



**Deliver or mail all  
Applications to:**  
MCAQD One Stop Shop  
Permit Application Intake  
501 N. 44<sup>th</sup> Street, 2<sup>nd</sup> Floor  
Phoenix AZ 85008-6538  
FAX: (602) 372-1078

Air Quality Department Offices  
Phone: (602) 506-6010  
Website: <http://www.maricopa.gov/aq/>

## **APPLICATION FOR NEW FACILITY, PERMIT RENEWAL OR PERMIT TRANSFER: VEHICLE AND MOBILE EQUIPMENT REFINISHING OPERATIONS**

### *When is this Application required?*

- A new vehicle or mobile equipment refinishing facility will be built
- An existing permit needs to be renewed
- Change in ownership
- Relocating to a new site (permits are site-specific)

Facilities that qualify for an Authority to Operate (ATO) or construct under this general permit can obtain an ATO faster and at a lower cost than if applying for an individual source permit. This application must cover all activities at the facility, both existing and proposed, that are required to be covered by an air quality permit.

### *What fee is required with the Application?*

- New owner or new facility: **\$330**
- If a Notice of Violation was received: Add **\$100** to the application fee above
- Renewal: no charge

Complete the application by typing or printing legibly. If the application is a renewal for an existing facility with a valid ATO under this general permit, no application fee is required. If the application is for initial coverage, a new owner, or a change of location, a fee of **\$330** must be included with the application. If a Notice of Violation (NOV) was issued for constructing and/or operating a facility without a permit, an additional **\$100** is due with the application. If a Notice of Violation was issued, additional penalties may be imposed as a result of an enforcement action. An annual administrative fee will be due on the anniversary date of the ATO and the department will send a billing invoice at that time.

### *What requirements must the facility meet to qualify for this General Permit?*

This general permit covers facilities that apply coatings to vehicles or mobile equipment. The facility **may** also have fuel burning equipment, solvent cleaners or gasoline dispensing. To qualify for this general permit, the following limits must all be met:

- Use of coatings, solvents, and cleaning materials combined is less than 500 gallons per month and less than 6,000 gallons per twelve month period;
- Any cold cleaning unit must meet the requirements in Section B of this application;
- Each fuel burning unit such as a boiler or heater must be rated at less than 10 million BTU/hr of heat input, burn only natural gas, propane, or butane, and the combined rating of all units must be less than 55 million BTU/hr;
- Any non-retail gasoline dispensing operation must not exceed 120,000 gallons of throughput per twelve month period and **retail gasoline dispensing is not covered by this general permit**;
- The total horsepower rating of all internal combustion engines is 250 horsepower or less, the engine(s) is used **only** for emergency purposes (i.e., backup generators), and the engine is never used for peak shaving purposes. Backup generators may use diesel or gasoline as a fuel source.

## **APPLICATION FOR THE AUTHORITY TO OPERATE AND/OR CONSTRUCT VEHICLE OR MOBILE EQUIPMENT REFINISHING OPERATIONS**

### ***What if the facility does not qualify for this General Permit?***

If the facility does not qualify for coverage under this general permit, the application will be forwarded for review as an individual source permit. *If the facility is required to obtain an individual source permit, the department will bill for any additional applicable permit fees.*

### ***I have filled out an Application before. Why do I need to complete it again?***

- The Application has been updated and revised
- The General Permit expires every five years, regardless of when a facility received an ATO
- New federal rules apply to vehicle and mobile equipment refinishing operations. This new Application helps ensure that any facility receiving an ATO meets these federal requirements.

### ***What is needed to complete the Application?***

- Name and contact information for the site
- Name and contact information for the owner
- Permit number for a renewal application
- Information on all equipment to be covered by the ATO
- Site map or drawing showing equipment locations
- Signature of the owner or a Responsible Official

The application must be completed by all applicants. Attach drawings and any necessary specifications to show the location of the fuel burning equipment. If necessary, attach additional sheets to the application to provide all required information. Obtaining an ATO through fraud or misrepresentation may subject you to civil and criminal penalties.

### ***What do I do if I need help with this Application?***

The Maricopa County Air Pollution Control Rules and Regulations are available at the listed address. To obtain a copy, contact the Department for information and costs, or download them from our Internet site: [http://www.maricopa.gov/aq/divisions/planning\\_analysis/](http://www.maricopa.gov/aq/divisions/planning_analysis/)

Additional information on permitting is available at the Maricopa County Air Quality Department website: [http://www.maricopa.gov/aq/divisions/permit\\_engineering/](http://www.maricopa.gov/aq/divisions/permit_engineering/)

Businesses needing assistance completing the application may call (602) 506-6735, or the Air Quality Department main line at (602) 506-6010.



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DATE RECEIVED
LOG NUMBER

**APPLICATION FOR THE AUTHORITY TO OPERATE AND/OR CONSTRUCT  
 VEHICLE OR MOBILE EQUIPMENT REFINISHING OPERATIONS**

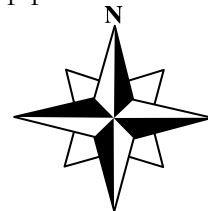
(As required by A.R.S. §49-480 and Maricopa County Air Pollution Control Regulations, Rule 200)

**ALL APPLICANTS MUST COMPLETE THE ENTIRE APPLICATION**

1. NAME OF BUSINESS:					DO NOT WRITE IN THIS SPACE	
2. ADDRESS OF SITE		Street and Number:				
		City:	State:	Zip Code:		
3. ON-SITE CONTACT		Name of Individual:		Phone Number:	Fax Number:	
4. TYPE OF OWNERSHIP (Check Appropriate Box)		<input type="checkbox"/> Corporation <input type="checkbox"/> Sole Owner <input type="checkbox"/> Partnership <input type="checkbox"/> Government <input type="checkbox"/> Other - Specify:				
5. OWNERSHIP INFORMATION (Name and mailing address)		Name of Owning Entity or Individual:				
		Street and Number:				
		City:	State:	Zip Code:		
6. OWNER CONTACT		Name of Individual:		Phone Number:		
7. ADDRESS FOR RECEIPT OF OFFICIAL CORRESPONDENCE (Address where the permit and invoice should be sent)		Company Name:			Email Address Where Permit Will Be Sent:	
		Street and Number:				
		City:	State:	Zip Code:		
8. SIC CODE(S) (Standard Industrial Classification Code(s))		9. AIR PERMIT NUMBER (Any existing permit for this site)				
10. DESCRIPTION OF BUSINESS/PROCESS (Brief description of operations at the site)						
11. OPERATING SCHEDULE		Hours per Day:	Hours per Week:	Weeks per Year:	12. PROJECTED COMPLETION DATE (New Facility)	
13. AUTHORIZED CONTACT PERSON		Name of Individual		Phone Number:	Email:	
		Title:		Company Name:		
14. SIGNATURE OF RESPONSIBLE OFFICIAL (Owner or individual responsible for principal business functions)		I CERTIFY THAT I AM FAMILIAR WITH THE OPERATIONS AND EQUIPMENT REPRESENTED ON THIS APPLICATION AND THE STATEMENTS AND INFORMATION PROVIDED HEREIN ARE TRUE, ACCURATE, AND COMPLETE BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY.				
		Name of Individual:			Title:	
		Signature:			Date:	

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15. **SITE DIAGRAM:** Draw a site layout or attach a drawing of equipment locations at the site with approximate distances to property lines. Specifically show paint booths and other spray coating areas, mixing stations, gun cleaner location(s), and waste storage areas. Also, if applicable, show solvent cleaner location, position of fuel burning equipment, and gasoline storage tanks, fill pipes, and vent pipe locations.





**APPLICATION FOR NEW FACILITY, PERMIT RENEWAL OR PERMIT TRANSFER:  
VEHICLE AND MOBILE EQUIPMENT REFINISHING OPERATIONS**

**SECTION A. VEHICLE AND MOBILE EQUIPMENT REFINISHING**

	17(g). Will all <i>Specialty coatings</i> have a maximum VOC Content of <u>7.0 lb/gal</u> (840 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	17(h). Will all <i>Strippable booth coatings</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>18. BODY/CHASSIS REFINISHING OF HIGHWAY VEHICLES ≥ 8600 POUNDS</b>	<p>Please answer <u>each</u> of the following questions regarding the VOC content of the coatings that will be applied to the <u>previously coated body/chassis</u> of cabs/tractors, trucks, vans, busses, and motorhomes with a manufacturer's gross vehicle weight rating of 8,600 lbs or more that are licensable for highway travel (this includes any trailer or semi-trailer that is equipped to be pulled by any such cab/tractor, truck, or van) at your facility. Please mark the appropriate response box for each type of coating, making sure to respond for each type of coating.</p> <p>Mark the box for "N/A" if a type of coating will not be used at your facility.</p>	
	18(a). Will all <i>Pretreatment Wash Primers</i> have a maximum VOC Content of <u>6.5 lb/gal</u> (780 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(b). Will all <i>Primers/primer surfacers</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(c). Will all <i>Primer sealers</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(d). Will all <i>Single stage, solid color coatings</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(e). Will all <i>Single stage, metallic/iridescent coatings</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(f). Will all <i>Two-Stage topcoat, basecoat, and clearcoats</i> have a maximum VOC Content of <u>4.0 lb/gal</u> (480 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(g). Will all <i>Topcoats of more than two stages</i> have a maximum VOC Content of <u>4.0 lb/gal</u> (480 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(h). Will all <i>Spot coats (1 liter limit each stage)</i> have a maximum VOC Content of <u>4.55 lb/gal</u> (546 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(i). Will all <i>Specialty coatings (as defined in the regulations)</i> have a maximum VOC Content of <u>7.0 lb/gal</u> (840 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	18(j). Will all <i>Strippable booth coatings</i> have a maximum VOC Content of <u>2.0 lb/gal</u> (240 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>19. COATING OF ACCESSORIES FOR LIGHT DUTY PRODUCTION-LINE VEHICLES</b>	<p>Please answer <u>each</u> of the following questions regarding the VOC content of the coatings that will be applied to <u>vehicle-body appurtenances</u> such as mirrors, trim strips, license-plate frames, etc., used to replace or supplement existing appurtenances on automobiles, light duty vans, light duty motor homes, pick-up trucks, and/or utility vehicles (light duty production-line vehicles) at your facility. Please mark the appropriate response box for each type of coating.</p> <p>Mark the box for "N/A" if a type of coating will not be used at your facility.</p>	
	19(a). Will all <i>Pretreatment Wash Primers</i> have a maximum VOC Content of <u>6.5 lb/gal</u> (780 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	19(b). Will all <i>Primers/primer surfacers</i> have a maximum VOC Content of <u>4.8 lb/gal</u> (580 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	19(c). Will all <i>Primer sealers</i> have a maximum VOC Content of <u>4.6 lb/gal</u> (550 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	19(d). Will all <i>Single/two-stage topcoats</i> have a maximum VOC Content of <u>5.0 lb/gal</u> (600 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

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**SECTION A. VEHICLE AND MOBILE EQUIPMENT REFINISHING**

	<b>19(e).</b> Will all <i>Topcoats of more than two stages</i> have a maximum VOC Content of <u>5.2 lb/gal</u> (630 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>19(f).</b> Will all <i>Multi-colored topcoats</i> have a maximum VOC Content of <u>5.7 lb/gal</u> (680 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>19(g).</b> Will all <i>Specialty coatings</i> have a maximum VOC Content of <u>7.0 lb/gal</u> (840 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>19(h).</b> Will all <i>Strippable booth coatings</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>20.COATING OF ACCESSORIES FOR HIGHWAY VEHICLES ≥ 8600 POUNDS</b>	<p>Please answer <u>each</u> of the following questions regarding the VOC content of the coatings that will be applied to the <u>vehicle-body appurtenances</u> such as mirrors, trim strips, license-plate frames, etc., used to replace or supplement existing appurtenances on cabs/tractors, trucks, vans, busses, and motorhomes with a manufacturer's gross vehicle weight rating of 8,600 lbs or more that are licensable for highway travel (this includes any trailer or semi-trailer that is equipped to be pulled by any such cab/tractor, truck, or van) at your facility. Please mark the appropriate response box for each type of coating, making sure to respond for each type of coating.</p> <p>Mark the box for "N/A" if a type of coating will not be used at your facility.</p>	
	<b>20(a).</b> Will all <i>Pretreatment Wash Primers</i> have a maximum VOC Content of <u>6.5 lb/gal</u> (780 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(b).</b> Will all <i>Primers/primer surfacers</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(c).</b> Will all <i>Primer sealers</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(d).</b> Will all <i>Single stage, solid color coatings</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(e).</b> Will all <i>Single stage, metallic/iridescent coatings</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(f).</b> Will all <i>Two-Stage topcoat, basecoat, and clearcoats</i> have a maximum VOC Content of <u>4.0 lb/gal</u> (480 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(g).</b> Will all <i>Topcoats of more than two stages</i> have a maximum VOC Content of <u>4.0 lb/gal</u> (480 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(h).</b> Will all <i>Spot coats (1 liter limit each stage, 2 liter limit for all stages)</i> have a maximum VOC Content of <u>4.55 lb/gal</u> (546 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(i).</b> Will all <i>Specialty coatings (as defined in the regulations)</i> have a maximum VOC Content of <u>7.0 lb/gal</u> (840 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>20(j).</b> Will all <i>Strippable booth coatings</i> have a maximum VOC Content of <u>2.0 lb/gal</u> (240 g/l) or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

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**SECTION A. VEHICLE AND MOBILE EQUIPMENT REFINISHING**

<p><b>21. ALL OTHER COATING AND REFINISHING OPERATIONS NOT COVERED ABOVE</b></p>	<p>Please answer <u>each</u> of the following questions regarding the VOC content of the coatings that will be applied in all situations not covered in questions 16 through 20 above. These situations include:</p> <ol style="list-style-type: none"> <li>(1) The refinishing of surfaces, such as the drive train, steering gear, suspension, etc., that are not part of the body/chassis, the body's accessories, or the wheels for all vehicles;</li> <li>(2) The coating of <u>new or never coated</u> surfaces for all vehicles with the exception of coating the never coated body accessories covered in questions 19 and 20 above;</li> <li>(3) The refinishing of all surfaces including the body/chassis and body accessories for vehicles not listed in questions 16 through 20 above (including construction vehicles (such as mobile cranes, bulldozers, concrete mixers); farming equipment (such as wheel tractor, plow, pesticide sprayer); hauling equipment (such as truck trailers, utility bodies, camper shells); and miscellaneous equipment (such as street cleaners, golf carts, all terrain vehicles {ATVs}, mopeds) etc).</li> </ol> <p>Please mark the appropriate response box for each type of coating, making sure to respond for each type of coating.</p> <p>Mark the box for "N/A" if a type of coating will not be used at your facility.</p>																				
<p><b>21(a).</b> Will all <i>Air-Dried Coatings</i> have a maximum VOC Content of <u>3.5 lb/gal</u> (420 g/l) or less?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																				
<p><b>21(b).</b> Will all <i>Baked Coatings (above 200F (93°C))</i> have a maximum VOC Content of <u>3.0 lb/gal</u> (360 g/l) or less?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																				
<p><b>21(c).</b> Will all <i>Coatings on VINYL Surfaces</i> have a maximum VOC Content of <u>3.8 lb/gal</u> (450 g/l) or less?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																				
<p><b>21(d).</b> Will all <i>Coatings on FABRIC Surfaces</i> have a maximum VOC Content of <u>2.9 lb/gal</u> (350 g/l) or less?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																				
<p><b>21(e).</b> Will all <i>Coatings of NON-FLEXIBLE PLASTIC Surfaces</i> have a maximum VOC Content of <u>4.1 lb/gal</u> (490 g/l) or less?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																				
<p><b>21(f).</b> Will all <i>Primer Coatings of FLEXIBLE PLASTIC Surfaces</i> have a maximum VOC Content of <u>4.0 lb/gal</u> (480 g/l) or less?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																				
<p><b>21(g).</b> Will all <i>Color Topcoats of FLEXIBLE PLASTIC Surfaces</i> have a maximum VOC Content of <u>3.8 lb/gal</u> (480 g/l) or less?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																				
<p><b>21(h).</b> Will all <i>Combined System Basecoat/Clear coats of FLEXIBLE PLASTIC Surfaces</i> have a maximum VOC Content of <u>4.6 lb/gal</u> (546 g/l) or less?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A																				
<p><b>22. GUN CLEANING EQUIPMENT</b></p> <p>List gun cleaning equipment and answer the questions.</p>	<p><b>22(a).</b> Please list <u>all</u> gun cleaning equipment used at your facility. If more than two (2) types of gun cleaning equipment are used, please attach a separate sheet with the below-listed information for each additional equipment type.</p> <p><i>Under "Type" please specify whether the guns are automatic, non-automatic, remote reservoir, or other.</i></p> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width:15%; text-align: center;"><b>Gun Cleaner Type #1</b></td> <td style="width:20%;">Type:</td> <td style="width:20%;">Quantity:</td> <td style="width:20%;">Make:</td> <td style="width:25%;">Model:</td> </tr> <tr> <td></td> <td>Installation Date:</td> <td colspan="3">Disposal method for solvent clean-up:</td> </tr> <tr> <td style="text-align: center;"><b>Gun Cleaner Type #2</b></td> <td>Type:</td> <td>Quantity:</td> <td colspan="2"></td> </tr> <tr> <td></td> <td>Installation Date:</td> <td colspan="3">Disposal method for solvent clean-up:</td> </tr> </table>	<b>Gun Cleaner Type #1</b>	Type:	Quantity:	Make:	Model:		Installation Date:	Disposal method for solvent clean-up:			<b>Gun Cleaner Type #2</b>	Type:	Quantity:				Installation Date:	Disposal method for solvent clean-up:		
<b>Gun Cleaner Type #1</b>	Type:	Quantity:	Make:	Model:																	
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**SECTION A. VEHICLE AND MOBILE EQUIPMENT REFINISHING**

	<p><b>22(a).</b> Will all gun cleaning equipment be maintained free from liquid leaks, and have at least one pump which drives cleaning solvent through and over the gun and a basin for containment of the solvent?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>
	<p><b>22(b).</b> If any Automatic Gun Cleaning Machines are used, will they have self-closing features such that no gaps exceeding 1/8 inch will exist when not loading or unloading (including all periods of operation)?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>
	<p><b>22(c).</b> If any Non-automatic Remote Reservoir Cleaning Machines are used, will they have reservoirs that drain the sink/workspace quickly and completely and not have a cumulative total opening to the atmosphere exceeding two square inches (2 in<sup>2</sup>) in area?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>
<p><b>23. COATING AREA</b></p>	<p>The overspray from coating operations at your facility must be sufficiently controlled for coverage under the general permit. Please answer the following questions and supply the requested information.</p>	
	<p><b>23(a).</b> Will all spray coating equipment be operated inside an enclosure such that all of the following are true:</p> <ul style="list-style-type: none"> <li>(1) the enclosure has three sides;</li> <li>(2) each side is a minimum of eight feet in height;</li> <li>(3) the enclosure is able to contain all objects to be coated (except those that would not fit inside a 10'W x 25'L x 8'H box) such that spray will be directed in a horizontal or downward pointing manner so that overspray is directed at the walls or floor of the enclosure with no spraying conducted within three feet of any open end and/or within two feet of the top of the enclosure?</li> </ul>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p><b>23(b).</b> Will all spray coating equipment be operated inside an enclosure such that all of the following are true:</p> <ul style="list-style-type: none"> <li>(1) the enclosure has a roof</li> <li>(2) the enclosure has three or four sides</li> <li>(3) the enclosure is able to contain all objects to be coated (except those that would not fit inside a 10'W x 25'L x 8'H box) such that spray will be directed away from any opening in the enclosure with no spraying conducted within three feet of any open end and/or within two feet of any open top of the enclosure?</li> </ul>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p><b>23(c).</b> Will all spray coating equipment (except equipment that is used to coat objects that would not fit inside a 10'W x 25'L x 8'H box) be operated in a spray booth or enclosure with all of the following:</p> <ul style="list-style-type: none"> <li>(1) forced air exhaust having a filtering system with an average overspray removal efficiency of at least 92% by weight for the type of material being sprayed;</li> <li>(2) no gaps, sags or holes present in the filters;</li> <li>(3) all exhaust discharging into the atmosphere?</li> </ul>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p><b>23(d).</b> Will all spray coating equipment be operated inside a booth or enclosure that is located inside another completely enclosed building such that any vents or openings of the building do not allow overspray to be emitted into the outside air?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p><b>23(e).</b> Will all spray coating equipment consist only of hand-held aerosol cans?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

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VEHICLE AND MOBILE EQUIPMENT REFINISHING OPERATIONS**

**SECTION A. VEHICLE AND MOBILE EQUIPMENT REFINISHING**

<p><b>23(f).</b> Please provide the following information for each enclosure or paint booth used at your facility.</p> <p><b>Attach written documentation from the manufacturer regarding the removal efficiency for each filter system.</b></p>				
Booth or Enclosure #1	Size (L x W x H):		Is the exhaust mechanism equipped with a differential pressure measurement device?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Rating of Exhaust Fan (CFM):	Installation Date:	Rated Overspray Removal Efficiency of Filter System (%):	<i>Submit written supporting documentation from the manufacturer</i>
Booth or Enclosure #2	Size (L x W x H):		Is the exhaust mechanism equipped with a differential pressure measurement device?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Rating of Exhaust Fan (CFM):	Installation Date:	Rated Overspray Removal Efficiency of Filter System (%):	<i>Submit written supporting documentation from the manufacturer</i>

**APPLICATION FOR NEW FACILITY, PERMIT RENEWAL OR PERMIT TRANSFER:  
VEHICLE AND MOBILE EQUIPMENT REFINISHING OPERATIONS**

**SECTION B. SOLVENT CLEANING**

This section (Section B) of the application applies to solvent cleaning operations such as a dip tank for parts cleaning or wipe cleaning that is not part of coating operations. Do not use this section for a gun cleaning machine covered in Section A. Attach manufacturer's equipment specifications/literature whenever useful. If this section does not apply to your facility (i.e., you do not perform any solvent cleaning at your facility other than gun cleaning and wipe cleaning that is part of coating operations), please mark the box below and proceed to Section C.

Section B Does Not Apply

<b>24. SOLVENT CLEANER TYPE</b>	<p><b>24(a).</b> Will you utilize a batch loaded "cold" cleaning machine <u>with</u> a remote reservoir?</p> <p><i>This means a device or piece of equipment that contains and/or uses liquid solvent into which parts are placed to remove soils from the surfaces of the parts or to dry the parts. This includes cleaning machines that contain and use <u>heated, nonboiling</u> solvent to clean the parts. A remote reservoir is a reservoir for storing the cleaning-solvent that is completely separated by impervious surfaces from the sink or basin where cleaning is performed, except for a connecting tube through which solvent returns to the reservoir when cleaning is stopped.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<p><b>24(b).</b> Will you utilize a batch loaded "cold" cleaning machine <u>without</u> a remote reservoir?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<p><b>24(c).</b> Will you utilize a vapor degreaser? (<i>Any cleaning machine in which solvent-vapor from boiling cleaning solvent is utilized for cleaning objects introduced into the vapor zone</i>)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<p><b>24(d).</b> Will you utilize a continuous cleaning machine? (<i>A solvent cleaning machine that uses an automated parts handling system, typically a conveyor, to automatically provide a continuous supply of parts to be cleaned.</i>)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<p><b>24(e).</b> Will you utilize another type of cleaning machine that does not meet the descriptions provided in questions 24(a) through 24(d)?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<p align="center"><b>Please provide the manufacturer's name and model number for each solvent cleaning machine to be utilized at your facility.</b></p>	
<b>25. FOR COLD CLEANERS WITH REMOTE RESERVOIR</b>	<p><b>25(a).</b> Will the cleaner have a sink-like work area or basin which slopes toward the drain and which does not allow the solvent to pool?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>25(b).</b> Will the sink/basin area have a solvent return drain of no more than 15.5 square inches?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>25(c).</b> Will the cleaner have a means for draining cleaned parts so that the drained solvent is returned to the reservoir?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>26. FOR COLD CLEANERS WITHOUT REMOTE RESERVOIR</b>	<p>Please answer the following questions as they pertain to the operation of a batch loaded "cold" cleaning machine <u>without</u> a remote reservoir.</p>	
	<p><b>26(a).</b> Will the cleaner have a freeboard height of at least 6 inches? (<i>The freeboard height is the distance between the surface of liquid and the top of the tank.</i>)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>26(b).</b> Will the freeboard zone have a permanent, conspicuous mark that shows the maximum allowable level?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>26(c).</b> Will the freeboard be free of openings or ducts through which VOC can escape (except those openings required by OSHA regulations)?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>26(d).</b> Will the cleaner have a cover that prevents solvent vapors from escaping into the atmosphere when the cleaner is not being used?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

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**SECTION B. SOLVENT CLEANING**

	<p><b>26(e).</b> Will the cleaner have and use an internal drainage rack or other assembly in the freeboard space that returns all dripping solvent back into the hold of the cleaner?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p><b>27. SOLVENT INFORMATION</b></p>	<p>Please answer the following questions regarding the cleaning solvent to be used with the solvent cleaning operations at your facility. Please also provide the requested information. <i>(Please note, if your facility does not have a solvent cleaning machine but you do perform wipe cleaning that is not part of a coating operation, you may mark "N/A" for questions 27(a) through 27(c).)</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>27(a).</b> Will the solvent used be a solution or homogeneous suspension that, as used, contains less than 50 grams of VOC per liter of material (0.42 lb VOC/gal) or is at least 95% water by weight or volume?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>27(b).</b> Will the solvent used have a Total VOC Vapor Pressure of 1 mm Hg at 20°C (68°F)?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>27(c).</b> Will the solvent be utilized exclusively in a sealed system <i>(air-tight and pressurized)</i>?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>27(d).</b> Please provide the following information for the solvent to be used with solvent cleaning operations at your facility including wipe cleaning that is not part of a coating operation <i>(please note, if multiple solvents are used with the solvent cleaning operations at your facility, items 27(a) through 27(d) must be addressed as appropriate for each solvent – please attach a separate sheet to address these items for additional solvents).</i></p> <p><b>Name of Solvent:</b></p>	
	<p>Please answer the following questions regarding the methods used to handle the solvent utilized with the solvent cleaning equipment and/or wipe cleaning.</p>	<p>Quantity Used (gal/yr):</p>
<p>Disposal Method:</p>	<p>Quantity Disposed Of (gal/yr):</p>	
<p><b>If waste solvent is redistilled on site, provide information on the still, including manufacturer's literature.</b></p>		
<p><b>28. SOLVENT HANDLING</b></p>	<p><b>28(a).</b> Will all cleaning-solvent be kept in closed leak-free containers that are opened only when adding or removing material?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<p><b>28(b).</b> Will rags used for wipe cleaning be stored in closed containers when not in use?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<p><b>28(c).</b> Will each container be clearly labeled with its contents?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<p><b>28(d).</b> Will spills be wiped up or otherwise removed immediately if in accessible areas and as soon as reasonably possible in all areas?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

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**SECTION B. SOLVENT CLEANING**

<b>29. OPERATING METHODS</b>	Please answer the following questions regarding the operating practices associated with the solvent cleaning equipment at your facility. <i>(Please note, if your facility does not have a solvent cleaning machine but you do perform wipe cleaning that is not part of a coating operation, you may mark "N/A" for questions 29(a) through 29(j).)</i>	
	<b>29(a).</b> Will means be taken to ensure that comfort fans will not be used near cleaning machines?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>29(b).</b> Will cleaned parts be drained for at least fifteen (15) seconds or until dripping ceases, whichever is later?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>29(c).</b> Will all covers be maintained in place unless processing work or maintaining the machine?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>29(d).</b> Will means be taken to ensure that the cleaning-solvent is not sparged with air or other gas?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>29(e).</b> If a cleaning-solvent spray system is used, will <u>only</u> a continuous, undivided stream be used with an orifice pressure of ten psig or less?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>29(f).</b> If an ultrasonic cleaner is used, will a cover be utilized for cleaning cycles exceeding fifteen (15) seconds?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>29(g).</b> Will means be taken to ensure that porous or absorbent materials are not placed in the cleaning machine?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>29(h).</b> Will means be taken to ensure that the ventilation rate of the cleaning machine does not exceed 65 cfm per square foot of evaporative surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	<b>29(i).</b> Will the vertical speed of mechanical hoists moving parts in and out of the cleaning machine be limited to a maximum of eleven (11) ft/min?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<b>29(j).</b> Will means be taken to prevent solvents used in the solvent cleaning machine(s) from being cross contaminated with other materials at the work-site?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

**APPLICATION FOR NEW FACILITY, PERMIT RENEWAL OR PERMIT TRANSFER:  
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**SECTION C. FUEL BURNING EQUIPMENT**

This section of the application (Section C) applies to stationary fuel burning equipment at your facility such as boilers, heaters, generators, etc. If this section does not apply to your facility (i.e., you do not operate any fuel burning equipment whatsoever), please mark the box below and proceed to Section D.

Section C Does Not Apply

<b>30. EXTERNAL COMBUSTION UNITS</b>	<p>Please provide the requested information, perform the requested calculations and then answer the follow-up questions for the external combustion units, such as boilers and heaters, at your facility. If you do not operate any external combustion units at your facility, please mark the box and proceed to question 31.</p> <p><input type="checkbox"/> I Do Not Operate External Combustion Units</p>																																										
	<p><b>30(a).</b> Please fill in the following table with information for each external combustion unit at your facility.</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width:8%;">No.</th> <th style="width:22%;">Type (Boiler, Heater, Etc.)</th> <th style="width:18%;">Make</th> <th style="width:18%;">Model</th> <th style="width:10%;">Installed or Proposed</th> <th style="width:14%;">Gross Heat Input Rating (MMBtu/hr)</th> </tr> </thead> <tbody> <tr><td>1</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>2</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>3</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>4</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>5</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>6</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> <p><b>Please sum the gross input heat ratings for all external combustion units and record the total in the box to the right:</b></p>	No.	Type (Boiler, Heater, Etc.)	Make	Model	Installed or Proposed	Gross Heat Input Rating (MMBtu/hr)	1						2						3						4						5						6					
No.	Type (Boiler, Heater, Etc.)	Make	Model	Installed or Proposed	Gross Heat Input Rating (MMBtu/hr)																																						
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	<p><b>30(b).</b> Based on the data listed in 31(a) above, will the maximum heat input rating of each external combustion unit be less than 10 MMBtu/hr? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>																																										
	<p><b>30(c).</b> Based on the total calculated in 31(a) above, will the aggregated (total) heat input rating for all external combustion units be less than 55 MMBtu/hr? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>																																										
	<p><b>30(d).</b> Will the only fuels used in the external combustion equipment be natural gas, propane or butane? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p>																																										

**APPLICATION FOR NEW FACILITY, PERMIT RENEWAL OR PERMIT TRANSFER:  
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**SECTION C. FUEL BURNING EQUIPMENT**

<b>31. INTERNAL COMBUSTION ENGINES</b>	<p>Please provide the requested information, perform the requested calculations and then answer the follow-up questions for the internal combustion engines at your facility. If you do not operate any internal combustion units at your facility, please mark the box to the lower right and proceed to Section D.</p> <p><input type="checkbox"/> <b>I Do Not Operate Internal Combustion Units</b></p>																																		
	<p><b>31(a).</b> Please fill in the following table with information for each emergency generator at your facility.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:5%;">No.</th> <th style="width:25%;">Make</th> <th style="width:25%;">Model</th> <th style="width:15%;">Date of Manufacture</th> <th style="width:15%;">Installed or Proposed</th> <th style="width:10%;">Output Power Rating (hp)</th> </tr> </thead> <tbody> <tr><td>1</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>2</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>3</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>4</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>					No.	Make	Model	Date of Manufacture	Installed or Proposed	Output Power Rating (hp)	1						2						3						4					
No.	Make	Model	Date of Manufacture	Installed or Proposed	Output Power Rating (hp)																														
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	31(b). Is the total horsepower of all internal combustion engine less than or equal to 250 hp?				<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>																														
	31(c). Will all internal combustion engines at your facility be used exclusively for emergency power generation and never for peak shaving purposes?				<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>																														
	31(d). Will the only fuels used in the internal combustion equipment be gasoline or diesel?				<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>																														



**APPLICATION FOR NEW FACILITY, PERMIT RENEWAL OR PERMIT TRANSFER:  
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**SECTION D. GASOLINE DISPENSING OPERATIONS**

<b>33. FILL PIPE CONFIGURATION</b>	The fill pipe is used by the tank truck driver to put fuel into the storage tank. Please answer the following questions regarding the fill pipe configuration for the gasoline tanks at your facility.	
	<b>33(a).</b> Is each gasoline tank equipped with a submerged fill pipe that has a discharge opening which is completely submerged when the liquid level is 6 inches above the tank bottom?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<b>33(b).</b> Will the joints of each fill pipe assembly be maintained tight such that there is no liquid or vapor leakage?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<b>33(c).</b> Will each fill pipe have a cap in place except during sticking, delivery, testing, maintenance or inspection, with an attached, intact gasket that latches completely and can be easily twisted by hand?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<b>33(d).</b> Obstructions at the bottom of the fill pipes which prevent the measurement of how far the end of the fill pipe is from the bottom of the tank are not acceptable unless certified by the California Air Resources Board (CARB). Will means be taken to prevent such obstructions from existing unless CARB-certified (Note: Overfill protection flappers are not considered to be an obstruction)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**APPLICATION FOR NEW FACILITY, PERMIT RENEWAL OR PERMIT TRANSFER:  
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**SECTION E. FUGITIVE DUST FROM DUST GENERATING  
OPERATIONS**

Dust generating operation: Any activity capable of generating fugitive dust including, but not limited to, land clearing, earthmoving, weed abatement by discing or blading, excavating, construction, demolition, bulk material handling, storage and/or transporting operations, vehicle use and movement, the operation of any outdoor equipment, or unpaved parking lots.

If this section does not apply to your facility, please mark the box below.

**Section E Does Not Apply**

1.	Are routine dust-generating operations performed at this facility that disturb a surface area of 0.10 acre or greater?  <input type="checkbox"/> Yes <input type="checkbox"/> No <i>NOTE: If you answered "Yes", you must submit a dust control plan with this application.</i>
2.	The dust control plan must include the following:
a.	Name(s), address(es), and phone numbers of person(s) responsible for the submittal and implementation of the dust control plan and responsible for the dust-generating operation.
b.	A drawing, on 8½" x 11" paper, that shows entire project site/facility boundaries, acres to be disturbed with linear dimensions, nearest public roads, north arrow, and planned exit locations onto paved areas accessible to the public.
c.	Appropriate control measures, or a combination thereof, for every actual and potential dust-generating operation.
d.	One contingency control measure must be identified for all dust-generating operations.
e.	The maximum number of vehicle trips on unpaved haul/access roads each day (including number of employee vehicles, earthmoving equipment, haul trucks, and water trucks).
f.	Dust suppressants to be applied, method, frequency, and intensity of application; type, number, and capacity of application equipment; and information environmental impacts and approvals or certifications related to appropriate and safe use for ground application.
g.	Specific surface treatment(s) and/or control measures utilized to control material trackout and sedimentation where unpaved roads and/or access points join paved areas accessible to the public.

For further guidance completing the dust control plan, review the "Guidance for Dust Control Permit for Application" document located at <http://www.maricopa.gov/aq/divisions/compliance/dust/docs/pdf/EMGuide.pdf> or contact the dust compliance division at (602) 506-6010.