



**Notification of Compliance Status
National Emission Standards for Hazardous Air Pollutants
For Chemical Manufacturing Area Sources
40 CFR Part 63 Subpart VVVVVV**

1. Company Information:

Legal Name:	Facility name (if different than legal name):
Mailing address:	Facility address (if different than mailing address):
City, state, zip code:	City, state, zip code:
Source category/NAICS code:	Source ID:

2. Site Contact Person:

Name:	Telephone number:
Title:	Email address:

3. Appropriate compliance date and notification of compliance status due dates for the facility:

Type of Affected Source	Compliance Date	Date NOCS is Due
<input type="checkbox"/> Existing Source	March 21, 2013	If a performance test is required to demonstration compliance, the notification must be sent before close of business on the 60 th day following completion of the performance test.
<input type="checkbox"/> New Source	New affected sources that started up on or before October 29, 2009: October 29, 2009	
	New affected sources that started up after October 29, 2009: Upon startup of affected source Specify startup date: _____	If opacity or visible emission observations are required to demonstrate compliance, the notification of compliance shall be sent before close of business on the 30 th day following completion of opacity or visible emission observations.

4. Description of Operation:

<input type="checkbox"/>	This facility uses, produces, or generates a Table 1 organic HAP: 1,3-butadiene, 1,3-dichloropropene, acetaldehyde, chloroform, ethylene dichloride, hexachlorobenzene, methylene chloride, or quinoline.
<input type="checkbox"/>	This facility uses, produces, or generates a Table 1 metal HAP: arsenic compounds, cadmium compounds, chromium compounds, lead compounds, manganese compounds, nickel compounds.
<input type="checkbox"/>	This facility uses, produces, or generates hydrazine.

5. HAP emissions (reported in units and averaging times and in accordance with the test methods specified in the standards):

HAP	Emissions	Units	Averaging Times

6. Emission sources at the facility:

<input type="checkbox"/>	Batch process vents	<input type="checkbox"/>	Bottoms receivers and/or surge control vessels
<input type="checkbox"/>	Continues process vents	<input type="checkbox"/>	Wastewater
<input type="checkbox"/>	Halogenated process vents	<input type="checkbox"/>	Transfer operations equipment (valves, pumps, compressors)
<input type="checkbox"/>	Storage vessels	<input type="checkbox"/>	Heat exchange systems

7. Brief description of operation (i.e., nature, size, design, and method of operation of the source):

8. If complying with the alternative standard as specified in Table 2 to the NESHAP for batch process vents, include the information specified in 40 CFR 63.1258(b)(5), as applicable. Include the information below or as an attachment.

Process	Monitored Parameter	Monitoring Device	Established Parameter Level		Monitored Parameter Level	
			Value(s)	Units	Value(s)	Units

9. If complying with the alternative standard as specified in Table 3 to the NESHAP for continuous process vents, provide the information specified in 40 CFR 63.1258(b)(5), as applicable. Either provide the information below or as an attachment.

Process	Monitored Parameter	Monitoring Device	Established Parameter Level		Monitored Parameter Level	
			Value(s)	Units	Value(s)	Units

10. If you established an operating limit for a parameter that will not be monitored continuously in accordance with 40 CFR 63.11496(g)(4) and 63.2450(k)(6), provide the information as specified in 40 CFR 63.11496(g)(4) and 63.2450(k)(6). Provide the information below or as an attachment.

Process	Operating Limit/Parameter	Measurement Frequency	Established Parameter Level		Monitored Parameter Level	
			Value(s)	Units	Value(s)	Units

11. List all transferred liquids that are reactive or resinous materials, as defined in 40 CFR 63.11502(b).

Liquid	Reactive or Resinous

12. If subject to 40 CFR Part 63 Subpart VVVVVV and another Federal standard (as described in 40 CFR 63.11500) and complying with the alternative standard as specified in Table 2 or Table 3 of 40 CFR Part 63 Subpart VVVVVV, provide a description of the alternative standard with which you will comply. The alternative standards must be at least as stringent as the corresponding requirements in 40 CFR Part 63 subpart VVVVVV.

13. Compliance Certification

<input type="checkbox"/>	This facility complies with the management practices in 40 CFR 63.11495.
<input type="checkbox"/>	This facility complies with the requirements in 40 CFR 63.11496 for HAP emissions from process vents.
<input type="checkbox"/>	This facility complies with the requirements in 40 CFR 63.11496 and 63.11497 for surge control vessels, bottoms receivers, and storage tanks.
<input type="checkbox"/>	This facility complies with the requirements in 40 CFR 63.11498 to treat wastewater streams.
<input type="checkbox"/>	This facility complies with the requirements in 40 CFR 63.11499 for heat exchange systems.
<input type="checkbox"/>	I certify that my facility has complied with all the relevant standards and other requirements of 40 CFR Part 63 Subpart VVVVVV.

I certify that the information presented here is true, accurate, and complete to the best of my knowledge.

Signature:	Date:
Name:	Telephone Number:
Title:	Email Address: