

**Application for Basic Air Contaminant Discharge Permit
Surface Coating Operations**

**Form AQB-007
Application**

DEQ Use Only		
Permit number:	Regional office:	
Application No:	Check number:	
New <input type="checkbox"/> Renewal <input type="checkbox"/>	Amount (\$):	Date Received:
Staff initials:	Approved date:	

1. Company information:

Legal Name:			Other company name (if different from legal name):		
Mailing Address:			Site Address (if different than mailing address):		
City:	State:	Zip Code:	City:	County (required):	Zip Code:
Standard Industrial Classification (SIC)			Number of employees:		

2. Number of gallons of VOC containing coatings used per month: _____

3. Has the facility received any air quality/nuisance complaints within the last calendar year?
 Yes (explain): No:

4. Does the facility have paint booths with filters? Yes: No: If yes, how many? _____

5. Do you apply surface coatings outdoors? Yes: No:

6. A Land Use Compatibility Statement [LUCS](#) must be submitted with applications for new permits.

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7. Signature	
I hereby certify that the information contained in this application is true and correct to the best of my knowledge.	
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Name of official (Printed or Typed)	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Title of official and phone number
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Signature of official	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Date

Fee Information (Make checks payable to DEQ)

OAR 340-216-8020	New Permits	Permit Renewals
Initial permit application fee (Table 2, Part 1)	\$180.00	\$0.00
Annual fee (Table 2, Part 2)	\$648.00	\$0.00
Annual Cleaner Air Oregon fee	\$156.00	\$0.00
Total Fees	\$984.00	\$0.00

Submit two copies of the completed application to one of the following addresses:

New or Modified Permits (include fees)
Oregon Department of Environmental Quality Financial Services – Revenue Section 700 NE Multnomah St., Suite 600 Portland, OR 97232 - 4100
Permit Renewals (no fees) Select County:
Oregon Department of Environmental Quality

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**Form AQB-007
 Contact Sheet**

1. Company Information:

Legal Name:	Other company name (if different from legal name):
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2. Site Contact Person: (A person who deals with DEQ staff about equipment problems.)

First Name:	Last Name:	Telephone number:	Fax:
Title:		Email address:	
Mailing address:		City, State, Zip Code	

3. Facility Contact Person: (If other than the site contact person, a person involved with all environmental issues at the facility although they may be housed at a different site.)

First Name:	Last Name:	Telephone number:	Fax:
Title:		Email address:	
Mailing address:		City, State, Zip Code	

4. Mailing Contact Person: (If other than the site contact person, a person to whom the company would like all agency communications directed.)

First Name:	Last Name:	Telephone number:	Fax:
Title:		Email address:	
Mailing address:		City, State, Zip Code	

5. Invoice Contact Person: (If other than the site contact person, a contact to which invoices and communications related to resolving invoice questions can be directed.)

First Name:	Last Name:	Telephone number:	Fax:
Title:		Email address:	
Mailing address:		City, State, Zip Code	