

Notification of Compliance Status
Paint Stripping and Miscellaneous Surface Coating Operations
Area Source Rule
40 CFR Part 63 Subpart HHHHHH (63.11169 – 63.11180)



If you are the owner or operator of a new source, then you are required to certify in the initial notification whether the source is in compliance with each of the requirements of Subpart HHHHHH. If you are the owner or operator of any existing source and did not certify in the initial notification that your source is already in compliance, then you must submit a notification of compliance status.

☐ Yes, I am subject to 40 CFR Part 63, Subpart HHHHHH, National Emission Standards for Hazardous Air Pollutants: Paint Stripping and Miscellaneous Surface Coating Operations at Area Source; Final Rule.

1. Company Name _____

2. Information about the owner:

- a. Owner's name and title: _____
- b. Owner's street address: _____
(Street, City, State, and Zip code)
- c. Owners telephone number: _____ email (if available) _____
- d. Is the operator the same as the owner? ☐ Yes ☐ No
- e. If the operator's information is different, please provide the information in section 3. (If there are other operator's attach a list with the same information being asked for below).

3. Information about the operator:

- a. Operator's name and title: _____
- b. Operator's street address: _____
(Street, City, State, and Zip code)
- c. Operator's telephone number: _____ email (if available) _____
- d. Is there any other certifying company official that will sign this form? ☐ Yes ☐ No
- e. If the certifying official information is different, please provide the information in section 4.

4. Information about the certifying official:

- a. Certifying official's name and title: _____
- b. Certifying official's street address: _____
(Street, City, State, and Zip code)
- c. Certifying official's telephone number: _____ email (if available) _____

5. Physical address of the affected source:

- a. Address: _____
(Street, City, State, and Zip code)
- b. Are the compliance records located at the same location? ☐ Yes ☐ No
- c. If the location of compliance records is different please provide the street address: _____
(Street, City, State, and Zip code)
- d. Is the source a motor vehicle or mobile equipment surface coating operation that repairs vehicles at the customer's location, rather than at a fixed location? ☐ Yes ☐ No

6. Type of Surface Coating Operation:

- a. I am a (check all that apply): ☐ Motor Vehicle or Mobile Equipment Surface Coating Operation
☐ Miscellaneous Surface Coating Operation
- b. Number of spray booths: _____
- c. Number of preparation stations: _____
- d. Number of painters usually employed: _____

7. Paint Stripping Description (if applicable)

- a. Methods used (check all that apply):
☐ Chemical stripping ☐ Mechanical stripping ☐ Other (please describe) _____
- b. Substrates stripped (check all that apply):
☐ Wood ☐ Plastic ☐ Metal ☐ Other (please describe) _____
- c. Do you plan to use more than 1 ton of Methylene Chloride (MeCl) annually?
- ☐ No
- ☐ Yes, I certify I have developed and am implementing a written methylene chloride minimization plan in accordance with 40 CFR § 63.11173(b).

8. Compliance Status

For paint stripping operations, the relevant requirements that you must evaluate in making this determination are specified in 40 CFR Part 63 Subpart HHHHHH (63.11173(a) through (d) of this subpart).

For surface coating operations, the relevant requirements are specified in 40 CFR Part 63 Subpart HHHHHH (63.11173(e) through (g) of this subpart).

- ☐ I am in compliance with all the relevant requirements.

Date of the Notice of Compliance Status _____

9. Certification of Compliance Status

I certify the truth, accuracy, and completeness of this notification. The source has complied with all the relevant standards of this subpart.

Note: The responsible official may certify below as long as their information is included on this form.

Print Name of responsible official: _____

Signature of responsible official: _____

Check one or both boxes if you are the: ☐ owner ☐ operator

Submit Notification to:

New Mexico Air Quality Bureau
Compliance Reporting
525 Camino de los Marquez, Suite 1
Santa Fe, New Mexico, 87505-1816

Keep a copy for your records.