NOTIFICATION FORM

FACILITY INFORMATION:

Facility Name: ______________________
Facility ID: ___________
Facility Owner/Operator: _______________________________________
Facility Street Address: _______________________________________

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

APPLICABLE STANDARD: Chemical Manufacturing Area Sources (Subpart VVVVVV)

Compliance Dates:
Existing Sources: October 29, 2012 (three years after the promulgation date).
New Sources: October 29, 2009 or upon startup, whichever is later. A new source, under this
rule, is a source that commenced construction or reconstruction after October 6, 2008.

Facility Compliance Dates: _______________

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 VVVVV? (check one)

☐ Yes
☐ No (Please explain) ___________________________________________
SOURCE DESCRIPTION

Briefly describe the source. (section 63.9(b)(2)(iv))

SIGNATURE

Signature of Responsible Person or Company Official:

X ______________________________________________ Date:

(Print): __________________________________________ Title:

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

Teresa Colón  Gregg Worley
NC Division of Air Quality  Chief Air Toxics Monitoring Branch
1641 Mail Service Center  U.S. EPA, Region 4
Raleigh, NC 27699-1641  Sam Nunn Atlanta Federal Center
                          61 Forsyth Street, SW
                          Atlanta, GA 30303-3104