



Oregon Department of Environmental Quality
NOTIFICATION OF COMPLIANCE STATUS
National Emission Standards for Hazardous Air Pollutants (NESHAPS)
for Perchloroethylene Dry Cleaning Facilities
 40 CFR part 63 subpart M

Facility information: (fill out a separate form for each dry cleaning business you own)

Business Name:	Owner:
Mailing Address:	Business Address (if different than mailing address):
City, State, Zip:	City, State, Zip:

1. This facility (check only one):

- uses perchloroethylene or perc. **Go to question 2**
- is a dry cleaning drop location. **STOP HERE** and follow mailing instructions
- uses a perc alternative. **STOP HERE.** Indicate product used & follow mailing instructions
- GreenEarth DF2000™ EcoSolv® Rynex™ DrySolv Water 3M Pure-Dry
- Stoddard Solvent Other (name) _____

2. The dry cleaning facility is located in a building: (check only one)

- where people live (does not apply to short-term housing such as a hotel or motel)
- with commercial occupants only (other tenants, leased spaces or owner occupants such as a strip mall)
- with no other occupants (stand alone)

3. Annual perc usage for this facility is _____ gallons.

Area source = 2,100 gallons or less per year. Major source = more than 2,100 gallons per year

Information and Compliance Section

1. Installation date of each machine at this location (check all boxes that apply)

- Before 12/9/1991** Number of machines _____
 - Machine(s) equipped with a refrigerated condenser (RC) – required
 - Machine(s) equipped with a carbon adsorber (CA) – optional
 - Machine(s) equipped with both an RC and a CA

- 12/9/1991 to 12/20/2005** Number of machines _____
 - Machine(s) equipped with a refrigerated condenser (RC) – required

*There are no new equipment requirements for machines in either of the categories listed above.

- 12/21/2005 or later** (NOT located in a building where people live) Number of machines _____
 - Machine(s) equipped with a “non-vented” CA in addition to the RC – required (must be verifiable)
 - Non-vented CA desorbed accord to manufacturer’s instructions - required
 - Machine(s) not equipped with a non-venting CA (must comply immediately)

- 12/21/2005 to 7/12/2006** and located in a building where people live. Number of machines _____
- Machine(s) equipped with a “non-vented” CA in addition to the RC **and** machine(s) inside vapor barrier enclosure with exhaust system – required (must be verifiable)
 - Non-vented CA desorbed accord to manufacturer’s instructions – required
 - Enclosure exhaust system on during machine operation and maintenance – required (must be verifiable)
 - Machine(s) not equipped with a “non-vented” CA **and** not inside a vapor barrier enclosure (must comply immediately)

2. DEQ’s Dry Cleaner Program (check all that apply)

- My facility is part of Oregon DEQ’s Dry Cleaner Program
- I received (after training and certification) a TIF Model XP-1A Halogenated Leak Detector and am using it for weekly leak detection of perc – required (must be verifiable)

4. Signature

<p><i>I certify that this facility is not a major source. The information contained in this report is accurate and true to the best of my knowledge and that this plant is in compliance with all applicable control device and monitoring requirements listed in the following regulations:</i></p> <ul style="list-style-type: none"> • 40 CFR Part 63, Subpart M – National Emission Standards for Hazardous Air Pollutants (NESHAP) for Perchloroethylene Dry Cleaning Facilities (July 27, 2006 Final Rule). • Oregon Administrative Rule (OAR) 340, division 244-0220 and • OAR 340 Division 124 	
*Name of responsible official:	Title of official and phone number:
Signature of responsible official:	Date:

*A responsible official can be:

- The president, vice president, secretary, or treasurer of the company that owns the dry cleaning facility;
- The owner of the facility;
- The manager of the facility;
- A government official, if the facility is owned by Federal, State, City, or County government;
- A ranking military office, if the facility is located at a military base.

Mail or fax signed copy to:

**Department of Environmental Quality
 ATTN: Rebecca Hillwig, Air Quality
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 Portland, OR 97204**

Fax: 503-229-5675