



Notice of Compliance Status
National Perchloroethylene Air Emission Standards for Dry Cleaning Facilities
(40 CFR Part 63 – Subpart M)

Must be mailed to NMED Air Quality Bureau within 30 days after startup

Facility Owner/Operator and Facility Name/Location Information

1. Name and Address of the Owner/Operator

If you own more than one facility (plant), then fill out a separate form for each facility.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Name of facility and the physical address location (if different than above).

Name of Facility: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Facility Specific Information

Please answer the following questions by checking the appropriate box or completing the appropriate blank:

1. Which type of facility best describes where your facility is located? (check only one):

- In a building with residences, even if currently unoccupied
(A residential building where people live/reside)
- In a building with other commercial occupants
(A non-residential, commercial building with other business tenants)
- In a building with no other occupants
(A stand-alone building with no other commercial tenants)

2. Is your perchloroethylene (perc) dry cleaning facility a Major or an Area Source of hazardous air pollutants? (check only one):

- Major Source of hazardous air pollutants
(Facilities that purchase more than 2,100 gallons of perc annually)
- Area Source of hazardous air pollutants
(Facilities that purchase 2,100 gallons or less of perc annually)

3. Facility's yearly perc consumption based on the total volume of perc that was purchased in each of the previous 12 months and calculated according to 40 CFR 63.323(d):

_____ gallons of perc purchased per year

4. Are you in compliance with all requirements of 40 CFR 63.322? Yes No

Certification

The Responsible Official must certify below that all the information presented in this notification is accurate and true. A Responsible Official can be:

- A president, vice president, secretary, or treasurer of the corporation of the dry cleaning facility;
- An owner or general partner of the dry cleaning facility;
- A manager of the dry cleaning facility; or
- A principal executive officer or ranking official of a dry cleaning facility owned by a Federal, State, County, municipality, or other public agency.

I certify the information contained in this report to be accurate and true to the best of my knowledge and that this facility is in compliance with all applicable control device, monitoring, and other requirements found in 40 CFR 63.322.

Signature of Responsible Official: _____

Date: _____

Printed Name of Responsible Official: _____

Title: _____

Please send the original to:

**New Mexico Environment Department
Air Quality Bureau
525 Camino de los Marquez, Suite 1
Santa Fe, New Mexico, 87505-1816**

Remember to retain a copy for your files