

# INITIAL STATEMENT OF COMPLIANCE

## FOR BATCH VAPOR OR IN-LINE HALOGENATED SOLVENT CLEANING MACHINES

New & Existing Machines Complying with the **Equipment Standard** (40 CFR § 63.463)  
 (Applicable Rule: 40 CFR Part 63, Subpart T)

Owner/Operator/ Title					
Mailing Address					
City		State		Zip	
Facility Name					
Street Address (i.e., Physical Location)					
City		State		Zip	
Contact Person		Title		Phone	
List All Applicable Air Quality Permit/Authorization Number(s)					
Control Equipment ID#	Machine ID# <sup>1</sup>	Control Equipment <sup>2</sup>	Machine Type <sup>2</sup>	Compliance Status <sup>2</sup>	Compliance Approach <sup>2</sup>

<sup>1</sup>For each piece of control equipment, list the ID# for each machine for which it provides treatment.  
<sup>2</sup>For each piece of control equipment, use the following codes in the appropriate columns:  
Machine Type: Batch Vapor; or In-Line  
Control Equipment:  
 FR=1.0 - Freeboard Ratio ≥1.0 | Wk COVER - Working-Mode Cover | DWELL - Dwell  
 F REF - Freeboard Refrigeration Device | CARB AD - Carbon Adsorber | RRD - Reduced Room Draft  
 SH VAPOR - Super-Heated Vapor  
Compliance Status: In Compliance - The machine is in compliance with the provisions of 40 CFR Part 63, Subpart T.  
 Not In Compliance - The machine is not in compliance with the provisions of 40 CFR Part 63, Subpart T.  
Compliance Approach: Control Combination or Idling Emission Limit  
 Idling Emission Limit Test Report, per 40 CFR § 63.468(d)(6), attached.  
 Use "OTHER" if none of the choices apply (and specify in attached description).

Control Equipment ID#	Control Equipment	Measured Parameter	Compliance Parameter Value
	Freeboard Refrigeration Device	<input type="checkbox"/> Temperature at the center of the air blanket while idling.	<input type="checkbox"/> ≤ 30% of the solvent boiling point.
	Working- & Idling-Mode Cover	<input type="checkbox"/> Use, function, and integrity.	<input type="checkbox"/> Opens and closes properly. <input type="checkbox"/> Closed except during parts entry & removal. <input type="checkbox"/> Closes completely. <input type="checkbox"/> Free of cracks, holes, or other defects.
	Dwell	<input type="checkbox"/> Period of time parts are held in the solvent cleaning freeboard area above the vapor zone after being cleaned.	<input type="checkbox"/> Determined for each of the parts or parts baskets cleaned, or <input type="checkbox"/> Determined using the most complex part type of parts baskets cleaned.
	Super-Heated Vapor System	<input type="checkbox"/> Temperature at the center of the super-heated vapor zone while idling.	<input type="checkbox"/> At least 10°F above the solvent's boiling point.

**INITIAL STATEMENT OF COMPLIANCE FOR BATCH VAPOR OR IN-LINE HALOGENATED SOLVENT CLEANING MACHINES for New and Existing Machines complying with the Equipment Standard (Continued).**

Control Equipment ID#	Control Equipment	Measured Parameter	Compliance Parameter Value
	Reduced Room Draft	<input type="checkbox"/> Windspeed Room parameters (e.g., enclosure*): 1. _____ 2. _____ 3. _____ 4. _____	<input type="checkbox"/> ≤ 15.2 meters per minute (50 feet per minute) 1. _____ 2. _____ 3. _____ 4. _____
*If a full or partial enclosure is used to achieve the reduced room draft for your cleaning machine, attach the initial monitoring test.			
	Carbon Adsorber	<input type="checkbox"/> Working mode exhaust halogenated solvent concentration (attach weekly measurement records of the exhaust concentration).	<input type="checkbox"/> ≤ 100 ppm
	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> The facility is in compliance with the provisions of 40 CFR Part 63, Subpart T.			
<input type="checkbox"/> The facility is not in compliance with the provisions of 40 CFR Part 63, Subpart T.			
<b>Certification: This notification has been submitted as required by 40 CFR § 63.468(d). Based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this notification are true, accurate, and complete.</b>			
Responsible Official (signature)			
Responsible Official (typed)		Date	
Responsible Official Title		Phone	