



**In Home Air Purifier Application  
For Salton Sea Communities**  
(Salton City, Vista del Mar, Salton Sea Beach, Desert Shores,  
and Bombay Beach)



Complete and submit the attached application with supporting documentation to:

Imperial County Air Pollution Control District

Attn: Abigail Arballo

150 S 9<sup>th</sup> Street

El Centro, CA 92243

(442) 265-1800

[abigailarballo@co.imperial.ca.us](mailto:abigailarballo@co.imperial.ca.us)



### Household Information (continued)

Estimated home square footage? \_\_\_\_\_ sq ft

Do you have a heating and cooling ventilation system (HVAC) at home?

Yes       No

### Demographics Information

\*(The following questions are optional)\*

Do you or anyone in your household suffer from respiratory related health issues such as asthma, heart or lung disease(s), etc?

Yes

No

Have you or someone you know experienced an asthma attack?

Yes

No

Is there anyone 65 years or older living in the residence?

Yes

No

**Proof of residency must be submitted with an application. Acceptable forms include:**

- Most recent utility bill (electric, water, or cable/internet bill)
- Must have the applicant's name and address on the document

I understand that if approved to receive an air purifier under this program, the device may not be returned for cash or store credit.

I understand that incentive programs have limited funds and ICAPCD has discretion to terminate applications upon depletion of program funds.

I certify that all the information provided in the application, including attachments submitted, are true and correct to the best of my knowledge. By signing this application, I have read, understand, and agree to comply with all requirements listed in this application.

Signature \_\_\_\_\_

Date \_\_\_\_\_