^&ÈÁFÈEÁŰ^˘˘ã^{^}œkÁ₩₩ Ÿ^∙ÁEÁÞ[	
W} ã¢kt Á/∧∙ dK							QÁ¤[ÊA∿¢] æajiK	
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Ú¦[][•^åÁJ]^¦æøäj*ÁÙ]^^åK				A				
Ö^∙&¦ãa^Á;^œ⊉åÁ∙^åÁįÁå^œ¦{ãj^Á;]^¦ææāj*Á/∿ç^ K				$\downarrow$				
				Sampling Site			C0]]¦[¢ā[æe∿ÁÙcæ&∖ÁæeÁļ[,ÁÇCEÔØTDK	
					C0]]¦[¢ā[æer^ÁÙcæ&∖Á*æ•Áe^{]ÁÇà^*ĚÁ2DK			
Ú[  ˘qã]}ÂÔ[}d[ ÂÒ˘˘ĝ]{^}dK				_			OE,]¦[¢ãį aner^ÁÙ(cane&à Á* aner Á; [ã:cč¦^ÁQà DK	
Ø ^ Á^] ^K							Þ`{ à^¦Ą́,-Ą́[ą̃,orĄ́[¦ÁT ^c@;åÁÐK	
4. Load Level	Test Method	No. Runs	Time	В			Þ`{à^¦Á;Á[ã;œÁ[¦ÁT^o@[åÁK	
@CK	G					Disturbance	Þ`{à^¦Á[ð];orÁ[¦ÁT^c@[åÂÌK	
	H						Þ`{à^¦Ą́,-Ą́[ą̃,o•Ą́[¦Ѧ́T^o@įåẤK	
Υ΄΄ ÁTΥÕ				_		_	O5; c383] æe∿åÁsiæe∿Á; Á⊘[, ÁÜO5:/O5=K	
	U@\Á´´´´			$-\downarrow$	$  \cdot \leftarrow$	-	05;oã&a]ævå/åævÅ(áÅ⊅[¦{æ¢Å§[æåÁ Õæ•∧[č•ÁÜC5/05K	
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A=8	Н			_				
	Î			- n	istance A		Please attach explanation if performing a Single Load RATA only.	
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	U@¦Á´´´´			Distance B				
							326 IAC 3-6-2(a) requires this completed form to	
<7 <	G			5. Ö^∙&¦äâ^Áee)^Áêi^çãeeaã[}∙Á¦[{Árœa)åælåÁe∿∙oA(^c@[å∙K			be submitted 35 days prior to the proposed test	
	Н						date to the above address. 326 IAC 2-1.1-7(6)(B)	
	Î						requires any applicable test fee to be submitted with the protocol. <i>fl 99 BCH5DD@</i> #56 @ ≒	
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	Uc@¦Á´´´´			1				