



NEBRASKA DEPARTMENT OF ENVIRONMENTAL QUALITY  
Air Quality Division

**NOTIFICATION of COMPLIANCE STATUS FORM**

**Applicable Rule:** 40 CFR Part 63, Subpart HHHHHH - National Emission Standards for Hazardous Air Pollutants (NESHAP): Paint Stripping and Miscellaneous Surface Coating Operations at Area Sources - Promulgated 1/9/08.

**Who is subject to this Rule?**

Sources are subject to this rule if they meet **both** of the following conditions:

1. They emit or have the potential to emit less than 10 tons/year of any single hazardous air pollutant (HAP) or less than 25 tons/year combined HAPs;
2. They engage in **any** of the following:
  - Paint stripping using methylene chloride (MeCl);
  - Spray application of coatings to motor vehicles and mobile equipment;
  - Spray application of coatings to a plastic and/or metal substrate where the coatings contain compounds of chromium (Cr), lead (Pb), manganese (Mn), nickel (Ni), or cadmium (Cd).

For more information and guidance, please see the rule entry on the NDEQ Air Toxics Notebook at <http://deq.ne.gov/Airtoxic/nsf/pages/HHHHHH>, or contact the NDEQ Air Toxics Coordinator at (402) 471-2189 or [NDEQ.AirQuality@nebraska.gov](mailto:NDEQ.AirQuality@nebraska.gov).

**This form must be completed by any source that did not certify compliance with the requirements of this subpart in their Initial Notification.**

Print or type the following information for each facility for which you are making initial notification:

Facility ID#: \_\_\_\_\_

Facility Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Responsible Official's Name/Title: \_\_\_\_\_

Responsible Official's Phone Number: \_\_\_\_\_

Responsible Official's Address if different than facility address):

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**This form must be completed, signed, and submitted to the following agencies, if certification of compliance was not already made in the Initial Notification.**

Existing sources\* must submit this form **by March 11, 2011.**

New sources\*\* must submit **by July 7, 2008 or within 180 days of startup**, whichever is later.

NDEQ Air Quality Division  
1200 'N' St. Atrium, Suite 400  
Lincoln, NE 68509-8922

**and**

Region VII EPA  
11201 Renner Blvd  
Lenexa, KS 66219

If your facility is located in Omaha or in Lancaster County, you must submit a notification to the appropriate local air pollution control agency and Region VII EPA.

\*Existing source = commenced construction or reconstruction on or before Sep 17, 2007

\*\*New source = commenced construction or reconstruction after Sep 17, 2007.

**1. This facility conducts the following operations:**

- Motor Vehicle or Mobile Equipment Surface Coating
- Miscellaneous Surface Coating
- Methylene Chloride Paint Stripping

**2. Methylene Chloride (MeCl) Paint Stripping Operations**

a. Do you plan to use more than 1 ton of MeCl annually? Yes  No

b. **If you answered Yes above:** If you are an existing affected paint stripping source that annually uses more than one ton of MeCl, you must submit a statement certifying that you have developed and are implementing a written MeCl minimization plan in accordance with §63.11173(b). **(Include this statement as an attachment with this notification.)**

**3. Compliance dates (check one)**

- This facility is a new source** (initial startup was after January 9, 2008).
  - Compliance date is date of startup of operation.
- This facility is a new source** (initial startup after September 17, 2007, but before January 9, 2008).
  - Compliance date is January 9, 2008.
- This facility is an existing source** (initial startup before September 17, 2007).
  - Compliance date is January 10, 2011.

**4. Compliance status**

For paint stripping operations, the relevant requirements that you must evaluate in making this determination are specified in 40 CFR 63.11173(a) through (d) of Subpart HHHHHH. For surface coating operations, the relevant requirements are specified in 40 CFR 63.11173(e) through (g) of this subpart.

**Check the statement below that applies:**

- The source has complied with all the relevant standards and other requirements of this subpart.
- I am not in compliance with all requirements of the relevant standard and will include an explanation of any noncompliance and a description of corrective actions being taken to achieve compliance. (Include this statement and description as an attachment with this notification.)

Are the compliance records located at the facility address above?  Yes  No

**If you answered No above,** provide street address below where the records are kept:

Location of Records: \_\_\_\_\_  
Street, City, State, Zip

**A responsible official must certify below. A Responsible Official can be:**

- The president, vice president, secretary, or treasurer of the company that owns the facility;
- An owner of the facility;
- The plant engineer or supervisor of the facility;
- A government official, if the facility is owned by the Federal, State, City, or County government; or
- A ranking military officer, if the facility is located at a military base.

**Is the responsible official certifying below the Owner, Operator, or Other for this facility**  
(check one below)?

**Owner**  **Operator**  **Other**

Print or type the name and title of the Responsible Official for the facility:

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Telephone no.:** \_\_\_\_\_

**Email (if available):** \_\_\_\_\_

**I CERTIFY THAT INFORMATION CONTAINED IN THIS REPORT TO BE ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE.**

**Signature of responsible official:**

\_\_\_\_\_  
*(Signature of Responsible Official)*

\_\_\_\_\_  
*(Date)*

**Print name:** \_\_\_\_\_