



ILLINOIS ENVIRONMENTAL PROTECTION AGENCY
 DIVISION OF AIR POLLUTION CONTROL -- PERMIT SECTION
 P.O. BOX 19506
 SPRINGFIELD, ILLINOIS 62794-9506

FOR APPLICANT'S USE

Revision #: _____
 Date: ____ / ____ / ____
 Page _____ of _____
 Source Designation: _____

SOLVENT CLEANING COLD CLEANER	FOR AGENCY USE ONLY
	ID NUMBER:
	EMISSION POINT #:
	DATE:

SOURCE INFORMATION	
1) SOURCE NAME:	
2) DATE FORM PREPARED:	3) SOURCE ID NO. (IF KNOWN):

GENERAL INFORMATION	
4) NAME OF EMISSION UNIT:	
5) NAME OF PROCESS:	
6) DESCRIPTION OF PROCESS:	
7) DESCRIPTION OF ITEM OR MATERIAL PRODUCED OR ACTIVITY ACCOMPLISHED:	
8) FLOW DIAGRAM DESIGNATION OF EMISSION UNIT:	
9) MANUFACTURER OF EMISSION UNIT:	
10) MODEL NUMBER:	11) SERIAL NUMBER:
12) DATES OF COMMENCING CONSTRUCTION, OPERATION AND/OR MOST RECENT MODIFICATION OF THIS EMISSION UNIT (ACTUAL OR PLANNED)	a) CONSTRUCTION (MONTH/YEAR):
	b) OPERATION (MONTH/YEAR):
	c) LATEST MODIFICATION (MONTH/YEAR):
13) DESCRIPTION OF MODIFICATION (IF APPLICABLE):	

THIS AGENCY IS AUTHORIZED TO REQUIRE THIS INFORMATION UNDER ILLINOIS REVISED STATUTES, 1991, AS AMENDED 1992, CHAPTER 111 1/2, PAR. 1039.5. DISCLOSURE OF THIS INFORMATION IS REQUIRED UNDER THAT SECTION. FAILURE TO DO SO MAY PREVENT THIS FORM FROM BEING PROCESSED AND COULD RESULT IN THE APPLICATION BEING DENIED. THIS FORM HAS BEEN APPROVED BY THE FORMS MANAGEMENT CENTER.

APPLICATION PAGE _____

Printed on Recycled Paper
367-CAAPP

FOR APPLICANT'S USE

14) DOES THE EMISSION UNIT HAVE MORE THAN ONE MODE OF OPERATION? YES NO

IF YES, EXPLAIN AND IDENTIFY WHICH MODE IS COVERED BY THIS FORM (NOTE: A SEPARATE SOLVENT CLEANING FORM 367-CAAPP MUST BE COMPLETED FOR EACH MODE):

15) PROVIDE THE NAME AND DESIGNATION OF ALL AIR POLLUTION CONTROL EQUIPMENT CONTROLLING THIS EMISSION UNIT, IF APPLICABLE (FORM 260-CAAPP AND THE APPROPRIATE 260-CAAPP ADDENDUM FORM MUST BE COMPLETED FOR EACH ITEM OF AIR POLLUTION CONTROL EQUIPMENT):

16) WILL EMISSIONS DURING STARTUP EXCEED EITHER THE ALLOWABLE EMISSION RATE PURSUANT TO A SPECIFIC RULE, OR THE ALLOWABLE EMISSION LIMIT AS ESTABLISHED BY AN EXISTING OR PROPOSED PERMIT CONDITION? YES NO

IF YES, COMPLETE AND ATTACH FORM 203-CAAPP, "REQUEST TO OPERATE WITH EXCESS EMISSIONS DURING STARTUP OF EQUIPMENT".

17) PROVIDE ANY LIMITATIONS ON SOURCE OPERATION AFFECTING EMISSIONS OR ANY WORK PRACTICE STANDARDS (E.G., ONLY ONE UNIT IS OPERATED AT A TIME):

OPERATING INFORMATION

18) ATTACH THE CALCULATIONS, TO THE EXTENT THEY ARE AIR EMISSION RELATED, FROM WHICH THE FOLLOWING OPERATING INFORMATION, MATERIAL USAGE INFORMATION AND FUEL USAGE DATA WERE BASED AND LABEL AS EXHIBIT 367-1. REFER TO SPECIAL NOTES OF FORM 202-CAAPP.

19a) MAXIMUM OPERATING HOURS	HOURS/DAY:	DAYS/WEEK:	WEEKS/YEAR:
b) TYPICAL OPERATING HOURS	HOURS/DAY:	DAYS/WEEK:	WEEKS/YEAR:
20) ANNUAL THROUGHPUT	DEC-FEB(%):	MAR-MAY(%):	JUN-AUG(%):

MATERIAL USAGE INFORMATION

21) RAW MATERIALS	MAXIMUM RATES		TYPICAL RATES	
	LBS/HR	TONS/YEAR	LBS/HR	TONS/YEAR

APPLICABLE RULES

22) PROVIDE ANY SPECIFIC EMISSION STANDARD(S) AND LIMITATION(S) SET BY RULE(S) WHICH ARE APPLICABLE TO THIS EMISSION UNIT (E.G., VOM, IAC 218.183, OPERATING PROCEDURES):

REGULATED AIR POLLUTANT(S)	EMISSION STANDARD(S)	REQUIREMENT(S)

23) PROVIDE ANY SPECIFIC RECORDKEEPING RULE(S) WHICH ARE APPLICABLE TO THIS EMISSION UNIT:

REGULATED AIR POLLUTANT(S)	RECORDKEEPING RULE(S)	REQUIREMENT(S)

24) PROVIDE ANY SPECIFIC REPORTING RULE(S) WHICH ARE APPLICABLE TO THIS EMISSION UNIT:

REGULATED AIR POLLUTANT(S)	REPORTING RULE(S)	REQUIREMENT(S)

25) PROVIDE ANY SPECIFIC MONITORING RULE(S) WHICH ARE APPLICABLE TO THIS EMISSION UNIT:

REGULATED AIR POLLUTANT(S)	MONITORING RULE(S)	REQUIREMENT(S)

26) PROVIDE ANY SPECIFIC TESTING RULES AND/OR PROCEDURES WHICH ARE APPLICABLE TO THIS EMISSION UNIT :

REGULATED AIR POLLUTANT(S)	TESTING RULE(S)	REQUIREMENT(S)

27) DOES THE EMISSION UNIT QUALIFY FOR AN EXEMPTION FROM AN OTHERWISE APPLICABLE RULE?

YES NO

IF YES, THEN LIST BOTH THE RULE FROM WHICH IT IS EXEMPT AND THE RULE WHICH ALLOWS THE EXEMPTION. PROVIDE A DETAILED EXPLANATION JUSTIFYING THE EXEMPTION. INCLUDE DETAILED SUPPORTING DATA AND CALCULATIONS. ATTACH AND LABEL AS EXHIBIT 367-2, OR REFER TO OTHER ATTACHMENT(S) WHICH ADDRESS AND JUSTIFY THIS EXEMPTION.

COMPLIANCE INFORMATION

28) IS THE EMISSION UNIT IN COMPLIANCE WITH ALL APPLICABLE REQUIREMENTS?:

YES NO

IF NO, THEN FORM 294-CAAPP "COMPLIANCE PLAN/SCHEDULE OF COMPLIANCE -- ADDENDUM FOR NONCOMPLYING EMISSION UNITS" MUST BE COMPLETED AND SUBMITTED WITH THIS APPLICATION.

29) EXPLANATION OF HOW INITIAL COMPLIANCE IS TO BE, OR WAS PREVIOUSLY, DEMONSTRATED:

30) EXPLANATION OF HOW ONGOING COMPLIANCE WILL BE DEMONSTRATED:

OPERATING AND EQUIPMENT REQUIREMENTS

THIS COLD CLEANER MUST BE OPERATED ACCORDING TO THE PROCEDURES SPECIFIED IN 35 ILL. ADM. CODE 218.182, 219.182 OR 215.182, DEPENDING UPON THE LOCATION OF THE PLANT.

31a) ARE WASTE SOLVENTS STORED IN CLOSED CONTAINERS?

YES NO

b) ARE THEY DISPOSED OF IN SUCH A MANNER THAT NO MORE THAN 20% OF THE WASTE SOLVENT (BY WEIGHT) IS ALLOWED TO EVAPORATE INTO THE ATMOSPHERE?

YES NO

IF NO OR YES, EXPLAIN:

32a) IS THE DEGREASER EQUIPPED WITH A COVER? IF YES, IS IT DESIGNED TO BE EASILY OPERATED WITH ONE HAND OR WITH THE MECHANICAL ASSISTANCE OF SPRINGS, COUNTER-WEIGHTS OR A POWERED SYSTEM?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
b) IS IT CLOSED WHEN PARTS ARE NOT BEING HANDLED?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
c) IS THE SOLVENT LEFT STILL AND NOT AGITATED?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
d) IS THE SOLVENT MAINTAINED AT OR BELOW AMBIENT ROOM TEMPERATURE AND NOT HEATED?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
33a) IS THE DEGREASER EQUIPPED WITH AN INTERNAL FACILITY FOR DRAINING CLEANED PARTS? IF YES, IS THIS SYSTEM CONSTRUCTED SO THAT PARTS ARE ENCLOSED UNDER THE COVER WHILE DRAINING?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
b) IS IT EQUIPPED WITH AN EXTERNAL DRAINAGE FACILITY? IF YES, IS THE EXTERNAL DRAINAGE FACILITY CONSTRUCTED SO THAT PARTS ARE ENCLOSED UNDER THE COVER WHILE DRAINING?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF NO, IS THIS BECAUSE AN INTERNAL DRAINAGE FACILITY WOULD NOT FIT INTO THE CLEANING SYSTEM?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
c) ARE PARTS DRAINED UNTIL DRIPPING CEASES?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
34a) IS THE SOLVENT MAINTAINED AT OR BELOW 120 DEGREES FAHRENHEIT?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
b) IS THE SOLVENT MAINTAINED AT OR BELOW ITS BOILING POINT?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
35) IS THE DEGREASER EQUIPPED WITH ONE OF THE FOLLOWING: a) A FREEBOARD HEIGHT OF 7/10 OF THE INSIDE WIDTH OF THE TANK OR 36 INCHES, WHICHEVER IS LESS?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
b) ANY OTHER SYSTEM OF EQUIVALENT EMISSION CONTROL AS APPROVED BY THE AGENCY AND FURTHER PROCESSED CONSISTENT WITH SECTION 218.108 OR 219.108? IF YES, DESCRIBE THE EMISSION CONTROL SYSTEM AND COMPLETE FORM CAAPP-260.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
36) IS A PERMANENT CONSPICUOUS LABEL SUMMARIZING THE OPERATING PROCEDURES AFFIXED TO THE DEGREASER?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
37) IF A SOLVENT SPRAY IS USED, IS THE DEGREASER EQUIPPED WITH A SOLID FLUID STREAM SPRAY, RATHER THAN A FINE, ATOMIZED OR SHOWER SPRAY?	<input type="checkbox"/> NA	<input type="checkbox"/> YES <input type="checkbox"/> NO

TESTING, MONITORING, RECORDKEEPING AND REPORTING

38a) LIST THE PARAMETERS THAT RELATE TO AIR EMISSIONS FOR WHICH RECORDS ARE BEING MAINTAINED TO DETERMINE FEES, RULE APPLICABILITY OR COMPLIANCE. INCLUDE THE UNIT OF MEASUREMENT, THE METHOD OF MEASUREMENT, AND THE FREQUENCY OF SUCH RECORDS (E.G., HOURLY, DAILY, WEEKLY):

PARAMETER	UNIT OF MEASUREMENT	METHOD OF MEASUREMENT	FREQUENCY

b) BRIEFLY DESCRIBE THE METHOD BY WHICH RECORDS WILL BE CREATED AND MAINTAINED. FOR EACH RECORDED PARAMETER INCLUDE THE METHOD OF RECORDKEEPING, TITLE OF PERSON RESPONSIBLE FOR RECORDKEEPING, AND TITLE OF PERSON TO CONTACT FOR REVIEW OF RECORDS:

PARAMETER	METHOD OF RECORDKEEPING	TITLE OF PERSON RESPONSIBLE	TITLE OF CONTACT PERSON

c) IS COMPLIANCE OF THE EMISSION UNIT READILY DEMONSTRATED BY REVIEW OF THE RECORDS? YES NO

IF NO, EXPLAIN:

d) ARE ALL RECORDS READILY AVAILABLE FOR INSPECTION, COPYING AND SUBMITTAL TO THE AGENCY UPON REQUEST? YES NO

IF NO, EXPLAIN:

39a) DESCRIBE ANY EMISSION MONITORS USED TO DETERMINE FEES, RULE APPLICABILITY OR COMPLIANCE, INCLUDING ANY OPACITY AND OXYGEN/CO₂ ANALYZERS:

39b) WHAT PARAMETER(S) IS(ARE) BEING MONITORED?

c) DESCRIBE THE LOCATION OF EACH MONITOR (E.G., IN STACK MONITOR):

d) IS EACH MONITOR EQUIPPED WITH A RECORDING DEVICE? YES NO
IF NO, LIST ALL MONITORS WITHOUT A RECORDING DEVICE:

e) IS EACH MONITOR REVIEWED FOR ACCURACY ON AT LEAST A QUARTERLY BASIS? YES NO
IF NO, EXPLAIN:

f) IS EACH MONITOR OPERATED AT ALL TIMES THE ASSOCIATED EMISSION UNIT IS IN OPERATION? YES NO
IF NO, EXPLAIN:

40) PROVIDE INFORMATION ON THE MOST RECENT TESTS, IF ANY, IN WHICH THE RESULTS ARE USED FOR PURPOSES OF THE DETERMINATION OF FEES, RULE APPLICABILITY OR COMPLIANCE. INCLUDE THE TEST DATE, TEST METHOD USED, TESTING COMPANY, OPERATING CONDITIONS EXISTING DURING THE TEST AND A SUMMARY OF RESULTS. IF ADDITIONAL SPACE IS NEEDED, ATTACH AND LABEL AS EXHIBIT 367-3:

TEST DATE	TEST METHOD	TESTING COMPANY	OPERATING CONDITIONS	SUMMARY OF RESULTS

41) DESCRIBE ALL REPORTING REQUIREMENTS AND PROVIDE THE TITLE AND FREQUENCY OF REPORT SUBMITTALS TO THE AGENCY:

REPORTING REQUIREMENTS	TITLE OF REPORT	FREQUENCY

(42)EMISSION INFORMATION

REGULATED AIR POLLUTANT		<input type="checkbox"/> ¹ ACTUAL EMISSION RATE <input type="checkbox"/> ¹ UNCONTROLLED EMISSION RATE					ALLOWABLE BY RULE EMISSION RATE			² PERMITTED EMISSION RATE	
		LBS PER HOUR (LBS/HR)	TONS PER YEAR (TONS/YR)	³ OTHER TERMS	³ OTHER TERMS	⁴ DM	⁵ RATE (UNITS)	APPLICABLE RULES	TONS PER YEAR (TONS/YR)	RATE (UNITS)	TONS PER YEAR (TONS/YR)
CARBON MONOXIDE (CO)	MAXIMUM:						()				
	TYPICAL:						()				
LEAD	MAXIMUM:						()				
	TYPICAL:						()				
NITROGEN OXIDES (NOx)	MAXIMUM:						()				
	TYPICAL:						()				
PARTICULATE MATTER (PART)	MAXIMUM:						()				
	TYPICAL:						()				
PARTICULATE MATTER <= 10 MICROMETERS (PM10)	MAXIMUM:						()				
	TYPICAL:						()				
SULFUR DIOXIDE (SO2)	MAXIMUM:						()				
	TYPICAL:						()				
VOLATILE ORGANIC MATERIAL (VOM)	MAXIMUM:						()				
	TYPICAL:						()				
OTHER, SPECIFY:	MAXIMUM:						()				
	TYPICAL:						()				
EXAMPLE: PARTICULATE MATTER	MAXIMUM:	5.00	21.9	0.3 GR/DSCF		1	6.0 (LBS/HR)	212.321	26.28	5.5 LBS/HR	22
	TYPICAL:	4.00	14.4	0.24 GR/DSCF		4	5.5 (LBS/HR)	212.321	19.80		

IMPORTANT: ATTACH CALCULATIONS, TO THE EXTENT THEY ARE AIR EMISSIONS RELATED, ON WHICH EMISSIONS WERE DETERMINED AND LABEL AS EXHIBIT 367-4.

- ¹CHECK UNCONTROLLED EMISSION RATE BOX IF CONTROL EQUIPMENT IS USED, OTHERWISE CHECK AND PROVIDE THE ACTUAL EMISSION RATE TO ATMOSPHERE, INCLUDING INDOORS. SEE INSTRUCTIONS.
- ²PROVIDE THE EMISSION RATE THAT WILL BE USED AS A PERMIT SPECIAL CONDITION. THIS LIMIT WILL BE USED TO DETERMINE THE PERMIT FEE.
- ³PLEASE PROVIDE ANY OTHER EMISSION RATE WHICH IS COMMONLY USED, REQUIRED BY A SPECIFIC LIMITATION OR THAT WAS MEASURED (E.G. PPM, GR/DSCF, ETC.)
- ⁴DM - DETERMINATION METHOD: 1) STACK TEST, 2) MATERIAL BALANCE, 3) STANDARD EMISSION FACTOR (AP-42 OR AIRS), 4) ENGINEERING ESTIMATE, 5) SPECIAL EMISSION FACTOR (NOT AP-42 OR AIRS)
- ⁵RATE - ALLOWABLE EMISSION RATE SPECIFIED BY MOST STRINGENT APPLICABLE RULE.

APPLICATION PAGE _____

(43) HAZARDOUS AIR POLLUTANT EMISSION INFORMATION

HAP INFORMATION		<input type="checkbox"/> ¹ ACTUAL EMISSION RATE <input type="checkbox"/> ¹ UNCONTROLLED EMISSION RATE				ALLOWABLE BY RULE	
NAME OF HAP EMITTED	² CAS NUMBER	POUNDS PER HOUR (LBS/HR)	TONS PER YEAR (TONS/YR)	³ OTHER TERMS	⁴ DM	⁵ RATE OR STANDARD	APPLICABLE RULE
		MAXIMUM:					
		TYPICAL:					
		MAXIMUM:					
		TYPICAL:					
		MAXIMUM:					
		TYPICAL:					
		MAXIMUM:					
		TYPICAL:					
		MAXIMUM:					
		TYPICAL:					
		MAXIMUM:					
		TYPICAL:					
		MAXIMUM:					
		TYPICAL:					
		MAXIMUM:					
		TYPICAL:					
<i>EXAMPLE:</i> <i>Benzene</i>	<i>71432</i>	MAXIMUM:	<i>10.0</i>	<i>1.2</i>		<i>2</i>	
		TYPICAL:	<i>8.0</i>	<i>0.8</i>		<i>2</i>	
						<i>98% by wt control device leak-tight trucks</i>	<i>CFR 61 61.302(b),(d)</i>

IMPORTANT: ATTACH CALCULATIONS, TO THE EXTENT THEY ARE AIR EMISSIONS RELATED, ON WHICH EMISSIONS WERE DETERMINED AND LABEL AS EXHIBIT 367-5.

¹PROVIDE UNCONTROLLED EMISSIONS IF CONTROL EQUIPMENT IS USED. OTHERWISE, PROVIDE ACTUAL EMISSIONS TO THE ATMOSPHERE, INCLUDING INDOORS. CHECK BOX TO SPECIFY.
²CAS - CHEMICAL ABSTRACT SERVICE NUMBER.
³PLEASE PROVIDE ANY OTHER EMISSION RATE WHICH IS COMMONLY USED, REQUIRED BY A SPECIFIC LIMITATION OR THAT WAS MEASURED (E.G., PPM, GR/DSCF, ETC.).
⁴DM - DETERMINATION METHOD: 1) STACK TEST, 2) MATERIAL BALANCE, 3) STANDARD EMISSION FACTOR (AP-42 OR AIRS, 4) ENGINEERING ESTIMATE, 5) SPECIAL EMISSION FACTOR (NOT AP-42 OR AIRS).
⁵RATE - ALLOWABLE EMISSION RATE OR STANDARD SPECIFIED BY MOST STRINGENT APPLICABLE RULE.

EXHAUST POINT INFORMATION

THIS SECTION SHOULD NOT BE COMPLETED IF EMISSIONS ARE EXHAUSTED THROUGH AIR POLLUTION CONTROL EQUIPMENT.

44) FLOW DIAGRAM DESIGNATION OF EXHAUST POINT:

45) DESCRIPTION OF EXHAUST POINT (STACK, VENT, ROOF MONITOR, INDOORS, ETC.). IF THE EXHAUST POINT DISCHARGES INDOORS, DO NOT COMPLETE THE REMAINING ITEMS.

46) DISTANCE TO NEAREST PLANT BOUNDARY FROM EXHAUST POINT DISCHARGE (FT):

47) DISCHARGE HEIGHT ABOVE GRADE (FT):

48) GOOD ENGINEERING PRACTICE (GEP) HEIGHT, IF KNOWN (FT):

49) DIAMETER OF EXHAUST POINT (FT): NOTE: FOR A NON CIRCULAR EXHAUST POINT, THE DIAMETER IS 1.128 TIMES THE SQUARE ROOT OF THE AREA.

50) EXIT GAS FLOW RATE	a) MAXIMUM (ACFM):	b) TYPICAL (ACFM):
------------------------	--------------------	--------------------

51) EXIT GAS TEMPERATURE	a) MAXIMUM (°F):	b) TYPICAL (°F):
--------------------------	------------------	------------------

52) DIRECTION OF EXHAUST (VERTICAL, LATERAL, DOWNWARD):

53) LIST ALL EMISSION UNITS AND CONTROL DEVICES SERVED BY THIS EXHAUST POINT:

NAME	FLOW DIAGRAM DESIGNATION
a)	
b)	
c)	
d)	
e)	

THE FOLLOWING INFORMATION NEED ONLY BE SUPPLIED IF READILY AVAILABLE.

54a) LATITUDE:	b) LONGITUDE:	
55) UTM ZONE:	b) UTM VERTICAL (KM):	c) UTM HORIZONTAL (KM):