



**PUGET SOUND
Clean Air Agency**

PUGET SOUND CLEAN AIR AGENCY

1904 3rd Ave Ste 105
Seattle WA 98101-3317

(206) 689-4060 Fax: (206) 343-7522 www.pscleanair.gov

PERCHLOROETHYLENE DRY CLEANER NOTIFICATION

Only for unvented, dry-to-dry system equipped using perchloroethylene with emission control equipment that meets all requirements in 40 CFR 63, Subpart M

| | | |
|---|--------------------------------------|--------------------------------------|
| Agency Use Only Date: | Agency Use Only Registration No.: | Agency Use Only Notification No.: |
| Facility Name: | | |
| Mailing Address: | | Installation Address: |
| City, State, Zip: | | City, State, Zip: |
| Is the dry cleaner located in a building with a residence? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

| | | |
|-------------------------------------|----------|-----------------|
| Owner (if different than above): | | |
| Mailing Address (City, State, Zip): | | |
| Contact Person: | | |
| Telephone No.: | Fax No.: | E-Mail Address: |

| | | |
|--|--|--|
| Business Hours (hours/day, days/week, weeks/year): | | |
| Estimated Installation Date: | | |
| If used machine, original installation date (month/day/year): / / OR Date machine manufactured (month/year): / | | |
| Estimated Annual Perchloroethylene Solvent Usage (gallons/year): | | |

Equipment Information

| | |
|--|------------|
| Make: | Model No.: |
| Rated Capacity (pounds/load) | |
| Type of Dry-to-Dry Machine: (Check <input checked="" type="checkbox"/> type of machine) | |
| <input type="checkbox"/> Unvented machine with both a refrigerated condenser* and a secondary carbon adsorber**. Air-gas-vapor stream inside drum must pass through carbon adsorber before the machine door is opened. | |
| <input type="checkbox"/> Unvented machine with a refrigerated condenser* | |
| Attach any additional information about your machine that you'd like us to consider. | |
| * The refrigerated condenser must be designed to operate so temperature on the outlet side of the refrigerated condenser is 45 °F or less, as measured before the end of the cool down or drying cycle while the gas/vapor stream is flowing through the refrigerated condenser. | |
| ** The carbon adsorber must be desorbed in accordance with manufacturer's instructions | |

Certification

| | |
|---|-------|
| I, the undersigned, do hereby certify that the information contained in this notification is, to the best of my knowledge, accurate and complete. | |
| Signature | Date |
| Type or Print Name and Title | Phone |

**Your application must be accompanied by a \$500 filing fee. To pay by check, mail with this form to the Agency address above.
To pay by credit card, check here and an accounting technician will contact you.**

