



## REQUEST FOR STAR CERTIFICATION REINSTATEMENT

### INSTRUCTIONS

1. Complete the form below.
2. Submit the completed form and any required documentation to BAR by email or fax

**EMAIL:**     **STAR.Reinstatements@dca.ca.gov**

**FAX:**         **(888) 421-7798**

SECTION A. STATION INFORMATION		
<b>LICENSE #</b>	<b>SUSPENSION #</b>	
<b>FACILITY NAME</b>		
<b>STREET ADDRESS</b> Number, Street, and Apt/Unit #		
<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
SECTION B. REINSTATEMENT REASON		
<p><b>SHORT TERM MEASURES</b> - I have verified my station now meets all STAR performance measures for the current three month period as displayed in my station's STAR Report Card on BAR's website.</p> <p>Three-Month Period End Month: _____</p>		
<p><b>FOLLOW-UP PASS RATE (FPR)</b> - Provide the inspector license # and select the appropriate item below.</p> <p>Inspector License #: _____</p> <p style="margin-left: 40px;">The inspector has been removed from my station's analyzer.</p> <p style="margin-left: 40px;">The inspector's FPR score has changed to: _____</p>		
<p><b>EQUIPMENT REQUIREMENTS</b> - I have corrected the equipment issue as specified in the STAR Certification Suspension letter and attached the required documentation.</p>		
SECTION C. ACKNOWLEDGMENT		
<p>I have corrected the cause of my station's suspension, and pursuant to California Code of Regulation section 3392.2, my station is eligible to have its STAR certification reinstated.</p>		
<b>OWNER NAME</b> Last, First, Middle Initial		
<b>SIGNATURE</b>	<b>DATE</b>	
SECTION D. REQUEST TO WITHDRAW ADMINISTRATIVE REVIEW OF SUSPENSION		
<p>Please check this box if you have a pending administrative review of this suspension you request to be withdrawn if reinstatement of your station's STAR certification is granted.</p>		