



San Diego County Air Pollution Control District

San Diego Air Pollution Control District SEP Proposal Form

Organization Name:	
Contact Name:	Contact Title:
Email Address:	Phone Number:
Street Address:	
City:	Zip Code

Is the organization a:

- 501 (c)(3) nonprofit
- Federal recognized tribe
- Local, regional, or state entity
- Other

If "Other" please specify:

Project Name:
Project Location:
Please describe the environmental benefits of the project:
Estimated Cost:
Estimated Project Timeline: