

| | |
|---|-------------------------|
| Registration Form for AQRs 101–107 Clark County Department of Environment & Sustainability—Division of Air Quality | For DAQ Use Only |
|---|-------------------------|

Submit Registration to:
Division of Air Quality
4701 W. Russell Road, Suite 200
Las Vegas NV 89118

Section A: Application Type (select one):

New Registration Registration Revision

Description: Describe what is being proposed and identify the primary section of the Air Quality Regulations that applies.

Complete all fields in Sections B–D.

Section B: Source Identification

| Source Name: | | | | | Source ID No.: | | |
|-------------------------------|------------|--------------|--|------|----------------|--------|-----------|
| Physical Location Information | | | | | | | |
| Number: | Direction: | Street Name: | | | Street Type: | Suite: | P.O. Box: |
| | | | | | | | |
| City: | | | | | State: NV | Zip: | |
| Phone Numbers | | | | | | | |
| Office: | | | | Fax: | | | |

Section C: Company Information (AS LISTED ON THE SECRETARY OF STATE’S BUSINESS CERTIFICATE / FILING)

Is this a new registration or has any of this information changed from a previous registration? YES NO
 If YES, attach a printout of your company’s business listing on the Nevada Secretary of State’s website or some other formal documentation that includes your company’s full legal name.

| | | | | | | | |
|---------------|------------|--------------|--|------|--------------|--------|-----------|
| Company Name: | | | | | | | |
| Number: | Direction: | Street Name: | | | Street Type: | Suite: | P.O. Box: |
| | | | | | | | |
| City: | | | | | State: | Zip: | |
| Office Phone: | | | | Fax: | | | |

Section D: Owner, Operator, or Responsible Official Information

| Name: | | | | Title: | | | |
|---------------|------------|--------------|--|---|--------------|--------|-----------|
| Number: | Direction: | Street Name: | | | Street Type: | Suite: | P.O. Box: |
| | | | | | | | |
| City: | | | | | State: | Zip: | |
| Email: | | | | Primary Communication Method: <input type="checkbox"/> Email <input type="checkbox"/> U.S. Postal | | | |
| Phone Numbers | | | | | | | |
| Office: | | Extension: | | Cell: | | Fax: | |

Responsible Official(s). The RO for a stationary source in Clark County is the person who is authorized by the owner of the source to sign all documents and to make decisions that:

- Govern the operation of the regulated facility;
- Initiate and direct measures to assure compliance with air quality laws and regulations; and
- Ensure actions are taken to gather complete and accurate information for registration application requirements.

Section E: Source Operation(s)

| | |
|---|-------------------------------------|
| 1. Select all operations that apply from the categories below. | |
| <input type="checkbox"/> Industrial Adhesive Operations (Section 101) If PME is equal to or above 3.0 tons per calendar year of VOC, will any noncompliant materials be used? <input type="checkbox"/> Yes <input type="checkbox"/> No | PME of Applicable Operations (tpy): |
| <input type="checkbox"/> Gasoline Dispensing Facilities (Section 102) | |
| <input type="checkbox"/> Miscellaneous Metal or Plastic Parts Coating Operations (Section 103) | PME of Applicable Operations (tpy): |
| <input type="checkbox"/> Industrial Cleaning Solvent Operations (Section 104) | PME of Applicable Operations (tpy): |
| <input type="checkbox"/> Metal Solvent Degreaser Operations (Section 105): Type(s): <input type="checkbox"/> Cold cleaner <input type="checkbox"/> Open top <input type="checkbox"/> Conveyorized | PME of Applicable Operations (tpy): |
| <input type="checkbox"/> Graphic Arts Operations (Section 106): Type(s) of printing: <input type="checkbox"/> Offset lithographic <input type="checkbox"/> Letterpress <input type="checkbox"/> Flexible package If PME is equal to or above 3.0 tons per calendar year of VOC, will any noncompliant materials be used? <input type="checkbox"/> Yes <input type="checkbox"/> No | PME of Applicable Operations (tpy): |
| <input type="checkbox"/> Cutback Asphalt Manufacturing and Use (Section 107) | PME of Applicable Operations (tpy): |

Section F: Supplemental Documents

Worksheet(s). Attach the worksheet(s) used to calculate projected maximum emissions (PME) of volatile organic compounds (VOC).

Emissions Control System. Attach the operations and maintenance plan for the ECS, as applicable.

Projected Maximum Emissions. Defined as the highest annual rate, in tons per year, at which the stationary source is projected to emit VOC based on anticipated production, throughput, heat input, or material utilization rates that does not include emission reductions from add-on controls.

Safety or Environmental Data Sheet (SDS or EDS). A detailed document prepared by the manufacturer or importer of a hazardous chemical that describes its physical and chemical properties. In all cases, attach the most current data sheet for each specific or class of VOC-containing material (paints, solvents, thinners, etc.) in use. Attach SDSs/EDSs for all proposed materials to new registrations; attach SDSs/EDSs for new or existing materials to registration revisions that propose changes to the weighted average VOC content.

Federal Performance Standards List. A list of the federal performance standards, emission limits, and requirements that apply to the source (i.e., NSPS, NESHAP, and MACT). If the source has an EPA- or DAQ-approved exemption for one or more performance standards, attach the exemption approval(s) as well.

Other Supplemental Documents (attach as applicable).

Section G: Small Business Assistance Program

A DAQ program that offers free assistance on registration and compliance matters to small businesses of 100 or fewer employees. Please ask for an SBAP representative at our front counter or call (702) 455-1660 to schedule an appointment.

Fees and Payments. No fees are associated with submitting this form.

Section H: Authority Granted

I authorize DAQ to transmit all communications by the primary communication method selected in Section D of this form. I acknowledge that if I select "Email," DAQ will transmit all listed items electronically; if I select "U.S. Postal Service," DAQ will mail all listed items and I may incur applicable postage fees.

Section I: Declaration

As the Owner, Operator, or Responsible Official, I declare, under penalty of perjury under the laws of the state of Nevada, that the statements and information in this registration form and the attached supplemental documents and worksheets are true and correct. My signature acknowledges that I am subject to liability for perjury under NRS Chapter 199.145.

Owner, Operator, or Responsible Official Certification (original signature) Date

Printed Name of Owner, Operator, or Responsible Official

If this form is being submitted to revise an existing registration, it must include the source number and be signed by the official on file for this source.