

Notification of Compliance Status
National Emission Standards for Hazardous Air Pollutants:
Area Source Standards for Plating and Polishing Operations
40 CFR 63 subpart WWWWWW

Section 1. Facility Information

Date of Notification of Compliance Status: _____

Compliance Date: ☐ Existing source: July 1, 2010 ☐ New source: _____
(Date of startup)

Company name _____

Facility name (if different): _____

Facility (physical location) address: _____

Owner name/title: _____

Owner/company address: _____

Owner telephone number _____

Owner email address (if available): _____

Is the Operator the same person as the Owner? Yes ☐ No ☐

If the Operator information is different from the Owner, please provide the following:

Operator name/title: _____

Operator telephone number: _____

Operator email address (if available): _____

^a This is an example of the type of information that must be submitted to fulfill the Notification of Compliance Status requirement of 40 CFR 63, subpart WWWWWW. You may submit the information in another form or format, or you may use this form.

Example^a

Section 2. Identification of Affected Operations

(1) The following are the operations at this facility subject to subpart WWWWWW (check all that apply):^b

- | | |
|---|--------------------------|
| Electroplating (noncyanide) | <input type="checkbox"/> |
| Continuous electroplating (noncyanide) | <input type="checkbox"/> |
| Short-term electroplating (noncyanide) | <input type="checkbox"/> |
| Electropolishing | <input type="checkbox"/> |
| Electroforming | <input type="checkbox"/> |
| Electroplating (cyanide) | <input type="checkbox"/> |
| Electroless nickel | <input type="checkbox"/> |
| Chrome conversion coating | <input type="checkbox"/> |
| Other electroless plating/coating/dipping | <input type="checkbox"/> |
| Thermal spraying (permanent line) | <input type="checkbox"/> |
| Thermal spraying (temporary, in-situ) | <input type="checkbox"/> |
| Dry mechanical polishing | <input type="checkbox"/> |

^b **Important Note:** These operations are affected sources under subpart WWWWWW only if/when they use materials that contain or have the potential to emit Plating and Polishing metal HAP. Plating and Polishing HAP **containing/potential** is defined to be when the compounds of cadmium, chromium, lead, manganese, and nickel, or any of these metals in the elemental form with the exception of lead, are used or have the potential to be emitted in quantities of 0.1 percent or more, or 1.0 percent or more for elemental or compounds of manganese.

Example^a

- (2) The following table lists the compliance methods used on each affected tank process at this facility, noted previously in item (1) in Section 2:

Tank Process Description/ID No.	HAP Emitted or Used (Cd, Cr, Pb, Mn, Ni)	Compliance Method(s) (Check all that apply)
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices

Example^a

Tank Process Description/ID No.	HAP Emitted or Used (Cd, Cr, Pb, Mn, Ni)	Compliance Method(s) (Check all that apply)
(continued)		
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Wetting agent/fume suppressant <input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Tank cover <input type="checkbox"/> Time limit (short-term plating only) <input type="checkbox"/> Management practices

Example^a

- (3) The following table lists each affected thermal spraying booths/lines (temporary and permanent), and dry mechanical polishing processes subject to subpart WWWW, noted previously in item (1) in Section 2:

Thermal Spray Booth/Line or Dry Mechanical Polishing Description/ID No.	HAP Emitted or Used (Cd, Cr, Pb, Mn, Ni)	Compliance Method(s) (Check all that apply)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)
		<input type="checkbox"/> Vented to a control device; describe: _____ <input type="checkbox"/> Management practices (temporary thermal spraying only)

Example^a

(5) The following applicable management practices are used at this facility, as practicable:

- ☐ Minimize bath agitation when removing any parts processed in the tank, as practicable except when necessary to meet part quality requirements.
- ☐ Maximize the draining of bath solution back into the tank, as practicable, by extending drip time when removing parts from the tank; using drain boards (also known as drip shields); or withdrawing parts slowly from the tank, as practicable.
- ☐ Optimize the design of barrels, racks, and parts to minimize dragout of bath solution (such as by using slotted barrels and tilted racks, or by designing parts with flow-through holes to allow the tank solution to drip back into the tank), as practicable.
- ☐ Use tank covers, if already owned and available at the facility, whenever practicable.
- ☐ Minimize or reduce heating of process tanks, as practicable (e.g., when doing so would not interrupt production or adversely affect part quality).
- ☐ Perform regular repair, maintenance, and preventive maintenance of racks, barrels, and other equipment associated with affected sources, as practicable.
- ☐ Minimize bath contamination, such as through the prevention or quick recovery of dropped parts, use of distilled/de-ionized water, water filtration, pre-cleaning of parts to be plated, and thorough rinsing of pre-treated parts to be plated, as practicable.
- ☐ Maintain quality control of chemicals, and chemical and other bath ingredient concentrations in the tanks, as practicable.
- ☐ Perform general good housekeeping, such as regular sweeping or vacuuming, if needed, and periodic washdowns, as practicable.
- ☐ Minimize spills and overflow of tanks, as practicable.
- ☐ Use squeegee rolls in continuous or reel-to-reel plating tanks, as practicable.
- ☐ Perform regular inspections to identify leaks and other opportunities for pollution prevention.

Section 3. Certification of Compliance Status

- ☐ Yes, the facility referenced below **IS** operating in compliance with all of the relevant standards and other requirements of 40 CFR Part 63 subpart W, National Emission Standards for Hazardous Air Pollutants: Area Source Standards for Plating and Polishing Operations
- ☐ No, the facility referenced below is **NOT** operating in compliance with all of the relevant standards and other requirements of 40 CFR Part 63 subpart W, National Emission Standards for Hazardous Air Pollutants: Area Source Standards for Plating and Polishing Operations

Reason for noncompliance:

I hereby certify that the information presented herein is correct to the best of my knowledge.

(Signature)

(Date)

(Name/title)

() _____
(Telephone No.)

Example^a

Section 4. Submittal

Submit the Notification of Compliance Status to one of the following offices, as appropriate:

- a. If your State has been delegated the authority for this regulation under section 112(l) of the Clean Air Act^c, submit the notification to your State agency found at the following link:
http://www.epa.gov/ttn/atw/area/table_state_contacts.doc

If your state/local contact is not listed at the above link, use this link:
<http://www.4cleanair.org/contactUsaLevel.asp>

- b. If your EPA Region has assumed the authority for this rule, submit the notification to your Regional Office of the EPA, from list below:

EPA Region I (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont)
5 Post Office Square, Suite 100, Mail code: OES04-2, Boston MA 02109-3912 Attention: Air Clerk

EPA Region II (New Jersey, New York, Puerto Rico, Virgin Islands),
Director, Division of Enforcement and Compliance Assistance
290 Broadway, New York, NY 10007-1866

EPA Region III (Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia)
Director, Air Protection Division, 1650 Arch Street, Philadelphia, PA 19103

EPA Region IV (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)
Director, Air, Pesticides and Toxics Management Division
Atlanta Federal Center, 61 Forsyth Street, Atlanta, GA 30303-3104

EPA Region V (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)
Director, Air and Radiation Division, 77 West Jackson Blvd., Chicago, IL 60604-3507

EPA Region VI (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)
Director, Air, Pesticides and Toxics, 1445 Ross Avenue, Dallas, TX 75202-2733

EPA Region VII (Iowa, Kansas, Missouri, Nebraska)
Director, Air and Waste Management Division, U.S. Environmental Protection Agency
901 N. 5th Street, Kansas City, KS 66101

EPA Region VIII (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)
Director, Air and Toxics Technical Enforcement Program, Office of Enforcement, Compliance and Environmental Justice, 1595 Wynkoop Street, Denver, CO 80202-1129

EPA Region IX (Arizona, California, Hawaii, Nevada, American Samoa, Guam)
Director, Air and Toxics Division, 75 Hawthorne Street, San Francisco, CA 94105

EPA Region X (Alaska, Idaho, Oregon, Washington)
Director, Office of Air, Waste and Toxics, 1200 6th Ave., Suite 900, AWT-107, Seattle, WA 98101

^c To determine whether your State has been delegated the authority for this regulation under section 112(l) of the Clean Air Act, contact your EPA Regional Office, listed above.