

SAN DIEGO AIR POLLUTION CONTROL DISTRICT

SUPPLEMENTAL APPLICATION INFORMATION
FEE SCHEDULES
27 F, G

San Diego APCD Use Only
Appl. No.:
ID No.:

FIBERGLASS, PLASTIC, OR FOAM PRODUCT APPLICATION STATIONS

- Attach a current Material Safety Data Sheet (MSDS) for each material to be used in this operation. (If VOC content is not indicated on MSDS, please contact the manufacturer to obtain another supporting document.)
- Attach a manufacturer’s specification data sheet for each corrosion-resistant or fire retardant resins as defined in Rule 67.12.
- Current material list or recordkeeping method will be required pursuant to Rule 67.12 prior to issuance of a Permit to Operate.
- Please type or print the information requested below.

1 **COMPANY NAME:** _____

2 **EQUIPMENT ADDRESS:** _____

3 **A. EQUIPMENT DESCRIPTION**

- 4 **1) Method(s) of Coating Application:** High-Volume Low-Pressure (HVLP) Spray Gun
- 5 Electrostatic Spray Gun Compressed Air Spray Gun Air-Assisted Airless Spray Gun
- 6 Airless Spray Gun Brush Roller Dip Tank
- 7 Flow coat Other _____

8 Complete the following information for spray guns (please provide a separate sheet if needed):

9 Manufacturer: _____ Model: _____

10 Manufacturer: _____ Model: _____

11 **2) Application Station Description:**

12 Coatings are Applied in: Spray Booth Outdoors Room Other _____

13 Dimensions: _____' Length, _____' Width, _____' Height; Exhaust Flow Rate (fan): _____ cu ft/min

14 Manufacturer: _____ Model: _____

15 **3) Drying Method**

16 Air Dried Oven Dried Other _____

17 If other than Air Dried, complete the following information:

18 Oven Manufacturer: _____ Model: _____ Drying Temperature: _____°F

19 Dimensions: _____' Length, _____' Width, _____' Height

20 **B. PROCESS DESCRIPTION**

21 Surface Coated: _____

22 Product Description: _____

23 **1) Indicate the control method for all dry sanding, grinding and cutting operations of polyester resin materials which contain fiberglass:** None Controlled Enclosure

25 Controlled Process Other (Specify): _____

Attach a detailed drawing or/and process description of the above control method.

26 **2) Method of Equipment Cleanup:** Spray Gun Washer Cold Solvent Dip Tank Remote Solvent Reservoir

27 Totally Enclosed Container or System Other (Specify): _____

28 Solvent used _____ VOC: _____ g/l

(Solvent Manufacturer/Product ID Code)

51 **EMISSION POINT DATA** Determine if your emission source(s) are ducted sources or if they are unducted/fugitive
 52 sources and provide the necessary data below. (**Examples** of commonly encountered emission points: **Ducted or**
 53 **Stack Emissions** - an exhaust pipe or stack, a roof ventilation duct; **Unducted Emissions** - anything not emitted
 54 through a duct, pipe, or stack, for instance, an open window or an outdoor area or volume)

55 **1. Ducted or Stack Emissions** (For 1 or more emission points). Estimate values if you are unsure.

Parameter	Point #1	Point #2	Point #3	Point #4	Point #5	Point #6
Height of Exhaust above ground (ft)						
Stack Diameter (or length/width) (ft)						
Exhaust Gas Temperature* (°F)						
Exhaust Gas Flow (actual cfm or fps)						
Is Exhaust Vertical (Yes or No)						
Raincap? (None, Flapper Valve, Raincap)						
Distance to Property Line (+/- 10 ft)						

* Use “70 °F” or “Ambient” if unknown

56 **2. Unducted Emissions** (For 1 or more emission points). Estimate if you are unsure.

57 **Describe how unducted gases, vapors, and/or particles get into the outside air.** Provide a brief description of the
 58 process or operation for each unducted emission point. If unducted emissions come out of building openings such as
 59 doors or windows, estimate the **size of the opening** (example – 3 ft x 4 ft window). If unducted emissions originate
 60 outside your buildings, estimate the **size of the emission zone** (example - paint spraying 2’ x 2’ x 2’ bread boxes).

61 _____

62 _____

63 _____

64 _____

65 _____

66 _____

67 _____

68 **RECEPTOR DATA** A receptor is a residence or business whose occupants could be exposed to toxic emissions from
 69 your facility. In order to estimate the risk to nearby receptors, please provide the distance from the emission point to
 70 the nearest residence and to the nearest business.

71 Distance to nearest residence _____ ft Distance to nearest business _____ ft

72 **Name of Preparer:** _____ **Title:** _____

73 **Phone No.:** () _____ **Date:** _____

NOTE TO APPLICANT:

Before acting on an application for Authority to Construct or Permit to Operate, the District may require further information, plans, or specifications. Forms with insufficient information may be returned to the applicant for completion, which will cause a delay in application processing and may increase processing fees. The applicant should correspond with equipment and material manufacturers to obtain the information requested on this supplemental form.