FACILITY INFORMATION:

Facility Name: ___________________
Facility ID: _______________
Facility Owner/Operator: ____________________________________________
Facility Street Address: ____________________________________________

Please note any corrections to the above information, if necessary.

APPLICABLE STANDARD: Glass Manufacturing Area Sources

Existing Sources: construction/reconstruction on/prior to September 20, 2007
New Sources: construction/reconstruction after September 20, 2007

Facility Compliance Date:
   December 28, 2009 (existing sources) OR
   December 26, 2007 (new sources starting up on or prior to December 26, 2007 OR upon startup (new sources starting up after December 27, 2007)

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 Subpart SSSSSS? (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))


SIGNATURE

Signature of Responsible Person or Company Official:

__________________________________________________________________________

Date:

(Print): ______________________________________________________________________

Title:

Please return this form to BOTH the NC Division of Air Quality and the US Environmental Protection Agency at the following addresses:

Teresa Colón
NC Division of Air Quality
1641 Mail Service Center
Raleigh, NC 27699-1641

Gregg Worley
Chief Air Toxics Monitoring Branch
U.S. EPA, Region 4
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW
Atlanta, GA 30303-3104