NESHAP for Metal Fabrication and Finishing 40 CFR Part 63, Subpart XXXXXX

State of North Carolina

NOTIFICATION FORM

FACILITY INFORMATION:
Facility Name: Facility ID: Facility Owner/Operator: Facility Address:
APPLICABLE STANDARD: Metal Fabrication and Finishing (NESHAP Subpart XXXXXX)
Facility Compliance Date: July 25, 2011 (existing sources) OR upon startup (new sources)
Is your facility a major source of HAPs? (check one)
☐ Yes. My facility is a major source of HAPs.
☐ No. My facility is an area source of HAPs
Note: A major source is a facility that emits or had the potential to emit greater than 10 tons per year of any one HAP or 25 tons per year of multiple HAPs. All other sources are area sources.
Is your facility subject to Subpart XXXXXX? (check one)
☐ I am unsure of my status and would like additional information
□ Yes
□ No (Please explain)
SOURCE DESCRIPTION
Briefly describe the source. (section 63.9(b)(2)(iv))

<u>SIGNATURE</u>		
Signature of Responsible Person or	Company Official:	
	Date:	
(Print):	Title:	
Return this form to:		
Detrial: Kennylana		

Patrick Knowlson NC Division of Air Quality 1641 Mail Service Center Raleigh, NC 27699-1641

If you have questions about this form, please contact Patrick Knowlson via phone at (919) 715-0659 or via e-mail at patrick.knowlson@ncdenr.gov