



Mail all Applications to :
MCAQD One Stop Shop
Permit Application Intake
501 N. 44th Street, 2nd Floor
Phoenix AZ 85008-6538
Phone: (602) 506-6464

Air Quality Department Offices
1001 N. Central Ave., Suite 400
Phoenix, Arizona 85004-1944
Phone: (602) 506-6094
Fax: (602) 506-6985
Website: <http://www.maricopa.gov/airquality/>

APPLICATION INSTRUCTIONS FOR THE AUTHORITY TO OPERATE AND/OR CONSTRUCT A REFINISHING OPERATION FOR VEHICLES AND MOBILE EQUIPMENT UNDER THE GENERAL PERMIT

Facilities that qualify for an Authority to Operate (ATO) or Construct under the Maricopa County General Permit for Vehicle and Mobile Equipment Refinishing Operations must use this form for applying for an ATO. Using this application, you will obtain an ATO under this General Permit faster and at a lower cost than if applying for an individual source permit. Do not use this form for amending prior applications, for adding additional pieces of equipment at existing facilities, etc.

Complete the application by typing or printing legibly. If the application is for an existing facility that currently has a valid authority to operate under the vehicle refinishing general permit, no application fee is required. If the application is for initial coverage under the vehicle refinishing general permit, a fee of **\$320** must be submitted with the application. If a Notice of Violation was issued for constructing and operating a new facility without a permit, an additional \$100 is due with the application for a total of **\$420**. The Department will send a billing to cover the annual administration fee.

This general permit covers facilities which paint vehicles and/or mobile equipment. The facility may also have fuel burning equipment, solvent cleaners, and gasoline tanks. To qualify for this general permit, the following limits must all be met:

- your use of coatings, solvents, and cleaning materials combined is expected to be less than 500 gallons per month and less than 6000 gallons per twelve month period,
- if you have a small cold cleaning unit, it must meet the requirements in Section B of this application,
- if you have fuel burning equipment, each unit 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.
- if you have a non-retail gasoline dispensing operation, you must not expect to exceed 120,000 gallons of throughput per twelve month period.
- The maximum aggregated horsepower rating of all internal combustion engines on the site is less than 200 horsepower, the engines are used only for emergency purposes (i.e. Backup generators), and the engines are never used for peak shaving purposes. Backup generators can use diesel or gasoline as a fuel source.

If it is found that your facility does not qualify for coverage under this general permit, the application will be forwarded for review as an individual source permit. If you are required to obtain an individual source permit, you will be billed later for any additional applicable permit fees.

In the application, items 1 through 15 and the Technical Section(s) which apply to your facility must be completed. Item 15 requires that you sketch or attach a sketch to show the location of the paint booths, heating units, and non-retail gasoline storage tank(s). If necessary, attach additional sheets to the application to provide all required information. Obtaining this ATO through fraud or misrepresentation may subject you to civil and criminal penalties.

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/airquality/divisions/planning_analysis/

Businesses needing assistance in completing the application package may contact the Business Resource Division at (602) 506-5102. They may also be contacted by e-mail through the following web address:
http://www.maricopa.gov/airquality/divisions/business_resource/



MARICOPA COUNTY
 AIR QUALITY DEPARTMENT
 1001 North Central Avenue Suite 400
 Phoenix, Arizona 85004
 (602) 506-6094
 FAX (602) 506-6985

DATE RECEIVED
LOG NUMBER

APPLICATION FOR THE AUTHORITY TO OPERATE AND/OR CONSTRUCT A REFINISHING OPERATION FOR VEHICLES AND MOBILE EQUIPMENT

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

ALL APPLICANTS MUST COMPLETE ITEMS 1 THROUGH 15. ALSO COMPLETE EACH APPLICABLE SECTION A THROUGH D (of the following pages).

1. NAME OF BUSINESS:				DO NOT WRITE IN THIS SPACE			
2. ADDRESS OF SITE		Street and Number:					
		City:				State: AZ	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. OWNERSHIP CONTACT		Name of Individual:		Phone Number: ()			
7. ADDRESS FOR RECEIPT OF OFFICIAL CORRESPONDENCE (List the Address Where the Permit and Invoice Should be Sent):		Company Name:		Attention Line:			
		Street and Number:					
		City:	State:		Zip Code:		
8. SIC CODE(S) (Standard Industrial Classification Code(s))		9930	9. AIR POLLUTION CONTROL PERMIT NUMBER (List Any Existing Permits for this Site)				
10. DESCRIPTION OF BUSINESS/PROCESS (Provide a Brief Description of Operations Occurring at the Site)							
11. OPERATING SCHEDULE		Hours per Day:	Hours per Week:	Weeks per Year:	12. PROJECTED DATE OF COMPLETION (If New Equipment)		
13. AUTHORIZED CONTACT PERSON		Name of Individual:		Phone Number: ()	Fax Number: ()		
		Title:		Company Name:			
14. SIGNATURE OF RESPONSIBLE OFFICIAL (Owner or Individual Responsible for Principle 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:		
15. SITE DIAGRAM		Please Provide a Site Diagram as Described on the Following Page					

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.



SECTION A. VEHICLE & MOBILE EQUIPMENT REFINISHING

Please answer all of the following questions in Section A of the application (pages 3-6). Please mark the box for "N/A" if a question does not apply to your facility. The questions in this section and many of the questions in the following sections are designed to identify whether your facility is eligible for coverage under the *General Permit to Operate and/or Construct for Vehicle and Mobile Equipment Refinishing Operations*. "No" answers may indicate that your facility cannot qualify for coverage under the referenced general permit, requiring alternate permitting action. See the notes in the left margin of each question category for details.

<p>16. GENERAL OPERATIONS (Read the Introductory Statement and Answer the Questions that Follow)</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" or "N/A" for questions 16(a) through 16(e) to be eligible to authorize operation of your facility through this General Permit. If any of these questions are answered "No", your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<p>Please answer <u>each</u> of the following questions in the General Operations category (please mark the box for "N/A" if a question does not apply to your facility).</p> <p>16(a). Will the total of all coatings, solvents and cleaning materials used at the facility be less than 500 gallons per month and less than 6,000 gallons per year? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>16(b). Will Surface Preparation and Surface Cleaning Fluids used for wipe or other non-dip cleaning have a VOC content of 1.4 lbs per gallon or less? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>16(c). Will all production and cleaning equipment in which VOC-containing materials are used or stored be maintained in proper working order? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>16(d). Will all VOC-containing material be stored in closed containers that are opened only when adding or removing material? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>16(e). Will each container be clearly labeled with its contents? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>16(f). What method(s) of waste disposal will be used for materials containing VOCs at your facility (please describe in the space below)?</p> <p>16(g). What type(s) of application methods will be used for the coatings utilized at your facility?</p> <p><input type="checkbox"/> Air Atomization <input type="checkbox"/> Pressure Atomization <input type="checkbox"/> Combined Air and Airless Operating Pressure: _____ (psi) (Airless)</p> <p><input type="checkbox"/> High Volume Low Pressure <input type="checkbox"/> Electrostatic <input type="checkbox"/> Other (specify): _____ (HVLP)</p>
<p>17. BODY/CHASSIS REFINISHING OF LIGHT DUTY PRODUCTION-LINE VEHICLES (Read the Description for When the Questions Apply and Answer the Questions Accordingly):</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" or "N/A" for each of these questions to be eligible to authorize operation of your facility through this General Permit. If any question is answered "No", your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<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 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, making sure to respond for each type of coating (please mark the box for "N/A" if a type of coating will not be used at your facility).</p> <p>17(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</p> <p>17(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</p> <p>17(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</p> <p>17(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</p> <p>17(e). 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</p> <p>17(f). 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</p> <p>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</p> <p>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</p>

SECTION A. VEHICLE & MOBILE EQUIPMENT REFINISHING

<p>18. BODY/CHASSIS REFINISHING OF HIGHWAY VEHICLES ≥ 8600 POUNDS (Read the Description for When the Questions Apply and Answer the Questions Accordingly):</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" or "N/A" for each of these questions to be eligible to authorize operation of your facility through this General Permit. If any question is answered "No", your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<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 8600 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 (please mark the box for "N/A" if a type of coating will not be used at your facility).</p>
<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</p>	
<p>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</p>	
<p>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</p>	
<p>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</p>	
<p>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</p>	
<p>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</p>	
<p>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</p>	
<p>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</p>	
<p>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</p>	
<p>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</p>	
<p>19. COATING OF ACCESSORIES FOR LIGHT DUTY PRODUCTION-LINE VEHICLES (Read the Description for When the Questions Apply and Answer the Questions Accordingly):</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" or "N/A" for each of these questions to be eligible to authorize operation of your facility through this General Permit. If any question is answered "No", your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<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, making sure to respond for each type of coating (please mark the box for "N/A" if a type of coating will not be used at your facility).</p>
<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</p>	
<p>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</p>	
<p>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</p>	
<p>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</p>	
<p>19(e). 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</p>	
<p>19(f). 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</p>	
<p>19(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</p>	
<p>19(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</p>	

SECTION A. VEHICLE & MOBILE EQUIPMENT REFINISHING

<p>20. COATING OF ACCESSORIES FOR HIGHWAY VEHICLES ≥ 8600 POUNDS (Read the Description for When the Questions Apply and Answer the Questions Accordingly):</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" or "N/A" for each of these questions to be eligible to authorize operation of your facility through this General Permit. If any question is answered "No", your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<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 8600 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 (please mark the box for "N/A" if a type of coating will not be used at your facility).</p> <p>20(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</p> <p>20(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</p> <p>20(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</p> <p>20(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</p> <p>20(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</p> <p>20(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</p> <p>20(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</p> <p>20(h). Will all <i>Spot coats (1 liter limit each stage, 2 liter limit for total of 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</p> <p>20(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</p> <p>20(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</p>
<p>21. ALL OTHER COATING AND REFINISHING OPERATIONS NOT COVERED IN 16 – 20 ABOVE (Read the Description for When the Questions Apply and Answer the Questions Accordingly):</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" or "N/A" for each of these questions to be eligible to authorize operation of your facility through this General Permit. If any question is answered "No", your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></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> <p>(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;</p> <p>(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;</p> <p>(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).</p> <p>Please mark the appropriate response box for each type of coating, making sure to respond for each type of coating (please mark the box for "N/A" if a type of coating will not be used at your facility).</p> <p>21(a). Will all <i>Air-Dried 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</p> <p>21(b). Will all <i>Baked Coatings (above 200°F (93°C))</i> have a maximum VOC Content of <u>3.0 lb/gal</u> (360 g/l) or less? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>21(c). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>21(d). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>21(e). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>21(f). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>21(g). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>21(h). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>

SECTION A. VEHICLE & MOBILE EQUIPMENT REFINISHING

<p>22. GUN CLEANING EQUIPMENT (List Gun Cleaning Equipment and Answer the Questions that Follow):</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" or "N/A" for each of questions 22(a) through 22(c) to be eligible to authorize operation of your facility through this General Permit. "No" answers to these questions indicate that your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<p>Please provide the requested information and answer the follow-up questions.</p> <p>22(a). 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. (Under "Type" please specify whether the guns are automatic, non-automatic, remote reservoir, or other.)</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <td style="width: 15%; text-align: center;">Gun Cleaner Type #1</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> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;">Gun Cleaner Type #2</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> </table> <p>22(a). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>22(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)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>22(c). 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 in²) in area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>	Gun Cleaner Type #1	Type:	Quantity:	Make:	Model #:		Installation Date:	Disposal Method for Solvent Clean-up:			Gun Cleaner Type #2	Type:	Quantity:	Make:	Model #:		Installation Date:	Disposal Method for Solvent Clean-up:		
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Gun Cleaner Type #2	Type:	Quantity:	Make:	Model #:																	
	Installation Date:	Disposal Method for Solvent Clean-up:																			
<p>23. COATING AREA (Read the Introductory Statement and Answer the Questions that Follow. Then List the Information Requested):</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" to at least one of questions 23(a) through 23(e) to be eligible to authorize operation of your facility through this General Permit. "No" answers to all of these questions indicates that your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></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>23(a). Will all spray coating equipment be operated inside an enclosure such that all of the following are true: (1) the enclosure has three sides; (2) each side is a minimum of eight feet in height; (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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>23(b). Will all spray coating equipment be operated inside an enclosure such that all of the following are true: (1) the enclosure has a roof (2) the enclosure has three or four sides (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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>23(c). 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: (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; (2) no gaps, sags or holes present in the filters; (3) all exhaust discharging into the atmosphere? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>23(d). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>23(e). Will all spray coating equipment consist only of hand-held aerosol cans? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>23(g). Please provide the following information for each enclosure or paint booth used at your facility (please attach written documentation from the manufacturer regarding the removal efficiency for each filter system).</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;">Enclosure #1</td> <td style="width: 15%;">Size(LxWxH):</td> <td style="width: 15%;">Installation Date:</td> <td style="width: 35%;">Is the exhaust mechanism equipped with a differential pressure measurement device? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td></td> <td>Rating of Exhaust Fan (CFM):</td> <td></td> <td>Rated Overspray Removal Efficiency of Filter System (%): (Please submit written supporting documentation from the manufacturer)</td> </tr> <tr> <td style="text-align: center;">Enclosure #2</td> <td>Size(LxWxH):</td> <td>Installation Date:</td> <td>Is the exhaust mechanism equipped with a differential pressure measurement device? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td></td> <td>Rating of Exhaust Fan (CFM):</td> <td></td> <td>Rated Overspray Removal Efficiency of Filter System (%): (Please submit written supporting documentation from the manufacturer)</td> </tr> </table>	Enclosure #1	Size(LxWxH):	Installation Date:	Is the exhaust mechanism equipped with a differential pressure measurement device? <input type="checkbox"/> Yes <input type="checkbox"/> No		Rating of Exhaust Fan (CFM):		Rated Overspray Removal Efficiency of Filter System (%): (Please submit written supporting documentation from the manufacturer)	Enclosure #2	Size(LxWxH):	Installation Date:	Is the exhaust mechanism equipped with a differential pressure measurement device? <input type="checkbox"/> Yes <input type="checkbox"/> No		Rating of Exhaust Fan (CFM):		Rated Overspray Removal Efficiency of Filter System (%): (Please submit written supporting documentation from the manufacturer)				
Enclosure #1	Size(LxWxH):	Installation Date:	Is the exhaust mechanism equipped with a differential pressure measurement device? <input type="checkbox"/> Yes <input type="checkbox"/> No																		
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	Rating of Exhaust Fan (CFM):		Rated Overspray Removal Efficiency of Filter System (%): (Please submit written supporting documentation from the manufacturer)																		

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 which is covered in Section A (number 22) of this application. Please 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 to the lower right and proceed to Section C.

Section B Does Not Apply to My Facility

<p>24. SOLVENT CLEANER TYPE (Read the Introductory Statement, Answer the Questions that Follow and Provide the Requested Information)</p> <p style="font-size: small; margin-top: 10px;">Please note that any "Yes" answer to one or more of questions 24(c) through 24(e) most likely indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism (unless a low VOC cleaner is utilized at all times). Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</p>	<p>Please answer the following questions and provide the requested information as applicable.</p> <p>24(a). Will you utilize a batch loaded "cold" cleaning machine (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 heated, nonboiling solvent to clean the parts) <u>with</u> a remote reservoir (a remote reservoir is a reservoir for storing the cleaning-solvent which is completely separated by impervious surfaces from the sink or basin where cleaning is performed, except for a connecting tube or isthmus through which solvent returns to the reservoir when cleaning is stopped)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>24(b). Will you utilize a batch loaded "cold" cleaning machine (see question 24(a) above for a definition of a "cold" cleaning machine) <u>without</u> a remote reservoir? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>24(c). Will you utilize a vapor degreaser (Any cleaning machine in which solvent-vapor from boiling cleaning solvent is utilized for cleaning objects introduced into the vapor zone)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>24(d). Will you utilize a continuous cleaning machine (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.)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>24(e). Will you utilize another type of cleaning machine that does not meet the descriptions provided in questions 24(a) through 24(d)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>24(f). Please provide the manufacturer's name and model number for each solvent cleaning machine to be utilized at your facility (please attach a separate sheet if additional space is required):</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 30%; padding: 2px;">Solvent Cleaning Machine #1</td> <td style="width: 30%; padding: 2px;">Make:</td> <td style="width: 40%; padding: 2px;">Model #:</td> </tr> <tr> <td style="padding: 2px;">Solvent Cleaning Machine #2</td> <td style="padding: 2px;">Make:</td> <td style="padding: 2px;">Model #:</td> </tr> <tr> <td style="padding: 2px;">Solvent Cleaning Machine #3</td> <td style="padding: 2px;">Make:</td> <td style="padding: 2px;">Model #:</td> </tr> </table>	Solvent Cleaning Machine #1	Make:	Model #:	Solvent Cleaning Machine #2	Make:	Model #:	Solvent Cleaning Machine #3	Make:	Model #:
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Solvent Cleaning Machine #2	Make:	Model #:								
Solvent Cleaning Machine #3	Make:	Model #:								
<p>25. FOR COLD CLEANERS <u>W/</u> REMOTE RESERVOIR (Read the Introductory Statement and Answer the Questions that Follow)</p> <p style="font-size: small; margin-top: 10px;">Please note that any "No" answer to one or more of questions 25(a) through 25(c) indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism.</p>	<p>Please answer the following questions as they pertain to the operation of a batch loaded "cold" cleaning machine <u>with</u> a remote reservoir (a "cold" cleaning machine with remote reservoir is 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 heated, nonboiling solvent to clean the parts, with a reservoir for storing the cleaning-solvent which is completely separated by impervious surfaces from the sink or basin where cleaning is performed, except for a connecting tube or isthmus through which solvent returns to the reservoir when cleaning is stopped)</p> <p>25(a). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>25(b). Will the sink/basin area have a solvent return drain of no more than 15.5 square inches? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>25(c). Will the cleaner have a means for draining cleaned parts so that the drained solvent is returned to the reservoir? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>									
<p>26. FOR COLD CLEANERS <u>W/O</u> REMOTE RESERVOIR (Read the Introductory Statement and Answer the Questions that Follow)</p> <p style="font-size: small; margin-top: 10px;">Please note that any "No" answer to one or more of questions 26(a) through 26(e) indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism.</p>	<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 (see Question 25 for a definition of these terms).</p> <p>26(a). Will the cleaner have a freeboard height of at least 6 inches? (The freeboard height is the distance between the surface of liquid and the top of the tank.) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>26(b). Will the freeboard zone have a permanent, conspicuous mark that shows the maximum allowable level? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>26(c). Will the freeboard be free of openings or ducts through which VOC can escape (except those openings required by OSHA regulations)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>26(d). Will the cleaner have a cover that prevents solvent vapors from escaping into the atmosphere when the cleaner is not being used? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>26(e). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>									

SECTION B. SOLVENT CLEANING

<p>27. SOLVENT INFORMATION (Read the Introductory Statement, Answer the Questions that Follow and Provide the Requested Information)</p> <p><i>Please note that you, the applicant, must truthfully answer "Yes" to at least one of questions 27(a) through 27(c) (or "N/A" for all) for each solvent utilized to be eligible to authorize operation of your facility through this General Permit. "No" answers to all of these questions indicates that your air pollution source must be permitted through an alternative permitting mechanism.</i></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> <p>27(a). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>27(b). Will the solvent used have a Total VOC Vapor Pressure of 1 mm Hg at 20°C (68°F)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>27(c). Will the solvent be utilized exclusively in a sealed system (air-tight and pressurized)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>27(d). 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> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Name of Solvent:</td> <td style="padding: 2px;">Quantity Used (gal/yr):</td> </tr> <tr> <td style="padding: 2px;">Disposal Method:</td> <td style="padding: 2px;">Quantity Disposed Of (gal/yr):</td> </tr> <tr> <td colspan="2" style="padding: 2px;">If waste solvent is redistilled on site, provide information on the still, including manufacturer's literature</td> </tr> </table>	Name of Solvent:	Quantity Used (gal/yr):	Disposal Method:	Quantity Disposed Of (gal/yr):	If waste solvent is redistilled on site, provide information on the still, including manufacturer's literature	
Name of Solvent:	Quantity Used (gal/yr):						
Disposal Method:	Quantity Disposed Of (gal/yr):						
If waste solvent is redistilled on site, provide information on the still, including manufacturer's literature							
<p>28. SOLVENT HANDLING (Read the Introductory Statement and Answer the Questions that Follow)</p> <p><i>Please note that any "No" answer to one or more of questions 28(a) through 28(d) indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism.</i></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 that is not part of a coating operations at your facility.</p> <p>28(a). Will all cleaning-solvent be kept in closed leak-free containers that are opened only when adding or removing material? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>28(b). Will rags used for wipe cleaning be stored in closed containers when not in use? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>28(c). Will each container be clearly labeled with its contents? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>28(d). Will spills be wiped up or otherwise removed immediately if in accessible areas and as soon as reasonably possible in all areas? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>						
<p>29. OPERATING METHODS (Read the Introductory Statement and Answer the Questions that Follow)</p> <p><i>Please note that any "No" answer to one or more of questions 29(a) through 29(j) indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<p>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></p> <p>29(a). 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</p> <p>29(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</p> <p>29(c). 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</p> <p>29(d). 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</p> <p>29(e). 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</p> <p>29(f). 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</p> <p>29(g). 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</p> <p>29(h). 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</p> <p>29(i). 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</p> <p>29(j). 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</p>						

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 to the lower right to indicate this is the case and proceed to Section D.

Section C Does Not Apply to My Facility

<p>30. EXTERNAL COMBUSTION UNITS (Read the Introductory Statement, Supply the Requested Information and Answer the Questions that Follow)</p>	<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 to the lower right and proceed to question 32.</p> <p style="text-align: right;"><input type="checkbox"/> I Do Not Operate External Combustion Units</p>																																																
<p><i>Please note that any "No" answer to one or more of questions 31(b) through 31(d) indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<p>30(a). 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: 10%;">No.</th> <th style="width: 20%;">Type (Boiler, Heater, Etc.)</th> <th style="width: 20%;">Make</th> <th style="width: 20%;">Model</th> <th style="width: 10%;">Installed or Proposed</th> <th style="width: 10%;">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> <tr> <td colspan="5" style="text-align: center;">Please sum the gross input heat ratings for all external combustion units and record the total in the box to the right:</td> <td></td> </tr> </tbody> </table>	No.	Type (Boiler, Heater, Etc.)	Make	Model	Installed or Proposed	Gross Heat Input Rating (MMBtu/hr)	1						2						3						4						5						6						Please sum the gross input heat ratings for all external combustion units and record the total in the box to the right:					
	No.	Type (Boiler, Heater, Etc.)	Make	Model	Installed or Proposed	Gross Heat Input Rating (MMBtu/hr)																																											
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Please sum the gross input heat ratings for all external combustion units and record the total in the box to the right:																																																	
<p>30(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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																																																	
<p>30(c). 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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																																																	
<p>30(d). Will the only fuels used in the external combustion equipment be natural gas, propane or butane? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																																																	
<p>31. INTERNAL COMBUSTION ENGINES (Read the Introductory Statement, Supply the Requested Information and Answer the Questions that Follow)</p>	<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 style="text-align: right;"><input type="checkbox"/> I Do Not Operate Internal Combustion Units</p>																																																
<p><i>Please note that any "No" answer to one or more of questions 32(b) through 32(d) indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<p>31(a). 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; text-align: center;"> <thead> <tr> <th style="width: 10%;">No.</th> <th style="width: 20%;">Make</th> <th style="width: 20%;">Model</th> <th style="width: 15%;">Date of Manufacture</th> <th style="width: 10%;">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> <tr> <td colspan="5" style="text-align: center;">Please sum the output power ratings for all emergency generators and record the total in the box to the right:</td> <td></td> </tr> </tbody> </table>	No.	Make	Model	Date of Manufacture	Installed or Proposed	Output Power Rating (hp)	1						2						3						4						Please sum the output power ratings for all emergency generators and record the total in the box to the right:																	
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<p>31(b). Based on the total calculated in 32(a) above, will the aggregated (total) output power rating for all internal combustion engines be less than 200 hp? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																																																	
<p>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"/> Yes <input type="checkbox"/> No</p>																																																	
<p>31(d). Will the only fuels used in the internal combustion equipment be gasoline or diesel? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																																																	

SECTION D. GASOLINE DISPENSING OPERATIONS

This section of the application (Section D) applies to gasoline fuel dispensing operations (fueling of vehicles or other equipment from a stationary gasoline tank) occurring at your facility. If this section does not apply to your facility (i.e., you do not fuel any vehicles or other equipment from a stationary gasoline tank), please mark the box to the lower right to indicate this is the case.

Section D Does Not Apply to My Facility

<p>32. GENERAL GASOLINE DISPENSING (Read the Introductory Statement, Answer the Questions that Follow and Supply the Requested Information)</p> <p><i>Please note that any "No" answer to one or more of questions 33(b) through 33(e) indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<p>Please answer the following questions regarding gasoline fuel dispensing operations occurring at your facility. Please also supply the requested information.</p> <p>32(a). What type of gasoline dispensing operation do you run? <input type="checkbox"/> Retail <input type="checkbox"/> Non-retail</p> <p>32(b). Will the annual gasoline throughput for the entire facility (total amount of gasoline to be dispensed at your facility) be less than 120,000 gallons for each and every year of operation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>32(c). Will all tanks and their fittings be vapor tight except for the outlet of a pressure/vacuum relief valve on a dispensing tank's vent pipe? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>32(d). During receiving and storage operations, will less than three (3) drops per minute leak from piping, fittings, and hoses, and will less than two (2) teaspoonfuls be lost in the course of a connect or disconnect process? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>32(e). Will the spill containment system including gaskets be kept vapor tight? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>32(f). Although not required for tanks with a throughput under 120,000 gallons per year, is the gasoline dispensing operation at your facility equipped with any of the following vapor recovery systems? <i>(Note: A Stage I Vapor Recovery System returns displaced vapors from the gasoline storage tank into the tank truck from where the liquid is loaded, and a Stage II Vapor Recovery System returns displaced vapors from the vehicle gasoline tanks back to the gasoline storage tank from where the liquid is loaded.)</i></p> <p style="text-align: center;"> <input type="checkbox"/> Stage I Vapor Recovery System <input type="checkbox"/> Stage II Vapor Recovery System <input type="checkbox"/> None </p> <p style="text-align: center; font-size: small;"> <input type="checkbox"/> 2-Point <input type="checkbox"/> Coaxial </p> <p>32(g). Please list each fuel storage tanks at your facility in the following table and supply the requested information.</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 5%;">No.</th> <th style="width: 10%;">Capacity (Gallons)</th> <th style="width: 10%;">Date of Installation</th> <th style="width: 15%;">Above Ground or Underground</th> <th style="width: 10%;">Product Stored</th> <th style="width: 10%;">Monthly Throughput (Gallons/Month)</th> <th style="width: 10%;">Annual Throughput (Gallons/Year)</th> </tr> </thead> <tbody> <tr><td>1</td><td></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><td></td></tr> <tr><td>3</td><td></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><td></td></tr> <tr><td>5</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr> <td colspan="5" style="text-align: right;">Please sum the monthly and annual throughputs for all tanks and record the totals in the boxes to the right:</td> <td></td> <td></td> </tr> </tbody> </table>	No.	Capacity (Gallons)	Date of Installation	Above Ground or Underground	Product Stored	Monthly Throughput (Gallons/Month)	Annual Throughput (Gallons/Year)	1							2							3							4							5							Please sum the monthly and annual throughputs for all tanks and record the totals in the boxes to the right:						
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<p>33. FILL PIPE CONFIGURATION (Read the Introductory Statement and Answer the Questions that Follow)</p> <p><i>Please note that any "No" answer to one or more of questions 34(a) through 34(d) indicates that operation of your air pollution source must be permitted through an alternative permitting mechanism. Please contact the Maricopa County Environmental Services Department, Air Quality Division for details (602-506-6094).</i></p>	<p>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.</p> <p>33(a). 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</p> <p>33(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</p> <p>33(c). 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</p> <p>33(d). 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</p>																																																	