INITIAL NOTIFICATION
FOR NEW & EXISTING HALOGENATED SOLVENT CLEANING MACHINES
(Applicable Rule: 40 CFR Part 63, Subpart T)

Owner/Operator/ Title						
Mailing Address						
City			State		Zip	
Facility Name						
Street Address (i.e., Physical Location)						
City			State		Zip	
Contact Person		Title			Phone	
Facility Type	Minor			Major		
Notification Type	New Construction			Reconstruction (see definition in 40 CFR § 63.2)		
List All Current Air Quality Permit/Authorization Numbers At This Facility						

Machine ID#	Machine Type¹	Solvent¹	Expected / Actual Constr / Reconstr Dates		Anticipated / Actual Initial Startup Date²	Solvent/Air Interface Area (Sq. In.)	Estimated Annual Solvent Consumption (Pounds/Year)
			Beginning	Completion			

¹For each machine, use one or more of the following codes in the appropriate columns:

Machine Type		Solvent	
B.COLD IMM - Batch Cold Immersion	B.VAPOR - Batch Vapor	MC – Methylene Chloride	111TRI - 1,1,1-Trichloroethane
	COLD IL - Cold In-line	PERC – Perchloroethylene	CTET - Carbon Tetrachloride
B.COLD RemR - Batch Cold Remote Reservoir	VAPOR IL - Vapor In-line	TCE – Trichloroethylene	CLF - Chloroform
	CON WEB - Continuous Web		

Use "OTHER" if none of the choices apply (and specify in attached description).

²For "Existing" Machines (those that commenced construction on or before 11/29/93), use actual startup date or "<11/29/93" or ">11/29/93"

Machine ID#	Control Technique(s)¹ (List All that Apply)	Existing or Planned?	Anticipated Compliance Approach¹

¹For each machine, use one or more of the following codes in the appropriate columns:

Control Technique		Compliance Approach
FR=1.0 - Freeboard Ratio ≥1.0	SH VAPOR - Super-Heated Vapor	BASIC EqS - Basic Equipment Standard (+ Work Practices)
FR=0.75 - Freeboard Ratio ≥0.75	Wk COVER - Working-Mode Cover	
WATER – Water Layer (≥1")	I COVER - Idle-Mode Cover	IDLING EmS - Idling Emission Standard (+ Work Practices)
F REF - Freeboard Refrigeration Device	DWELL - Dwell	
RRD - Reduced Room Draft	WP – Work Practices	ALT STD - Alternative Standard
CARB AD - Carbon Adsorber	NONE - None	

Certification: **This notification has been submitted as required by 40 CFR § 63.468. Based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this notification are true, accurate, and complete.**

Responsible Official (signature)			
Responsible Official (typed)		Date	
Responsible Official Title		Phone	