



# Application for General Air Contaminant Discharge Permits and Permit Attachments

## Paint Stripping

FOR DEQ USE ONLY		
Source Number:	Regional Office:	Initial assignment
Application No:	Check number:	Re-assignment
Date Received :	Amount (\$):	

### 1. Company information:

Legal Name:	Other company name (if different than legal name):
Mailing Address:	Site Address (if different than mailing address):
City, State, Zip Code:	City, County, Zip Code:
North American Industry Classification System (NAICS):	Number of Employees:

### 2. General permit assignment:

<input type="checkbox"/>	General permit - paint stripping using methylene chloride for the removal of dried paint (including, but not limited to, paint, enamel, varnish, shellac, and lacquer) from wood, metal, plastic, or other substrates.	Annual Fee
Submit the following fee with your application.		\$864

### 3. General permit attachment:

<input type="checkbox"/> Yes	Are you currently assigned to a General Air Contaminant Discharge Permit for other non-paint stripping activities at your facility? If so, you may be assigned an attachment to your existing General Permit. Existing source number: _____
<input type="checkbox"/> No	

### 4. Signature:

<i>I hereby apply for permission to discharge air contaminants in the State of Oregon, as stated or described in this application, and certify that the information contained in this application are true and correct to the best of my knowledge and belief.</i>	
Name of official (Printed or Typed):	Title of official and phone number:
Signature of official:	Date:

**Submit two copies of the completed application, A Land Use Compatibility Statement and the applicable Annual Fee to:**

Oregon Department of Environmental Quality  
Financial Services - Revenue Section  
700 NE Multnomah St., Suite 600  
Portland, OR 97232-4100

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Paint Stripping

Form AQGP-128

## Contact Sheet

### 1. Company Information:

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

Name:	Telephone number:
Title:	Email address:

### 3. Facility Contact Person: *(A person involved with all environmental issues at the facility although they may be housed at a different site.)*

Name:	Telephone number:
Title:	Email address:

### 4. Mailing Contact Person: *(A person to whom the company would like all agency communications directed.)*

Name:	Telephone number:
Title:	Email address:

### 5. Invoice Contact Person: *(Valid contact information to whom invoices and communications related to resolving invoice questions can be directed.)*

Name:	Telephone number:
Title:	Email address: