



SURFACE COATING OPERATIONS: AIR QUALITY REVIEW FORM

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Facility Address: \_\_\_\_\_

Applicant Name & Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Existing Air License #: \_\_\_\_\_ Number of spray booths/spray areas: \_\_\_\_\_ Number of Spray Guns: \_\_\_\_\_

- Type Coating Operation: [ ] Automotive Repairs/Refinishing [ ] New Automobile/Light Duty Truck [ ] Can [ ] Coil
[ ] Paper [ ] Fabric [ ] Vinyl [ ] Metal Furniture [ ] Large Appliances [ ] Magnet Wire [ ] Flat Wood Paneling
[ ] Wood Furniture Manufacturing [ ] Miscellaneous Metal Parts [ ] Other: \_\_\_\_\_

Facility hours of operation: \_\_\_\_\_ hours/day \_\_\_\_\_ days/week \_\_\_\_\_ weeks/year

Describe Facility Activities: \_\_\_\_\_

List all products used containing volatile organic compounds (VOCs) for proposed and existing operations using information from Material Safety Data Sheets (MSDS) or Product Data Sheets. Attach all copies of each product MSDS with this form. Products should include all: contact cements, adhesives, paints, primers, sealers, thinners, reducers, solvents, catalysts, resins, etc.

Table with 3 columns: Coating Product(s), Amount Used (gal/day), VOC Contents\* (% or lb/gal)

\* See MSDS or Product Information Data Sheet

Certification

I hereby attest and certify that the above supplied information is accurate and complete. I further acknowledge that any change to the above facility description may require a new submittal of this form and review for air quality permitting.

Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Official PPRAQ Use Only

The results of the evaluation for this facility are as follows:

- [ ] Facility is eligible to operate under an Air General Permit per 62-210.310 F.A.C.
[ ] Facility may be subject to RACT or NESHAPs (MACT) requirements and additional information will be required.
[ ] A Surface Coating Operation General Permit will not be required based upon the following:
\_\_\_\_\_ Facility qualifies for F.A.C. categorical exemption and such operations are not subject to a VOC RACT requirement of Rule 62-296 F.A.C., in accordance with Rule 62-210.300(3)(a).
\_\_\_\_\_ VOC rate is below RACT threshold in accordance with Rule 62-296.500(3) F.A.C.

PPRAQ Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_