BAY AREA AIR QUALITY MANAGEMENT DISTRICT

Data Form X Additional Data

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| for office use only |
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| Form X is for additional information for an existing source only. If your company has not previously submitted any information his source, then do not complete Form X; use instead, the applicable Source Data Form(s) $- C$, G , S , T . |
| 1. Business Name: (if unknown, leave blank) Plant No: |
| Source No |
| 2. Complete only one of the parts below. Check: Part 1 Part 2 Part 3 Part 4 Part 5 |
| Part 1 – COMBUSTION SOURCE – Information for an additional fuel not previously reported. |
| 3. Fuel Code* 12-month fuel consumption - total usage units* |
| 4. Typical percent of annual total: Dec-Feb% Mar-May% Jun-Aug% Sep-Nov% |
| 5. Max. fuel use rate, usage units*/hr Typical heat content, BTU/usage unit* |
| 6. Typical sulfur content, ppm for gaseous fuels,ppm or % wt for others% |
| 7. Complete the Emission Factor Table at the end of this Form. |
| Part 2 – GENERAL SOURCE – Information for an additional process material not previously reported. |
| 8. Material Code* 12-month throughput, total usage units* |
| 9. Typical percent of annual total: Dec-Feb% Mar-May% Jun-Aug% Sep-Nov% |
| 10. Typical operating time:hours/daydays/weekweeks/year |
| 11. Maximum operating rateusage units*/hr |
| 12. Exhaust flowrateCFM at°F with approximate water vapor content% |
| 13. Complete the Emission Factor Table at the end of this Form. |
| Part 3 – TANKAGE OR LOADING SOURCE – Information for an additional organic liquid not previously reported. |
| 14. Material Code* 12-month throughputthousand gal orthousand bbl |
| 15. True vapor pressurepsia_or_RVPpsia and typical liquid temperature°F |
| 16. °API (if applicable): Initial boiling point °F |
| Part 4 – SURFACE COATING OR PRINTING PRESS - Information for an additional coating not previously reported. |
| 17. Material Code* for coating Total coating applied, previous 12 monthsgal |
| 18. Is this coating a "complying" coating as defined in BAAQMD Regulation 8, Rule 4? |
| 19. Percent solids, by volume% Percent solvent, by volume% |
| 20. Of the total solvent in the coating, what percent evaporates at this source?% |
| 21. Density of organic solventlb/gal |
| 22. Composition of organic solvent: |
| a) largest component: percent of solvent%; Material Code* |
| b) 2nd largest component: percent of solvent %; Material Code* |

Part 5 - OTHER SOLVENT EVAPORATION SOURCE – Information for an additional solvent not previously reported. For Solvent Cleaner Operation (degreasing, clean-up, drycleaning, etc.)

| 23. Material Code* | Net solvent usage, previous 12 months | | gal | |
|--|---------------------------------------|-------------------------------|---------|--|
| 24. If solvent is heated, temperature of solvent _ | °F | Density | lb/gal | |
| For Fiberglass Operations | | | | |
| 25. Type of resin | | _ Total used, previous 12 mon | ithsgal | |
| 26. Type of catalyst | | _ Total used, previous 12 mon | ithsgal | |
| 27. Percent styrene in resin% | | Percent of other volatiles | % | |
| For Solvent and Surface Coating Manufacturing Operations | | | | |
| 28. Material Code* of manufactured material | | | | |
| 29. Quantity manufactured, previous 12 months thousand gal | | | | |
| 30. Type of solvent used for manufacturing process, Material Code* | | | | |
| 31. Solvent evaporated during manufacturing, as percent of material produced% | | | | |
| | | | | |
| Other Solvent Use | | | | |
| 32. Material Code* Total solvent used, previous 12 monthsgal | | | | |
| 33. Is solvent "complying" as defined in BAAQMD Regulation 8? yes no | | | | |
| | | | | |
| EMISSION FACTOR TABLE – To be completed for Parts 1 and 2 | | | | |
| | ission Factors /Usage Unit)* | Basis Code** | | |
| 34. Particulate | | | | |
| 35. Organics | | | | |
| 36. Nitrogen Dioxide (as N0 ₂) | | | | |
| 37. Sulfur Dioxide | | | | |
| 38. Carbon Monoxide | | | | |
| 39. Other: | | | | |
| 40. Check box if above factors apply to emissions <u>after</u> abatement device(s). | | | | |
| *See Material Code listing **See back of Data Form G for Basis Code table. | | | | |
| Person completing this form: | | | Date: | |