



# Allowance Transfer NO<sub>x</sub>

This form is required to record a transfer of allowances under the Acid Deposition Reduction (ADR) NO<sub>x</sub> Budget Trading Program, 6 NYCRR Part 237, from one account to another in the New York State Acid Deposition Reduction Allowance Tracking System (NADATS). Upon receipt of a completed allowance transfer form, the Department or its agent will move the requested allowances from the transferor's account to the transferee's account. The Authorized Account Representative (AAR) should notify all persons who have an ownership interest in the allowances held in an account every time he or she makes a ADR NO<sub>x</sub> Budget Trading Program submittal.

**STEP 1**  
 Enter account information about the transferor (in whose account the allowances currently reside).

**Transferor:**

NADATS Account Number	
AAR Name	AAR ID Number
Address	
Phone Number	
Fax Number	

**STEP 2**  
 Enter account information about the transferee (into whose account the allowances are being transferred).

**Transferee:**

NADATS Account Number	
AAR Name	AAR ID Number
Address	
Phone Number	
Fax Number	

**STEP 3**  
 The transferor AAR should read the certification, print name, and sign and date.

I am authorized to make this submission on behalf of the owners and operators of the NO<sub>x</sub> Budget sources or NO<sub>x</sub> Budget units for which the submission is made (or in the case of general accounts, the persons having an ownership interest with respect to the NO<sub>x</sub> allowances held in the general account.) I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

**Transferor:**

Name	
Signature	Date

