Instructions for Completing FARR Registration and Reporting Forms

INITIAL/ANNUAL SOURCE REGISTRATION (EPA Form 7630-4)

The Initial/Annual Source Registration Form collects basic information about your air pollution source, including such information as the names and mailing addresses of the owner and/or operator, the location of the source, the type of business, identification of air pollution emitting equipment and air pollution control devices, and the type and quantity of air pollutants actually emitted to the environment.

The owner or operator of an air pollution source that existed on June 7, 2005 must submit an initial registration form to EPA between January 1 and February 15, 2007. The owner or operator of a new air pollution source that begins operation after June 7, 2005, must register the source with EPA within 90 days after beginning operation.

After initial registration, the owner or operator of an air pollution source must re-register the source each year during the January 1 to February 15 registration period.

Registrations must be submitted on the EPA forms. Copies of the registration forms may be obtained online at EPA Region 10's web site or by calling EPA at the number listed below.

The EPA Region 10 "FARR" website www.epa.gov/farr is available for additional information and contains links to other helpful websites, including the EPA Region 10 Registration Web Page. At this web page you will find sample calculations for determining your source's potential to emit and for calculating actual and estimated emissions. In addition, there are links to specific sites to assist you in completing the registration forms.

Assistance can also be obtained by calling the "FARR" hotline, **1-800-424-4372** and asking for help with "FARR" registration forms.

Complete Section A, provide the information requested in Section B, complete the Table in Section C, and complete and sign Section D. Mail the completed form and attachments to the address listed at the end of Section D.

A. GENERAL INFORMATION

In this section you will provide information about the location of your air pollution source, the type of business that is conducted there, the owner and operator of your source and the contact information for certain people responsible for the operation of the source and compliance with air pollution requirements.

The **Source (Facility) Name** is the name on your State or local business license, the name that you list your business under in the telephone book, or the name that you show on the sign posted on your source.

The **Air Quality Operating Permit Number** will be the number on your EPA-issued Part 71 operating permit or your Part 49 Non-Title V operating permit if you have such a permit. If you don't have an EPA-issued operating permit, then leave the line blank or mark it as not applicable.

The **Nature of the Business** is the type of business that is conducted at your air pollution source. This should be the same as you show on your federal income tax return or on your State or local business license. You may also use your Standard Industrial Classification (SIC) Code if you know it.

Include the **Telephone** number, **Facsimile** number, and street **Address** of your air pollution source. This is the information that anyone would use to contact your business or use to visit your source.

Include the name of the **Indian Reservation** within which your air pollution source is located.

The **Compliance Contact** is the local person that EPA can talk to about air pollution requirements that apply to your source, including this requirement for Initial/Annual Source Registration. This person can be the owner or operator, or an employee who is responsible for compliance with environmental or other governmental requirements, provided that person actually works at the location of the air pollution source. For the Compliance Contact, provide telephone and facsimile numbers, mailing address, and email address (if applicable).

The **Owner** is the person or corporation that owns the business which operates the air pollution source. Essentially, this is the person or company that makes a profit from the business and who pays federal income tax on the proceeds from the business. Provide the name of the owner (individual or corporation), telephone and facsimile numbers, mailing address, and email address (if applicable). In addition, provide the name and title of a **Contact** person who is authorized to receive requests for data and information about the air pollution source. Provide the telephone and facsimile numbers, mailing address and email address (if applicable) for this individual.

The **Operator** is the person or corporation who is responsible for the day-to-day operation of the air pollution source. If the Owner is also the Operator of the source, then leave this section blank or mark it as not applicable. If the Owner has arranged for some other person or company to operate the air pollution source, then complete this section. The Operator may be a contractor or a sub-division of the parent company (owner). Provide the name of the operator (individual or corporation), telephone and facsimile numbers, mailing address, and email address (if applicable). In addition, provide the name and title of a **Contact** person who is authorized to receive requests for data and information about the air pollution source. Provide the telephone and facsimile numbers, mailing address and email address (if applicable) for this individual.

The following is a sample of how to complete this portion of the Registration form.

Identifying Information

Source (Facility) Name John's Auto Body Shop

Air Quality Operating Permit No. (if applicable) N/A

Nature of the Business Auto body repair and refinishing SIC Code 7532

Telephone (509) 555 - 1212 Facsimile (509) 555 - 1000

Source Physical Address: Street 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

Indian Reservation Name Yakama Reservation

Compliance Contact John Smith Title Owner

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

Contact Person Mailing Address: Street (or PO Box #) 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

e.mail address john@johnsautobodyshop.com

Owner's Name John Smith Title Owner

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

Owner's Mailing Address: Street (or PO Box #) 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

e.mail address john@johnsautobodyshop.com

Contact John Smith Title Owner
(Person authorized to receive requests for data and information)

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

Contact Person Mailing Address: Street (or PO Box #) 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

e.mail address john@johnsautobodyshop.com

Operator's Name Same as Owner (If different from Owner).

Telephone (_____) _____-_____ Ext. _____ Facsimile (_____)_____-_____

Operator's Mailing Address: Street (or PO Box #) _____

City_____ County_____ State _____ ZIP _____-_____

e.mail address _____

Contact _____Title_____
(Person authorized to receive requests for data and information)

Telephone (_____) _____-_____ Ext. _____ Facsimile (_____)_____-_____

Contact Person Mailing Address: Street (or PO Box #) _____

City_____ County_____ State _____ ZIP _____-_____

e.mail address _____

B. ATTACHMENTS

In this section, you will provide more detailed information about the operation of your air pollution source. This information will enable you and EPA to determine the type and quantity of air pollutants that you emit to the environment. It will also enable you and EPA to determine what other air pollution requirements might apply to your source.

Include all of the following information as attachments to this form:

☐ **Process flow chart identifying all processing, combustion, handling, storage, and emission control equipment**

This is a graphical representation of the flow of raw materials, fuels, and intermediary and final products for your source. This process flow chart can be hand drawn or computer generated. However, you must clearly label all steps in your process and identify the processing equipment, combustion sources, material handling operations, and raw material and product storage facilities. You must also identify which equipment or processes produce air pollutants that are released into the environment and identify any air pollution control equipment being used. Air pollutant releases can be direct, such as through a stack or chimney, or indirect such as through building ventilation systems or even windows and doors.

☐ **Narrative description of the production processes and air pollution control equipment**

This is a written description of your operation that supplements and explains the process flow chart. The narrative description must cover all of the processes, equipment, sources, operations, and facilities shown on the flow chart.

☐ **List of all air pollutant generating equipment and activities; include model and serial numbers for portable equipment**

This is a list of the equipment and activities that generate air pollutants that are released to the environment. The list must include sufficient information about each of pieces of equipment (make, model, size, etc.) and activities (type of activity, location within the source, etc.) to enable EPA to identify them if we inspect the source. For portable equipment that is used at multiple locations, include both the model and serial numbers of the equipment. Portable equipment does not include mobile sources, such as cars, trucks, tractors, or forklifts, or other equipment with internal combustion engines such as lawnmowers or weedwackers, etc.

☐ **Plot Plan**

This is a graphical representation of your entire facility, including the property upon which it is located and the nearby properties. This plot plan can be hand drawn or computer generated. However, it must clearly show:

- The location of all air pollution generating equipment and activities;
- The property lines for the air pollution source;
- The elevation above grade for each emission release point; and
- The distance and direction to nearest residential or commercial property.

☐ **Type and quantity of fuels, including sulfur content of fuels, used on a daily, annual and maximum hourly basis**

If fuels are burned in your manufacturing or industrial process, then provide a written description of the type and quantity of fuels used. This description must include the types of fuels used, the

sulfur content of fuels if petroleum-based fuels are used or if the fuels are produced on site, and the amount of fuel typically used in a day and in a year. You must also include the maximum amount of fuel that you could use in an hour when operating at your maximum capacity. You do not need to provide information on fuels used in mobile sources, such as cars, trucks, tractors, or fork lifts or other equipment with internal combustion engines such as lawnmowers, weedwackers, etc. Also, you do not need to provide information on fuels used strictly for space heating if your furnace or boiler is rated at 400,000 British thermal units (Btu) per hour or less.

☐ **Type and quantity of raw materials used or final product produced on a daily, annual and maximum hourly basis**

This is a written description of the type and quantity of raw materials typically used in a day and in a year. Alternatively, you can provide a description of the type and quantity of the final product typically produced in a day and in a year. The choice of which of these to provide will depend upon the approach used to calculate your actual emissions of air pollutants (see Section 2 **Table of Annual Emissions**, below). You must also provide information on the maximum amount of raw material you could use in an hour, or the maximum amount of final product you could produce in an hour, when operating at maximum capacity (that is, the maximum rated capacity of your source).

☐ **Typical operating schedule, including number of hours per day, number of days per week and number of weeks per year**

This is a written description of the typical operating schedule for your air pollution source. For example, you may typically operate your source nine hours a day (8:00 am to 5:00 pm), five days a week (Monday through Friday) and 50 weeks a year (closed for a week in July and December). Or you may operate seasonally, for 12 hours a day, seven days a week, for a four-month period. If you frequently have to use double shifts, or seasonally increase your hours per day, then include this in your typical schedule. However, if you have to authorize overtime only infrequently, then do not include that in your typical schedule.

☐ **List of estimated efficiency of air pollution control equipment under present or anticipated operating conditions**

If you use any air pollution control equipment, such as multiclones, baghouses, scrubbers, or thermal oxidizers, then provide a list of the equipment along with the estimated control efficiencies. These estimated control efficiencies must be for your present operating conditions, or if you are not currently operating normally, for your anticipated operating conditions. The list must include sufficient information about the emission control equipment (make, size, etc.) to enable EPA to identify them if we inspect the source.

☐ **Estimates of the total actual emissions from the air pollution source for the following air pollutants: particulate matter, PM_{10}, $PM_{2.5}$, sulfur oxides (SO_x), nitrogen oxides (NO_x), carbon monoxide (CO), volatile organic compound (VOC), lead (Pb) and lead compounds, ammonia (NH_3), fluorides (gaseous and particulate), sulfuric acid mist (H_2SO_4), hydrogen sulfide (H_2S), total reduced sulfur (TRS) and reduced sulfur compounds, including all calculations for the estimates**

See the next section for detailed instructions on estimating your total actual emissions.

☐ **Other (provide details)**

If there is any other information about your source or its operation that relates to air pollution that you wish to provide, then include that information in a separate attachment.

The following is an example of the type of information to submit as attachments to your Registration Forms. Names and locations are fictitious and the description of operations, quantities, and emission factors are simplified for illustrative purposes. The example illustrates important concepts and demonstrates the calculation of the quantitative indicators. While realistic, is not intended to reflect all the complexities and nuances associated with a particular situation.

Narrative Description

John's Auto Body Shop is a for-profit enterprise whose office is located at 101 Front Street, Toppenish, WA. This address is within the boundaries of the Yakama Reservation. This is also the mailing address of the business. Business phone number is 509-555-1212; fax is 509-555-1000.

The owner of John's Auto Body Shop is John Smith. His street and mailing addresses are the same as those for John's Auto Body Shop.

The onsite manager of operations at John's Auto Body Shop is John Smith. He is reachable at the addresses above, but also by phone at (509) 555-1212, extension 100.

In addition to John Smith, John's Auto Body Shop employs 5 journey-level body shop personnel and painters. They perform the hands-on work of the operation, including body repair and spray painting.

John's Auto Body Shop performs its auto refinishing work at the same street address as its office, 101 Front Street, Toppenish, WA but in reality the work is done at a body work/paint shop building physically located 50 yards away from the office, but on the same plot (i.e. same legal description of property).

Both of these sites are within the boundary of the Yakama Indian Reservation, as defined by the BIA.

John's Auto Body Shop is one of a half dozen or so full-service auto refinishing shops in the Toppenish area. John's distinguishes itself from the competition by the thoroughness of the body prep work and by offering high-quality, multi-topcoat finishes. The growth of the business is limited by the market in the Toppenish area for work of this quality; the number of vehicles worked has remained fairly constant for the last three years, and the owner of the business sees no change of this pattern so long as the customer base is limited to the greater Toppenish area. John's has plans for increasing market share by attracting customers from outside its normal market bounds, but at present John's Auto Body Shop operates a single shift of 9 hours a day with occasional longer hours for special rush jobs.

John's Auto Body Shop follows this process in its auto refinishing work:

Cars, trucks and other types of vehicles arrive and are kept in storage until they come up in the work queue. Storage is a covered area 30 by 40 feet (for valuable items) and an open lot 50 by 100 feet. Both areas are paved with asphalt.

When ready to be worked on, the vehicle is driven to an area adjacent to and outside the entry door to the body/paint shop. After washing, the vehicle is driven into the shop.

Body work is performed. If any disassembly is required, the components are removed at this time. If reusable and needing stripping sandblasting, the components are sent to a commercial stripping and sandblasting firm also located in Toppenish. Any patching, puttying, sanding or grinding that can be done while parts are stripped, or until replacements arrived, is performed. When parts return from stripping, or new parts arrive, the vehicle is reassembled; welding (if needed) is performed, and additional patching may be done. If body work needs to wait for parts to catch up, the vehicle is moved off the

process line; there is room for 3 vehicles to be stored within the shop waiting for completion of body work. All body work, including storage, is done within a 30 by 30 area just inside the garage entry doors.

When all body work on the vehicle is completed, it is moved forward about 20 feet and prepared for painting. This includes washing the upper portion (by spraying) with a solvent. The underbody is degreased by spraying and manually with scrub brushes. Solvent from spraying escapes into the air around the work station. Solvent manually applied is somewhat (minimally) collected in a catch basin, from which it is later removed by pumping.

The vehicle rolls forward another 20 feet and undergoes an application of pre-coat. This is allowed to air-dry. Pre-coat is applied by spraying, including the underbody. The spraying is somewhat controlled by plastic sheets which are hung from overhead fasteners to create temporary enclosure around the pre-coat area. After application of the pre-coat, the plastic sheets are removed to let air circulation dry the vehicle.

The vehicle is moved forward 20 additional feet to the priming area. Again, plastic sheets are hung around the vehicle to create temporary walls while the vehicle is sprayed with primer, and are removed to allow drying.

Topcoat is applied at one of two workstations located behind an interior wall from the pre-coat/priming areas. This area is large enough to hold up to two cars being worked on simultaneously, with room to park another two cars out of range of spray guns while paint is drying. Multiple topcoats are applied, with vehicles being cycled in and out of the work stations, and to and from temporary storage.

Depending on the type of work being done, the vehicle may be air-dried, or manually pushed into a drying oven. Each topcoat is followed by a drying period.

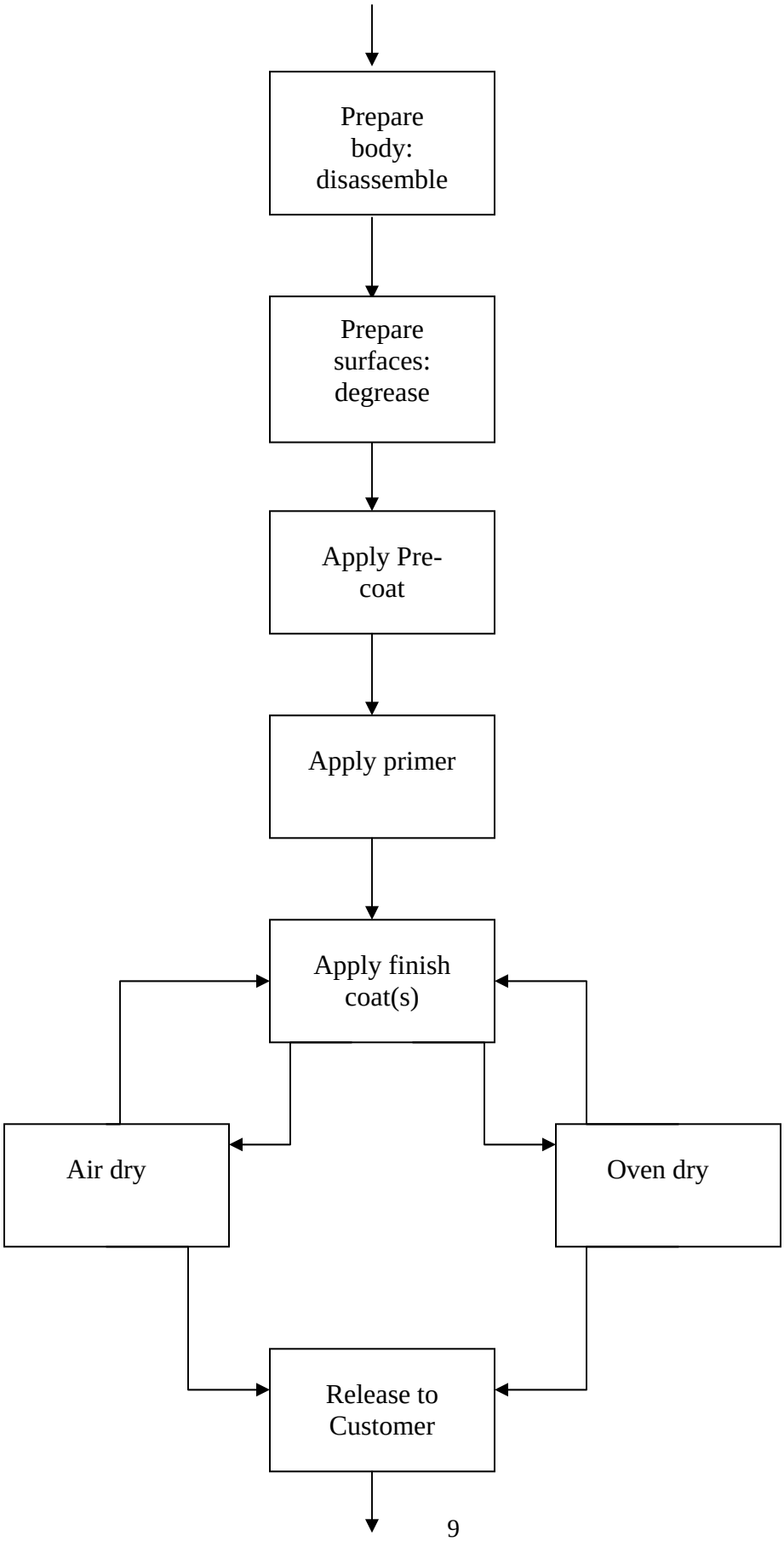
Finally, the vehicle is released, either directly to the owner or back into under-cover storage awaiting pickup.

Clean up of paint guns is done after each job by running solvent through the gun, under pressure, until all paint is expunged. No solvent is recovered from this operation. Solvent recovery from degreasing is done at the end of each day. Clean up of leaks and spills from paint cans, or from transferring paint from cans to gun canisters, is done immediately using solvent.

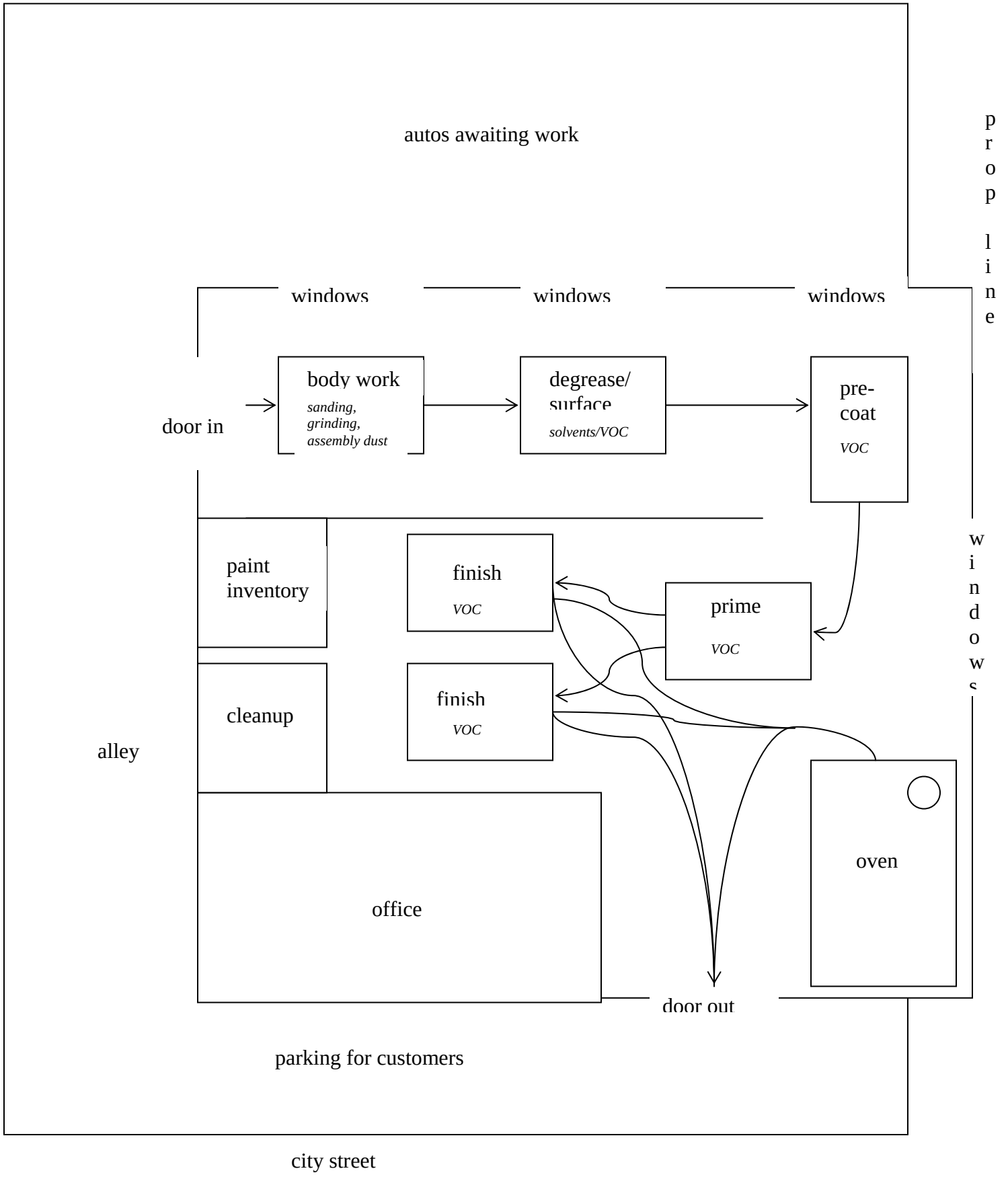
Materials are purchased and are held in inventory at the body/paint shop. A formal inventory checkout system has been implemented and materials used for a job are rigorously recorded. No significant spillage or leakage problems have been reported from storage.

John’s Auto Body Shop uses equipment which was purchased in the mid-1990s for all its spray operations. Exact make and model information does not seem to be available. No spray booths are used. No air pollution control is in place. Within the body/paint shop, overhead fans and open windows on three walls provide air movement. Workers wear body suits and respirators while working on vehicles. Three of the work staff would be considered to be fully experienced (5 or more years in the business); the remaining two individuals are learning their craft on-the-job under the tutoring of the more experienced workers. While the five workers rotate among the workstations so as to provide overlap and coverage; there is also some specialization among them.

“John’s Auto Body Shop” – Example Process Flow Chart



John's Auto Body Shop – Example Plot Plan



John's Auto Body Shop – Example Emissions Worksheet for Process Steps and Pollutants (CY 2003 actual amounts used)

Process Step	Type of material	Material usage/ year	Material UOM	Pollutant	Emission Factor (Pollutants per unit of material used)	Emission Factor UOM	Lb pollutants emitted/year w/o controls	Tons pollutants emitted/year w/o controls	Air pollution control equipment	Control equipment efficiency	Pollutants emitted/ year with controls
Body work	Sanding	minimal		PM				negligible	none		
Degrease/surface prep	Solvent	100	gallons	VOC	6.6	lb/gallon	660	0.33	none		
Pretreatment	Pretreatment Coat	3000	gallons	VOC	6.5	lb/gallon	19500	9.75	none		
	Precoat	3000	gallons	VOC	5.5	lb/gallon	16500	8.25			
Prime	Primer/Primer Surface	3000	gallons	VOC	4.8	lb/gallon	14400	7.2	none		
	Primer Sealer	3000	gallons	VOC	4.6	lb/gallon	13800	6.9			
Finish coat	Three or four stage topcoat system	5000	gallons	VOC	5.2	lb/gallon	26000	13	none		
Dry	Included above								none		
Cleanup	Solvent	100	gallons	VOC	6.6	lb/gallon	660	0.33	none		
Storage	Paints/Solvents							negligible	none		
{Total}							91520	45.76			

Non-Process Sources with Negligible Emissions

Parking lot	paved
Heat source	electrical

C. TABLE OF ANNUAL EMISSIONS

The initial registration and annual registration must include an estimate of actual emissions taking into account equipment, operating conditions, and air pollution control measures.

For an existing air pollution source that operated during the calendar year preceding the initial registration or annual registration submittal, the actual emissions are the actual rate of emissions for the preceding calendar year and must be calculated using the actual operating hours, production rates, in-place control equipment, and types of materials processed, stored, or combusted during the preceding calendar year.

For a new air pollution source that is submitting its initial registration, the actual emissions are the estimated actual rate of emissions for the current calendar year.

The procedure for estimating actual emissions for your air pollution source involves five steps:

Step 1: Conduct a source-wide inventory of air pollutant emitting equipment and activities.
Step 2: Identify the emission estimation method that you will use for each piece of equipment or activity.
Step 3: Gather the records for the appropriate calendar year that are needed for the chosen emission calculation methods.
Step 4: Calculate the actual emissions for each piece of equipment and activity.
Step 5: Sum the emissions from all equipment and activities at your source.

STEP 1: Conduct a source-wide inventory

The list of air pollution generating equipment and activities developed above is your source-wide inventory of air pollution generating equipment and activities.

STEP 2: Identify the emission estimation methods

The emission estimates must be based upon actual test data or, in the absence of such data, upon procedures acceptable to the Regional Administrator. Any emission estimates submitted to the Regional Administrator must be verifiable using currently accepted engineering criteria. The following methods are generally acceptable for estimating emissions from air pollution sources:

- Source-specific emission tests;
- Mass balance calculations;
- Published, verifiable emission factors that are applicable to the source;
- Other engineering calculations; or
- Other procedures to estimate emissions specifically approved by the Regional Administrator.

Further information on emission factors and other approaches to estimating actual emissions can be found on EPA Region 10's FARR Registration web page:

https://www.epa.gov/farr/registration-and-reporting-under-farr

STEP 3: Gather appropriate records

With the exception of in-stack continuous emission monitors, all emission estimate methodologies require you to have records of activity levels for your equipment or air pollution generating activities, such as the type and amount of fuel burned, the amount of raw materials processed or stored, or the amount of final product produced. You will need to collect and retain records of the information used in your chosen emissions estimation method. These records will need to cover a calendar year (January 1 through December 31) and will need to be retained for five years as required by EPA's Registration Rule.

STEP 4: Calculate actual emissions for each piece of equipment and activity

Once you have determined which emissions estimation method you will use and have gathered your activity records for each piece of air pollutant emitting equipment and activity, it is a simple process to calculate the actual emissions for the calendar year. Since each piece of equipment or activity will emit one or more of the 14 air pollutants required to be reported, it is recommended that you use a spreadsheet or table structure to keep track of the emissions from each piece of equipment and activity. It is then easy to sum all of the emissions from all equipment and activities to get your source-wide totals. The following is an example of how this can be done:

Example Worksheet for Actual Emissions from Equipment and Activities for a Source with Multiple Pollutants

Pollutant	Equipment 1	Equipment 2	Activity 1	Activity 2	TOTAL
PM	10.00	5.00			15.00
PM_{10}	5.00	3.00		1.00	9.00
$PM_{2.5}$	2.00	3.00			5.00
SO_x	20.00				20.00
NO_x	10.00				10.00
CO	10.00				10.00
VOC	1.00		8.00		9.00
Pb		.10			.10
NH_3				3.00	3.00
Fluorides		1.00			1.00
H_2SO_4		.10			.10
H_2S	1.00				1.00
TRS	1.00				1.00
RSC	1.00				1.00

STEP 5: Sum actual emissions for entire source

The following table should be completed by inserting estimates of the total actual emissions in tons/year for all pollutants contained in your worksheet stated above.

Example Summary Table for a Source with Multiple Pollutants

Pollutant	Total Emissions
PM	15.00
PM_{10}	9.00
$PM_{2.5}$	5.00
SO_x	20.00
NO_x	10.00
CO	10.00
VOC	9.00
Pb	.10
NH_3	3.00
Fluorides	1.00
H_2SO_4	.10
H_2S	1.00
TRS	1.00
RSC	1.00

Definition of acronyms

PM	Particulate Matter
PM_{10}	Particulate Matter less than 10 microns in size
$PM_{2.5}$	Particulate Matter less than 2.5 microns in size
SO_x	Sulfur Oxides
NO_x	Nitrogen Oxides
CO	Carbon Monoxide
VOC	Volatile Organic Compound
Pb	Lead and lead compounds
NH_3	Ammonia
Fluorides	Both gaseous and particulate
H_2SO_4	Sulfuric Acid Mist
H_2S	Hydrogen Sulfide
TRS	Total Reduced Sulfur
RSC	Reduced Sulfur Compounds.

Annual Reporting Requirements for Part 71 Sources

Sources with Federal Operating Permits (Part 71 Permits) are exempt from all of the requirements of the Registration Rule except for the annual reporting of their actual emissions. This requirement is in addition to the Part 71 Permit requirement to report certain emissions for fee purposes. Part 71 sources must report their actual emissions at the same time as they are required to report their fee calculations. Many of the same pollutants are required to be reported by the Registration Rule and the Part 71 fee calculations. For these pollutants, the same approach for calculating actual emissions will be acceptable for both requirements. But there are some pollutants that are required to be reported by the Registration Rule and others that are required to be reported under the Part 71 program for fee purposes. These pollutants are shown in the following table.

Pollutants Required to be Reported under Registration Rule and Part 71 Permit Fees		
Pollutant	**Registration Rule**	**Part 71 Permit (Fees)**
PM	x	
PM_{10}	x	x
$PM_{2.5}$	x	x
SO_x (sulfur oxides) as SO_2 (sulfur dioxide)	x	x
NO_x (nitrogen oxides)	x	x
CO (carbon monoxide)	x	
VOC (volatile organic compounds)	x	x
Pb and Pb compounds (lead)	x	x
NH_3 (ammonia)	x	
F (gaseous and particulate fluorides)	x	x
H_2SO_4 (sulfuric acid mist)	x	x
H_2S (hydrogen sulfide)	x	x
TRS (total reduced sulfur)	x	x
RSC (reduced sulfur compounds)	x	x
HCL (hydrogen chloride)		x
Dioxins and Furans		x
189 HAPs (hazardous air pollutants) in 112(b)		x

Note that under the Part 71 program, emissions greater than 4000 tons per year of any single pollutant are not counted for fee purposes. Also, emissions of pollutants that could be included in more than one category are not counted twice for fee purposes. Finally, emissions from insignificant emission units can be excluded from fee calculations.

Confidential Treatment of Information

You may assert a business confidentiality claim covering any portion of the submitted information as provided in 40 C.F.R. part 2, subpart B. Please submit any information you claim as confidential business information separately, along with your claim of confidentiality. Note that emissions data and information necessary to determine emissions is not entitled to confidential treatment. Failure to assert a claim in the manner described in 40 C.F.R. part 2, subpart B allows the submitted information to be released to the public without further notice.

Information subject to a business confidentiality claim may be disclosed by EPA only to the extent set forth in the above-cited regulations.

D. OWNER OR OPERATOR CERTIFICATION OF TRUTH, ACCURACY AND COMPLETENESS.

This section must be completed by either the owner of the source or the operator of the source, as identified in Section A. above. If the owner or operator is an individual or sole proprietorship, then that individual or sole proprietor must be the certifying official. If the owner or operator is a partnership, then a general partner must be the certifying official. If the owner or operator is a corporation, then the certifying official should be a high-level official within the corporation who has the authority to ensure compliance with air quality requirements for the source.

Certifying Official Information: Identify the certifying official and provide contact information.

Name: (Last) Smith (First) John (Middle) Edward

Title Owner

Street or P.O. Box 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

e.mail address john@johnsautobodyshop.com

Certification of Truth, Accuracy and Completeness: The Certifying Official must sign this statement after the form is completed.

I certify that, based on information and belief formed after reasonable inquiry, the statements and information contained in these documents are true, accurate and complete.

Name (signed) _____

Name (printed or typed) John Edward Smith Date 1 / 03 / 2007

Return completed forms and attachments to:

EPA Region 10

FARR Registration Coordinator

Air and Radiation Division

1200 Sixth Avenue, Suite 155

Seattle, WA 98101

REPORT OF CHANGE OF OWNERSHIP (EPA Form 7630-5)

After initial registration, submit a **Report of Change of Ownership** in writing within **90 days** after the effective date of change of ownership of the business or facility.

Reports must be submitted on the EPA forms. Copies of the report forms may be obtained online at EPA Region 10's web site or by calling EPA at the number listed below.

The EPA Region 10 "FARR" website www.epa.gov/farr is available for additional information and contains links to other helpful websites, including the EPA Region 10 Registration Web Page. At this web page you will find sample calculations for determining your source's potential to emit and for calculating actual and estimated emissions. In addition, there are links to specific sites to assist you in completing the registration forms.

Assistance can also be obtained by calling the "FARR" hotline, **1-800-424-4372** and asking for help with "FARR" registration forms.

Complete Section A, update any information in Section B that has changed as a result of the change of ownership, including the Table in Section C, and complete and sign Section D. Mail the completed form and attachments to the address listed at the end of Section D.

A. GENERAL INFORMATION

In this section you will provide information about the name of the previous owner and business, the location of your air pollution source, the type of business that is conducted there, the owner and operator of your source and the contact information for certain people responsible for the operation of the source and compliance with air pollution requirements.

The **Previous Source (Facility) Name** is the name of the business when it was operated by the previous owner.

The **Previous Owner's Name** is the name of the individual, sole proprietorship, partnership, or corporation that previously owned this business.

See Section A. GENERAL INFORMATION in the instructions for **INITIAL/ANNUAL SOURCE REGISTRATION (EPA Form 7630-4)** for instructions on completing the rest of this section.

The **Effective Date of Change of Ownership** is the date that the new owner is responsible for the operation of the business and compliance with applicable air quality requirements.

The following is a sample of how to complete this portion of the Report of Change of Ownership form.

Identifying Information

Previous Source (Facility) Name John's Auto Body Shop

Previous Owner's Name John Smith

New Source (Facility) Name Sally's Auto Body Shop

Air Quality Operating Permit No. (if applicable) N/A

Nature of the Business Auto body repair and refinishing SIC Code 7532

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

Source Physical Address: Street 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

Indian Reservation Name Yakama Reservation

Compliance Contact Person Sally Jones Title Owner

(Local Person responsible for source compliance with this rule)

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

Contact Person Mailing Address: Street (or PO Box #) 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

e.mail address Sally@sallysautobodyshop.com

Owner's Name_____Sally Jones_____

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_-1000

Owner Mailing Address: Street (or PO Box #) ___101 Front Street_____

City___Toppenish____ County _Yakima_State __WA__ ZIP __98948_____-____

e.mail address e.mail address Sally@sallysautobodyshop.com_

Contact ____Sally Jones_____Title_____Owner_____
(Person authorized to receive requests for data and information)

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_-1000

Contact Person Mailing Address: Street (or PO Box #) _____101 Front Street_____

City___Toppenish____ County _Yakima_State __WA__ ZIP __98948_____-____

e.mail address _Sally@sallysautobodyshop.com____

Operator's Name_____Same as owner_____(If different from owner)

New Telephone (_____) _____-_____ Ext. _____ Facsimile (_____)_____-_____

Operator Mailing Address: Street (or PO Box #) _____

City_____ County _____State _____ ZIP _____-_____

e.mail address _____

Contact _____Title_____
(Person authorized to receive requests for data and information)

Telephone (_____) _____-_____ Ext. _____ Facsimile (_____)_____-_____

Contact Person Mailing Address: Street (or PO Box #) _____

City_____ County _____State _____ ZIP _____-_____

e.mail address _____

Effective Date of Change of Ownership.

Date._06__/_01__/_2008___

B. ATTACHMENTS

Update (in separate attachments to this form) any of the information listed below that has changed as a result of the change of ownership. See Section B. ATTACHMENTS in the instructions for **INITIAL/ANNUAL SOURCE REGISTRATION (EPA Form 7630-4)** for instructions on completing this section.

Include any of the following information as attachments to this form that requires updating as a result of the change of ownership.

- □ Process flow chart identifying all processing, combustion, handling, storage, and emission control equipment
- □ Narrative description of the production processes and air pollution control equipment
- □ List of all emission units and air pollution generating activities; include model and serial numbers for portable equipment
- □ Plot Plan
  - Location of all emission units and air pollution generating activities
  - Property lines for the air pollution source
  - Elevation above grade for each emission release point
  - Distance and direction to nearest residential or commercial property.
- □ Type and quantity of fuels, including sulfur content of fuels, used on a daily, annual and maximum hourly basis
- □ Type and quantity of raw materials used or final product produced on a daily, annual and maximum hourly basis
- □ Typical operating schedule, including number of hours per day, number of days per week and number of weeks per year
- □ List of estimated efficiency of air pollution control equipment under present or anticipated operating conditions
- □ Estimates of the total actual emissions from the air pollution source for the following air pollutants: particulate matter, PM_{10}, $PM_{2.5}$, sulfur oxides (SO_x), nitrogen oxides (NO_x), carbon monoxide (CO), volatile organic compound (VOC), lead (Pb) and lead compounds, ammonia (NH_3), fluorides (gaseous and particulate), sulfuric acid mist (H_2SO_4), hydrogen sulfide (H_2S), total reduced sulfur (TRS) and reduced sulfur compounds, including all calculations for the estimates.
- □ Other (provide details).

C. TABLE OF EMISSIONS

Pollutant	Total Emissions
PM	
PM_{10}	
$PM_{2.5}$	
SO_x	
NO_x	
CO	
VOC	
Pb	
NH_3	
Fluorides	
H_2SO_4	
H_2S	
TRS	
RSC	

Definition of acronyms

PM	Particulate Matter
PM_{10}	Particulate Matter less than 10 microns in size
$PM_{2.5}$	Particulate Matter less than 2.5 microns in size
SO_x	Sulfur Oxides
NO_x	Nitrogen Oxides
CO	Carbon Monoxide
VOC	Volatile Organic Compound
Pb	Lead and lead compounds
NH_3	Ammonia
Fluorides	Both gaseous and particulate
H_2SO_4	Sulfuric Acid Mist
H_2S	Hydrogen Sulfide
TRS	Total Reduced Sulfur
RSC	Reduced Sulfur Compounds.

Confidential Treatment of Information

You may assert a business confidentiality claim covering any portion of the submitted information as provided in 40 C.F.R. part 2, subpart B. Please submit any information you claim as confidential business information separately, along with your claim of confidentiality. Note that emissions data and information necessary to determine emissions is not entitled to confidential treatment. Failure to assert a claim in the manner described in 40 C.F.R. part 2, subpart B allows the submitted information to be released to the public without further notice. Information subject to a business confidentiality claim may be disclosed by EPA only to the extent set forth in the above-cited regulations.

D. OWNER OR OPERATOR CERTIFICATION OF TRUTH, ACCURACY AND COMPLETENESS.

This section must be completed by either the owner of the source or the operator of the source, as identified in Section A. above. If the owner or operator is an individual or sole proprietorship, then that individual or sole proprietor must be the certifying official. If the owner or operator is a partnership, then a general partner must be the certifying official. If the owner or operator is a corporation, then the certifying official should be a high-level official within the corporation who has the authority to ensure compliance with air quality requirements for the source.

Certifying Official Information: Identify the certifying official and provide contact information.

Name: (Last)_____Jones_____(First)__Sally_____(Middle)____Mae___

Title_____Owner_____

Street or P.O. Box_____101 Front Street_____

City___Toppenish____ County _Yakima_State __WA_ ZIP __98948_____-____

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_- 1000

e.mail address_____Sally@sallysautobodyshop.com_

Certification of Truth, Accuracy and Completeness: The Certifying Official must sign this statement after the form is completed.

I certify that, based on information and belief formed after reasonable inquiry, the statements and information contained in these documents are true, accurate and complete.

Name (signed)_____

Name (printed or typed)_____Sally Jones_____Date__08__/__01__/_2008____

Return completed forms and attachments to:

EPA Region 10

FARR Registration Coordinator

Air and Radiation Division

1200 Sixth Avenue , Suite 155

Seattle, WA 98101

REPORT OF CLOSURE (EPA Form 7630-6)

Except for regular seasonal closures, after initial registration, submit a **Report of Closure** in writing within **90 days** after cessation of all operations.

Reports must be submitted on the EPA forms. Copies of the report forms may be obtained online at EPA Region 10's web site or by calling EPA at the number listed below.

The EPA Region 10 "FARR" website www.epa.gov/farr is available for additional information and contains links to other helpful websites, including the EPA Region 10 Registration Web Page. At this web page you will find sample calculations for determining your source's potential to emit and for calculating actual and estimated emissions. In addition, there are links to specific sites to assist you in completing the registration forms.

Assistance can also be obtained by calling the "FARR" hotline, **1-800-424-4372** and asking for help with "FARR" registration forms.

Complete Section A, provide the information in Section B, complete and sign Section C, and mail the completed form and attachments to the address listed at the end of Section C.

A. GENERAL INFORMATION

The **Effective Date of the Source Closure** is the date when all activities related to the operation of the business and all activities related to the shutdown of operations at the source have ceased.

See Section A. GENERAL INFORMATION in the instructions for **INITIAL/ANNUAL SOURCE REGISTRATION (EPA Form 7630-4)** for instructions on completing the rest of this section.

The following is a sample of how to complete this portion of the Report of Closure form.

Identifying Information

Source (Facility) Name Sally's Auto Body Shop

Effective Date of the Source Closure 10 / 01 / 2010

Air Quality Operating Permit No. (if applicable) N/A

Nature of the Business Auto body repair and refinishing SIC Code 7532

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

Source Physical Address: Street 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

Indian Reservation Name Yakama Reservation

Compliance Contact Sally Jones Title Owner

(Local Person responsible for source compliance with this rule)

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

Contact Person Mailing Address: Street (or PO Box #) 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

e.mail address Sally@sallysautobodyshop.com

Owner's Name_____Sally Jones_____

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_- 1000

Owner's Mailing Address: Street (or PO Box #) ____101 Front Street__

City___Toppenish____ County _Yakima_State __WA_ ZIP __98948____-____

e.mail address Sally@sallysautobodyshop.com

Contact _____Sally Jones_____Title___Owner___
(Person authorized to receive requests for data and information)

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_- 1000

Contact Mailing Address: Street (or PO Box #) _____101 Front Street___

City___Toppenish____ County _Yakima_State __WA_ ZIP __98948____-____

e.mail address __Sally@sallysautobodyshop.com

Operator's Name_____Same as owner_____(If different from owner)

Telephone (_____) _____-_____ Ext. _____ Facsimile (_____)_____-_____

Operator's Mailing Address: Street (or PO Box #) _____

City_____ County_____ State _____ ZIP _____-_____

e.mail address _____

Contact _____Title_____
(Person authorized to receive requests for data and information)

Telephone (_____) _____-_____ Ext. _____ Facsimile (_____)_____-_____

Contact Mailing Address: Street (or PO Box #) _____

City_____ County_____ State _____ ZIP _____-____

e.mail address _____

B. REPORT OF CLOSURE.

Provide a written description of closure activities and/or care and maintenance activities performed at the source and a statement describing the duration of the source closure. (e.g. temporary vs. permanent). This should include a description of any partial operation of the source, any temporary storage of equipment or materials, and any demolition activities that will occur at the plant site.

Confidential Treatment of Information

You may assert a business confidentiality claim covering any portion of the submitted information as provided in 40 C.F.R. part 2, subpart B. Please submit any information you claim as confidential business information separately, along with your claim of confidentiality. Note that emissions data and information necessary to determine emissions is not entitled to confidential treatment. Failure to assert a claim in the manner described in 40 C.F.R. part 2, subpart B allows the submitted information to be released to the public without further notice. Information subject to a business confidentiality claim may be disclosed by EPA only to the extent set forth in the above-cited regulations.

C. OWNER OR OPERATOR CERTIFICATION OF TRUTH, ACCURACY AND COMPLETENESS.

This section must be completed by either the owner of the source or the operator of the source, as identified in Section A. above. If the owner or operator is an individual or sole proprietorship, then that individual or sole proprietor must be the certifying official. If the owner or operator is a partnership, then a general partner must be the certifying official. If the owner or operator is a corporation, then the certifying official should be a high-level official within the corporation who has the authority to ensure compliance with air quality requirements for the source.

Certifying Official Information: Identify the certifying official and provide contact information.

Name: (Last)_____Jones_____(First)__Sally_____(Middle)____Mae___

Title_____Owner_____

Street or P.O. Box_____101 Front Street_____

City___Toppenish____ County _Yakima_State __WA_ ZIP __98948_____-____

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_- 1000

e.mail address_____Sally@sallysautobodyshop.com_

Certification of Truth, Accuracy and Completeness: The Certifying Official must sign this statement after the form is completed.

I certify that, based on information and belief formed after reasonable inquiry, the statements and information contained in these documents are true, accurate and complete.

Name (signed)_____

Name (printed or typed)_____Sally Jones_____Date__12_/_01__/2010

Return completed forms and attachments to:

EPA Region 10

FARR Registration Coordinator

Air and Radiation Division

1200 Sixth Avenue, Suite 155

Seattle, WA 98101

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REPORT OF RELOCATION (EPA Form 7630-7)

For any source relocation after initial registration, submit a **Report of Relocation** in writing no later than **30 days prior** to relocation of the source.

Reports must be submitted on the EPA forms. Copies of the report forms may be obtained online at EPA Region 10's web site or by calling EPA at the number listed below.

The EPA Region 10 "FARR" website www.epa.gov/farr is available for additional information and contains links to other helpful websites, including the EPA Region 10 Registration Web Page. At this web page you will find sample calculations for determining your source's potential to emit and for calculating actual and estimated emissions. In addition, there are links to specific sites to assist you in completing the registration forms.

Assistance can also be obtained by calling the "FARR" hotline, **1-800-424-4372** and asking for help with "FARR" registration forms.

Complete Section A, update any information in Section B that has changed as a result of the change of ownership, including the Table in Section C, and complete and sign Section D. Mail the completed form and attachments to the address listed at the end of Section D.

A. GENERAL INFORMATION

In this section you will provide information about the previous location of the business, the new location of your air pollution source, and any changes to the type of business that is conducted there or the contact information for certain people responsible for the operation of the source and compliance with air pollution requirements.

The **New Source Physical Address** is the new location of your business after the relocation.

The **Previous Physical Address** is the old location of your business before the relocation.

See Section A. GENERAL INFORMATION in the instructions for **INITIAL/ANNUAL SOURCE REGISTRATION (EPA Form 7630-4)** for instructions on completing the rest of this section.

The **Effective Date of Source Relocation** is the date that business operations begin at the new location and air pollutant generating equipment or activities begin operation.

The following is a sample of how to complete this portion of the Report of Change of Ownership form.

Identifying Information

Source (Facility) Name Sally's Auto Body Shop

Air Quality Operating Permit No. (if applicable)

Nature of the Business Auto body repair and refinishing SIC Code 7532

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

New Source Physical Address: Street 202 Main St.

City Wapato **County** Yakima **State** WA **ZIP** 98951 -

Previous Physical Address: Street 101 Front Street

City Toppenish County Yakima State WA ZIP 98948 -

Indian Reservation Name Yakama

Compliance Contact Person Sally Jones Title Owner

(Local Person responsible for source compliance with this rule)

Telephone (509) 555 - 1212 Ext. 100 Facsimile (509) 555 - 1000

Contact Person Mailing Address: Street (or PO Box #) 202 Main St

City Wapato **County** Yakima **State** WA **ZIP** 98951 -

e.mail address Sally@sallysautobodyshop.com

Owner's Name_____Sally Jones _____

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_-1000

Owner Mailing Address: Street (or PO Box #) _____202 Main St._____

City____Wapato_____ **County**__Yakima___ **State** __WA__ **ZIP** _98951__-____

e.mail address ____Sally@sallysautobodyshop.com_

Contact _____Sally Jones _____Title_____

(Person authorized to receive requests for data and information)

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_-1000

Contact Mailing Address: Street (or PO Box #) ____202 Main St.____

C **City**____Wapato_____ **County**__Yakima___ **State** __WA__ **ZIP** _98951__-____

e.mail address __Sally@sallysautobodyshop.com_

Operator's Name _____Same as Owner ____(If different from owner)

Telephone (_____) _____-_____ Ext. _____ Facsimile (_____)_____-_____

Operator's Mailing Address: Street (or PO Box #) _____ _____

City_____ County _____State _____ ZIP _____-_____

e.mail address _____

Contact _____Title_____

(Person authorized to receive requests for data and information)

Telephone (_____) _____-_____ Ext. _____ Facsimile (_____)_____-_____

Contact Mailing Address: Street (or PO Box #) _____

City_____ County_____State _____ ZIP _____-_____

e.mail address _____

Effective Date of Source Relocation.

Date_10_/_01_/_2009_

B. REPORT OF RELOCATION

Provide a written description of relocation activities. Update (in separate attachments to this form) any of the information listed below that has changed as a result of the change of ownership. See Section B. ATTACHMENTS in the instructions for **INITIAL/ANNUAL SOURCE REGISTRATION (EPA Form 7630-4)** for instructions on completing this section.

Include any of the following information as attachments to this form that requires updating as a result of the change of ownership.

- □ Process flow chart identifying all processing, combustion, handling, storage, and emission control equipment
- □ Narrative description of the production processes and air pollution control equipment
- □ List of all emission units and air pollution generating activities; include model and serial numbers for portable equipment
- □ Plot Plan
  - Location of all emission units and air pollution generating activities
  - Property lines for the air pollution source
  - Elevation above grade for each emission release point
  - Distance and direction to nearest residential or commercial property.
- □ Type and quantity of fuels, including sulfur content of fuels, used on a daily, annual and maximum hourly basis
- □ Type and quantity of raw materials used or final product produced on a daily, annual and maximum hourly basis
- □ Typical operating schedule, including number of hours per day, number of days per week and number of weeks per year
- □ List of estimated efficiency of air pollution control equipment under present or anticipated operating conditions
- □ Estimates of the total actual emissions from the air pollution source for the following air pollutants: particulate matter, PM_{10}, $PM_{2.5}$, sulfur oxides (SO_x), nitrogen oxides (NO_x), carbon monoxide (CO), volatile organic compound (VOC), lead (Pb) and lead compounds, ammonia (NH_3), fluorides (gaseous and particulate), sulfuric acid mist (H_2SO_4), hydrogen sulfide (H_2S), total reduced sulfur (TRS) and reduced sulfur compounds, including all calculations for the estimates.
- □ Other (provide details).

C. TABLE OF EMISSIONS

Pollutant	Total Emissions
PM	
PM_{10}	
$PM_{2.5}$	
SO_x	
NO_x	
CO	
VOC	
Pb	
NH_3	
Fluorides	
H_2SO_4	
H_2S	
TRS	
RSC	

Definition of acronyms

PM	Particulate Matter
PM_{10}	Particulate Matter less than 10 microns in size
$PM_{2.5}$	Particulate Matter less than 2.5 microns in size
SO_x	Sulfur Oxides
NO_x	Nitrogen Oxides
CO	Carbon Monoxide
VOC	Volatile Organic Compound
Pb	Lead and lead compounds
NH_3	Ammonia
Fluorides	Both gaseous and particulate
H_2SO_4	Sulfuric Acid Mist
H_2S	Hydrogen Sulfide
TRS	Total Reduced Sulfur
RSC	Reduced Sulfur Compounds.

Confidential Treatment of Information

You may assert a business confidentiality claim covering any portion of the submitted information as provided in 40 C.F.R. part 2, subpart B. Please submit any information you claim as confidential business information separately, along with your claim of confidentiality. Note that emissions data and information necessary to determine emissions is not entitled to confidential treatment. Failure to assert a claim in the manner described in 40 C.F.R. part 2, subpart B allows the submitted information to be released to the public without further notice. Information subject to a business confidentiality claim may be disclosed by EPA only to the extent set forth in the above-cited regulations.

D. OWNER OR OPERATOR CERTIFICATION OF TRUTH, ACCURACY AND COMPLETENESS.

This section must be completed by either the owner of the source or the operator of the source, as identified in Section A. above. If the owner or operator is an individual or sole proprietorship, then that individual or sole proprietor must be the certifying official. If the owner or operator is a partnership, then a general partner must be the certifying official. If the owner or operator is a corporation, then the certifying official should be a high-level official within the corporation who has the authority to ensure compliance with air quality requirements for the source.

Certifying Official Information: Identify the certifying official and provide contact information.

Name: (Last)_____Jones_____(First)__Sally_____(Middle)____Mae___

Title_____Owner_____

Street or P.O. Box_____202 Main Street_____

City____Wapato_ **County**__ _Yakima ___ **State** __WA__ **ZIP** _98951__-____

Telephone (_509_) _555_-_1212_ Ext. _100_ Facsimile (_509_)_555_- 1000

e.mail address_____Sally@sallysautobodyshop.com_

Certification of Truth, Accuracy and Completeness: The Certifying Official must sign this statement after the form is completed.

I certify that, based on information and belief formed after reasonable inquiry, the statements and information contained in these documents are true, accurate and complete.

Name (signed)_____

Name (printed or typed)_____Sally Jones_____Date_08__/_01__/_2009

Return completed forms and attachments to:

EPA Region 10

FARR Registration Coordinator

Air and Radiation Division

1200 Sixth Avenue, Suite 155

Seattle, WA 98101