



ANNUAL NOTIFICATION OF CHANGES/COMPLIANCE REPORT

REGULATION 40 CFR PART 63, Subpart HHHHHH

National Emission Standards for Hazardous Air Pollutants: Paint Stripping and Miscellaneous Surface Coating Operations at Area Sources

Section I – Facility Information

1. Facility Name:		EPA Identification Number:	
2. Facility Street Address:			

The Owner/Operator shall prepare an annual changes/compliance report, in accordance with 40 CFR Part 63, Subpart HHHHHH Section 63.11176 and the schedule for submittal of compliance certifications set forth in the National Emission Standards for Hazards Air Pollutants. **The annual changes/compliance report must be submitted no later than 60 days after the yearly anniversary of the compliance date, unless otherwise specified in your approved operating permit.**

Enter the date your initial compliance notification was issued: _____

4. This report is _____ and covers the reporting period from: _____ to: _____
 due: _____ from: _____ to: _____
 (mo/day/year) (mo/day/year) (mo/day/year)

5. The methods used to determine the compliance status for compliance limitation are, at a minimum, as specified for Paint Stripping and Miscellaneous Surface Coating Operations at Area Sources U.S. EPA 40 CFR Part 63, Subpart HHHHHH Section 63.11173(a) through 63.11173(g).

Section II – Annual Compliance Certification Statement

Compliance Status for the Reporting Period:

- a. Pursuant to Section 63.1176, I hereby state that this facility is currently in compliance with all applicable requirements as indicated in the facility specific requirements of my operating permit and has been in continuous compliance for the time period listed in Section I.4 above.
- b. Pursuant to Section 63.1177(g), I hereby state that this facility is currently in compliance with all applicable requirements as indicated in the facility specific requirements of my operating permit but had periods of non-compliance during the time period listed in Section I.4 above which are listed in the attached Records of Deviations.
- c. Pursuant to Section 63.1175(b), I hereby state that this facility is currently not in compliance with all applicable requirements in the facility specific requirements of my operating permit, as listed in the attached Notification Compliance Status.

Section III – Summary of Facility and Emission Source Compliance Status

Affected Source or Activity: each item includes ALL Operating Scenarios (OS), Steps (ST), Control Devices (CD), Emission Point (PT), Group (GR) and Equipment (E), or Not Applicable (NA) as listed under that Source or Activity . For any deviations, enter FC and the Source or Activity # identified on the Record of Deviation.	Compliance Status as of the end of the reporting period Check only One		Compliance During Reporting Period Check only One		Applicable Requirement(s) Associated with a Deviation List all Subject Items and Reference # associated with a deviation Fill out a separate Record of Deviation for each non-compliant requirement or each repetitive non-compliant requirement listed below. For any deviation, enter the Subject Item and Section III Reference Item Number on each Record of Deviation report.
			Continuous (always in compliance)	Intermittent (sometimes not in compliance)	
	IN	OUT			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section III a. All new and existing personnel, including contract personnel are trained as defined in § 63.11173(f):
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	i. Employees trained by an accredited instructor
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ii. Employees trained within 180 days of the date of hire
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	iii. Affected employees listed by name and job description
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	iv. Affected employees listed by date of classroom training
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	v. Affected employees listed by date and type of hands-on training
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section III b. All spray-applied coatings are applied with spray gun technology as defined in § 63.11173(e)(3) and § 63.11180:
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	i. All spray-applied coatings is applied with a high volume, low pressure (HVLP) spray gun, electrostatic application, airless spray gun, air-assisted airless spray gun, or an equivalent technology
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ii. Coatings applied from a hand-held device with a paint cup capacity that is equal to or less than 3.0 fluid ounces (89 cubic centimeters)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section III c. All spray booths, prep stations, and mobile enclosures are fitted with filter technology that achieves at least 98% capture of overspray as defined in § 63.11173(e)(2)(i)

Continued Section III – Summary of Facility and Emission Source Compliance Status

Affected Source or Activity: each item includes ALL Operating Scenarios (OS), Steps (ST), Control Devices (CD), Emission Point (PT), Group (GR) and Equipment (E), or Not Applicable (NA) as listed under that Source or Activity . For any deviations, enter FC and the Source or Activity # identified on the Record of Deviation.	Compliance Status as of the end of the reporting period Check only One		Compliance During Reporting Period Check only One		Applicable Requirement(s) Associated with a Deviation List all Subject Items and Reference # associated with a deviation Fill out a separate Record of Deviation for each non-compliant requirement or each repetitive non-compliant requirement listed below. For any deviation, enter the Subject Item and Section III Reference Item Number on each Record of Deviation report.
	IN	OUT	Continuous (always in compliance)	Intermittent (sometimes not in compliance)	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section III d. All spray-applied coatings is applied in a spray booth, preparation station, or mobile enclosure as defined in § 63.11173(e)(2)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section III e. All spray gun cleaning is performed in a container that prevents atomized mist outside of the container as defined in § 63.11173(e)(4)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Section III f. copies of records for the status of HAPs 6H compliance are maintained for a minimum of 5-years as defined in § 63.11177 and § 63.11178:
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	i. Employee classroom training certificates on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ii. Employee hands-on training certificates on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	iii. Booth filter purchase records on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	iv. Spray gun manufacturers' data sheets on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	v. Spray gun transfer efficiency test on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	vi. EPA regional and state notifications on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	vii. Spray product purchase records on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	viii. Assessments, deviations or corrective actions on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ix. Methylene Chloride product purchase records on file
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x. Required product Material Safety Data Sheets on file

Section IV – Responsible Official Signature Statement

The signature below must be made by a responsible official, as defined at 40 CFR § 63.11176 of Subpart HHHHHH

Owner/Operator Sworn Statement: “I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this document and all attached documents and, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true , accurate and complete.” **This certification applies to the information included in this form as well as all the Records of Deviations and any other supplemental information included with this submittal.**

Signature of Responsible Official	Date
Type or Print Name of Responsible Official	Phone
Title of Responsible Official	E-mail
Address of Responsible Official	City State Zip Code

Section V – Direct Knowledge Consultant Signature Statement

The certification below must be made by the consultant(s) with direct knowledge of and responsibility for the information contained within this document.

Consultants Sworn Statement: “I certify the truth, accuracy, and completeness of this Notification of Compliance Status and that this source has complied with all the relevant standards and other requirements of this subpart. For surface coating operations, the relevant requirements are specified in 40 CFR § 63.11173(e) through (g) of Subpart HHHHHH. For paint stripping operations using Methylene Chloride (any amount), the relevant requirements that you must evaluate in making this determination are specified in 40 CFR § 63.11173(a) through (d) of Subpart HHHHHH.” **This certification applies to the information included in this form as well as all the Records of Deviations and any other supplemental information included with this submittal.**

Consultant State License or Registration Number	Professional Seal
Type or Print Name of Direct Knowledge Consultant	
Date Certified by Direct Knowledge Consultant	