Aluminum, Copper, and Other Nonferrous Foundries (Subpart ZZZZZZ)
National Emission Standard for Hazardous Air Pollution
State of North Carolina

INITIAL NOTIFICATION FORM

FACILITY INFORMATION:

Facility Name: ___________________ Facility ID: _________
Facility Owner/Operator: __________________________________
Facility Street Address: ________________________________

Applicable Standard: National Emission Standards for Hazardous Air Pollutants for Area Sources: Aluminum, Copper, and Other Nonferrous Foundries

Facility Compliance Date: June 27, 2011 (existing sources)/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 ZZZZZZ? (check one)

☑ Yes
☑ No (Please explain) __________________________________________________

SOURCE INFORMATION:

*Types of Operations: The following operations at this facility are subject to subpart ZZZZZZ:

1. It has an annual melt production for castings (excluding die casting) in calendar year 2010 of 600 tpy or more.

2. It is an aluminum foundry that uses material containing aluminum foundry HAP.

3. It is an aluminum foundry copper foundry that uses material containing copper foundry HAP.

4. Other nonferrous foundry that uses material containing other nonferrous foundry HAP.
**SOURCE INFORMATION:**

*Description of Subject Operation(s):

________________________________________________________________________

________________________________________________________________________

*Size:

________________________________________________________________________

*Design:

________________________________________________________________________

*Design Operating Capacity:

________________________________________________________________________

*Identification of Each HAP Emission Point:

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*Attach diagram showing emission points if necessary

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**SIGNATURE**

Signature of Responsible Person or Company Official:

X _______________________________ Date: _______________________________

(Print): _______________________________ Title: _______________________________

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Please 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