



Small Business & Local Government Assistance Dry Cleaners Compliance Checklist

This checklist is for guidance purposes only. It is not a substitute for the rules and regulations. The Small Business & Local Government Assistance (SBLGA) Program is an independent section, separate from enforcement of the Texas Commission on Environmental Quality (TCEQ). Contact SBLGA on its toll-free hotline 800-447-2827 or on the SBLGA Web site <www.texasenvirohelp.org>.

Company Information ___ 1st visit ___ 2nd visit ___ C2 Renewal Site Visit Date: _____

| | | | |
|----------------------|--|----------------------------|--|
| Company Name | | Facility Contact | |
| Mailing Address | | Physical Address County | |
| Owner's Name | | Business Phone | |
| Date of Construction | | Primary SIC | |
| Start of Operation | | Secondary SIC | |
| Latitude | | Longitude | |

IMPORTANT NOTES:

■ Compliance-related questions are denoted with an asterisk (*). Answering “no” to a question with an asterisk may mean the facility is out of compliance with state or federal environmental rules.

■ Have there been any process changes since the last site visit?* YES/NO

*If yes, explain the changes and include the date of changes in the comments.

Air Regulations – Authorizations can be obtained in one of three ways:

- De Minimis Status
- Permit by Rule (PBR)
- New Source Review (NSR) Permit

| | | Yes | No | N/A |
|----|--|-----|----|-----|
| 1 | Does this facility claim De Minimis status? | | | |
| 2* | <i>In order to claim de minimis, you must answer yes to either (a) and (b), or (c).</i> | | | |
| | a. *Does the facility meet the material usage limits found in 30 TAC §116.119(a)(2)? | | | |
| | b.* Does the facility maintain records demonstrating compliance with the usage limits in 30 TAC §116.119(a)(2)? | | | |
| | c. *Or, are sources at the facility claimed as de minimis included on the "De Minimis Facilities and Sources" list? http://www.tceq.state.tx.us/permitting/air/guidance/newsourcereview/list-of-de-minimis-facilities.html | | | |
| 3 | Does this facility have an RN/CN number? If yes, RN _____ CN _____ | | | |

| | | | | |
|--|---|------------|-----------|------------|
| 4 | Does this facility have an air account number? If yes, Account No. _____ | | | |
| 5* | Does this facility have an air permit? If yes, Permit No. _____ | | | |
| 6* | If yes: Does the facility comply with all permit conditions? (Use comments section) | | | |
| 7* | Does the facility claim a Permit by Rule (PBR)? | | | |
| 8* | If yes, Does the facility meet all requirements of the PBR(s) claimed? See Below | | | |
| | a.* 106.411 – Steam or Dry Cleaning Equipment | | | |
| | b.* 106.415 – Laundry Dryers | | | |
| | c.* Other/Previous PBR: _____ | | | |
| | d.* Other/Previous PBR: _____ | | | |
| | e.* Other/Previous PBR: _____ | | | |
| 9* | Does the facility maintain records that demonstrate compliance as required by 30 TAC 106.8 for all PBRs? | | | |
| 10* | Does the facility avoid being a nuisance (noise, dust, odor, etc)? (101.4) | | | |
| Air Regulations (Chapter 101) | | Yes | No | N/A |
| 11* | Does the facility track all reportable and non-reportable emission events and report them to TCEQ by March. 31 of each year? (101.201) | | | |
| 12* | Does the facility track all reportable and non-reportable scheduled maintenance, start-up, and shut-down activities and report them to TCEQ by March 31 of each year? (101.211) | | | |
| 13* | Are all records maintained for a minimum of 5 years? | | | |
| Air Regulations (30 TAC 111, 113 Requirements) | | Yes | No | N/A |
| 14* | Does the facility comply with 30 TAC 111 requirements? (Control of Air Pollutants from Visible Emissions and Particulate Matter) | | | |
| 15* | Does the facility comply with any applicable 30 TAC 113 requirements? (Standards of Performance for HAPs) | | | |
| Air Regulations (Federal Requirements, 40 CFR 60, 61, 63) | | Yes | No | N/A |
| 16 | Does the New Source Performance Standard (NSPS) for Petroleum Dry Cleaners apply to this facility? | | | |

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|-----|---|--|--|--|
| 17* | If yes, a. * Are solvent recovery dryers used? | | | |
| | b. * Are cartridge filters used and drained in their sealed housing for at least eight hours before removal? | | | |
| | c. * Does each dryer have a manufacturer's label regarding leaks and inspections? | | | |
| | d. * Has the initial test of each dryer been conducted and properly documented? | | | |
| | e. * Is the facility in compliance with all the requirements of the New Source Performance Standards for Petroleum Dry Cleaners? | | | |
| 18 | Does the National Emission Standards for Hazardous Air Pollutants (NESHAP) Part 63, Subpart M (National Perchloroethylene Air Emission Standards for Dry Cleaning Facilities) apply to this facility? | | | |
| 19* | If yes, a. * Has the owner or operator submitted the "Notification of Compliance Status Form for Perc or PCE Dry Cleaners" (Form TCEQ-20455)? | | | |
| | b. * Does the facility calculate yearly perchloroethylene consumption (to prove area/major source applicability) by summing the volume of all perchloroethylene purchases made in each of the previous 12 months, as recorded in the log described in 40 Code of Federal Regulations (CFR) §63.324(d)(1). | | | |
| | c. * Does the owner or operator of the dry cleaning facility have all receipts of perchloroethylene purchases for the previous period of 5 years? | | | |
| | d. * If any compliance documentation is missing, does the facility qualify for any exemptions under 40 CFR § 63.320(d)-(e)? | | | |
| | e. * Does the owner or operator of the dry cleaning facility retain a copy onsite of the design specifications and the operating manuals for each dry cleaning system and each emission control device located at the dry cleaning facility? | | | |
| | f. * Is the facility in compliance with all the requirements of the National Emission Standards for Hazardous Air Pollutants (NESHAP) Part 63, Subpart M - National Perchloroethylene Air Emission Standards for Dry Cleaning Facilities? | | | |

| Dry Cleaner Registration and Fees | | Yes | No | N/A |
|---|---|------------|-----------|------------|
| 20* | Has the facility registered with the TCEQ as required by 30 TAC 337.10? | | | |
| 21* | Does the facility submit a new registration annually by August 1 of each year? | | | |
| 22* | Does the facility make their registration certificate available for review to persons delivering solvent to their facility, prior to accepting the delivery of solvent or for review by TCEQ staff? | | | |
| 23* | Has the facility verified that all solvent purchases come from a distributor that has a valid, current distributor registration with the TCEQ? | | | |
| 24* | Has the facility paid their annual registration fees? | | | |
| Dry Cleaner Environmental Response (Chapter 337) | | Yes | No | N/A |
| 25* | Does the facility have all required containment structures installed and constructed with materials as required by 30 TAC § 337.20(e)? | | | |
| 26* | Is there adequate capacity in secondary containment to hold at least 110% of the volume of liquids that can be held within the largest tank on a machine? | | | |
| 27* | Is the secondary containment area kept free of all materials or objects that would diminish its capacity to contain a leak, spill, or release? | | | |
| 28* | Has the facility conducted all required inspections, provided support documentation of the inspections, and repaired any damage discovered within 7 days as required by 30 TAC § 337.20(e)(6)? | | | |
| 29* | Has the delivery of all dry cleaning solvents been done in compliance with 30 TAC § 337.20(f)? | | | |
| Waste Regulations (General Requirements) | | Yes | No | N/A |
| 30* | Has the facility performed a hazardous waste determination on all solid waste streams? | | | |
| 31* | Does the facility maintain documentation to support all hazardous waste determinations? | | | |
| 32* | Has the facility reconciled their manifests with their records of generation to verify the amounts of waste transported off-site and disposed of? (335.9, 335.69) | | | |

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|---|--|------------------------------|--------------------------------|---------------------------|-----------------------|
| 33* | Does the facility have records of monthly waste generation to support its claimed generator status? Indicate the generator status claimed. | | | | |
| Generator Status | | Hazardous Waste/Month | Acute Waste¹ | Amount² | Storage Time |
| Y/N | | | | | |
| | CESQG | Up to 220 lbs. | Up to 2.2 lbs. | Up to 2,200 lbs. | No time limit |
| | SQG | 220-2200 lbs. | Up to 2.2 lbs. | Up to 13,200 lbs. | 180 days ³ |
| | LQG | Over 2200 lbs. | Over 2.2 lbs. | Any amount | 90 days |
| ¹ Pounds of acute hazardous waste generated per month | | | | | |
| ² Accumulation of hazardous waste per month | | | | | |
| ³ The limit is 270 days if the treatment, storage, and disposal facility is more than 200 miles away | | | | | |
| 34* | Is this facility registered with the TCEQ as a hazardous waste generator? (not required for CESQG) TCEQ Registration No. _____ EPA ID _____ | | | | |
| 35* | Is the facility's Notice of Registration (NOR) up to date, including all waste streams and waste management units? (Not required for CESQG) | | | | |
| 36* | Has the facility submitted an Annual Waste Summary each year? (Not required for CESQG) | | | | |
| 37* | Does the facility fulfill all other recordkeeping and reporting requirements for their generator status? | | | | |
| Waste Regulations (On-Site Accumulations Requirements) | | | Yes | No | N/A |
| 38* | Does the facility comply with appropriate accumulation time requirements? | | | | |
| 39* | Does the facility comply with appropriate accumulation quantity requirements? | | | | |
| 40 | Is hazardous waste accumulated in tanks at the facility? | | | | |
| 41* | a. * Has the tank system's integrity been assessed and certified by an independent, qualified, registered professional engineer? (LQG only) | | | | |
| | b. * Are tanks labeled with the words "hazardous waste"? | | | | |
| | c. * Are records kept of daily tank inspections? | | | | |

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| | d. * Do tanks have a secondary containment system designed to contain 100% of the largest tank within its boundaries? (LQG only – 40 CFR 265.193(e)) | | | |
| | e. * If yes, is the secondary containment either designed or operated to prevent run-on or infiltration of precipitation into the secondary containment system or have sufficient excess capacity to contain run-on or infiltration of precipitation from a 25 year 24 hour rainfall event? (LQG only – 40 CFR 265.193(e)) | | | |
| 42 | Is hazardous waste accumulated in container storage areas at the facility? | | | |
| 43* | If Yes: Are waste containers labeled, dated, closed, and compatible with their contents? (Required for LQG and SQG Only, although CESQG may want to adhere to also) | | | |
| 44* | If the facility is a SQG or LQG: | | | |
| | a. * Does the facility conduct weekly container inspections? | | | |
| | b. * Does the facility document weekly container inspections? | | | |
| | c. * Have employees been trained in the handling of hazardous waste, with regards to their job duties? | | | |
| | d. * Has an emergency response coordinator and alternative been designated, available 24 hours a day to respond to on-site spills and accidents? | | | |
| | e. * Have emergency numbers been posted by the telephone at the facility? | | | |
| 45 | Is hazardous waste accumulated in satellite accumulation areas at the facility? | | | |
| 46* | If yes: (required by SQG and LQG) | | | |
| | a. * Are waste containers labeled, closed and compatible with their contents? | | | |
| | b. * Is the amount of accumulated waste at each satellite accumulation point less than 55 gallons (or 1 quart of acutely hazardous waste)? | | | |
| | c. * Is waste from the satellite area moved to a waste management unit within 3 days once the 55 gallon limit (or 1 quart of acutely hazardous waste) is exceeded? | | | |
| | d. * Is the location of the satellite accumulation area documented? | | | |

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| 47* | Have all on-site and off-site hazardous waste recycling activities been registered with the TCEQ? (entered on NOR or TCEQ 0525, SQG and LQG only) | | | |
| 48* | If hazardous waste is treated, stored, or disposed of on-site, has the facility compiled a waste analysis plan (WAP) or obtained a permit for that activity? | | | |
| Waste Regulations (Transportation and Disposal Requirements) | | Yes | No | N/A |
| 49* | Does the facility use a TCEQ/EPA registered transporter? (CESQGs may transport their own waste, without a manifest, to an authorized disposal facility) | | | |
| 50* | Does the facility use a TCEQ/EPA permitted treatment, storage, disposal (TSD) facility? | | | |
| 51* | Does the facility have all applicable copies (generator/transporter/disposal) of manifests for the last 3 years? (SQG and LQG only) | | | |
| 52* | Does the facility have Land Disposal Restriction (LDR) certification statements per waste stream and disposal facility for the last 3 years? (SQG and LQG only) | | | |
| Discharge to Publicly Owned Treatment Works (POTW) (Sanitary Sewer System) | | Yes | No | N/A |
| 53 | Does the facility discharge process wastewater to the sewer system? | | | |
| 54* | If yes, has the facility obtained permission from the POTW to discharge process wastewater? | | | |
| 55* | a. Does the POTW have an approved pretreatment program? | | | |
| | b. *Does the facility have a permit to discharge process wastewater to the POTW? | | | |
| | c.* Does the facility comply with the requirements of this permit? | | | |
| 56* | If the POTW does not have an approved pretreatment program, | | | |
| | a. Is the facility a categorical industrial user subject to the requirements of any category in 40 CFR Parts 405 – 471? | | | |
| | b. * If yes, does the facility submit monitoring reports to the TCEQ each June and December? | | | |
| | c. * If no, the facility may be required to submit semi-annual monitoring reports to the TCEQ if it is a significant non-categorical industrial user. It is also recommended that the facility contact the city and inform them of the nature of their discharge. | | | |

| Discharges to Water in the State | | Yes | No | N/A |
|---|---|------------|-----------|------------|
| 57 | Does the facility discharge wastewater into surface water (via run-off, storm drains, rivers creeks, dry waterways etc)? | | | |
| 58* | If yes, does the facility have a Texas Pollutant Discharge Elimination System (TPDES) Permit? | | | |
| 59* | a. * If yes, does the facility meet the daily average flow from each outfall? | | | |
| | b. * Does the facility meet the daily maximum flow from each outfall? | | | |
| | c. * Does the facility meet the discharge limitation for each constituent? | | | |
| | d. * Does the facility conduct monitoring and sampling as required by their discharge permit? | | | |
| | e. * Does the facility submit discharge monitoring reports (DMRs) as required by their permit? | | | |
| | f. * Does the facility submit non-compliance reports as required by 40 CFR 122.41 and 30 TAC 305.125? | | | |
| 60 | Does the facility dispose of wastewater adjacent to surface water (by irrigation, evaporation pond, subsurface injection, or another approved method)? | | | |
| 61* | If yes, does the facility have a Texas Land Application Permit? (Note: If hazardous or Class I industrial waste is being disposed of, then multiple other regulations apply.) | | | |
| 62* | Discharges to on-site septic facilities | | | |
| | * Does the facility avoid discharging any process wastewater to a septic system? | | | |
| | (Note: On-site septic systems can only be used for domestic sewage) | | | |
| Public Water Supply | | Yes | No | N/A |
| 63 | Does the facility use a private well to supply drinking water to employees and customers? If no, questions 64 through 72 do not apply. | | | |
| 64 | Does the facility provide drinking water from a private well to 25 individuals a day for at least 60 days a year? | | | |

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|---------------------------|--|------------|-----------|------------|
| 65 | What type of PWS system does the facility have? | | | |
| | a. Transient, non-community – serves at least 25 people at least 60 days of the year and does not include residential service connections. | | | |
| | b. Non-transient, non-community – serves at least 25 of the same people at least 6 months out of the year and does not include residential service connections. | | | |
| 66 | What is the water source for the PWS? | | | |
| | a. Ground water | | | |
| | b. Surface water | | | |
| | c. Ground water under the influence of surface water | | | |
| 67* | Is the facility registered with the TCEQ as a PWS? | | | |
| 68* | Does the facility have a licensed operator? (transient non-community are exempt if using groundwater or purchase treated water from another public water system) | | | |
| 69* | Does the facility conduct monthly microbiological testing? | | | |
| 70* | Does the facility conduct chlorine residual testing? | | | |
| 71* | Does the facility conduct other contaminant testing as required for their system? | | | |
| | Indicate what contaminants the facility is testing for: _____ _____ _____ _____ | | | |
| 72* | Does the facility conduct water pressure testing? | | | |
| Other Requirements | | Yes | No | N/A |
| 73* | Does the facility comply with the Texas Department of State Health Services' requirements for Tier II? | | | |
| 74 | Is the facility subject to the Waste Reduction Policy Act (WRPA)? | | | |

| | | | | |
|-----|---|--|--|--|
| 75* | If yes: | | | |
| | a. * Has a Source Reduction Waste Minimization Plan (SR/WM) been developed? (SQGs, LQGs, and TRI reporters submit once every 5 years) | | | |
| | b. * Has an Executive Summary of the SR/WM Plan and a Certificate of Completeness and Correctness been submitted? (SQGs, LQGs and TRI reporters only) | | | |
| | c. * Has an Annual Progress Report been submitted? (SQGs, LQGs and TRI reporters only) | | | |
| 76* | Does the facility have Material Safety Data Sheets (MSDS) or other information for all chemicals used in the past 24 months? | | | |
| 77 | Have there been any spills at the facility? | | | |
| 78* | If yes, has the facility taken appropriate reporting and abatement actions? | | | |
| 79* | Does the facility practice good housekeeping? | | | |

Special air regulations for facilities located in the following counties

| El Paso Area | Dallas/Ft. Worth Area | Houston/Galveston/Brazoria Area | Beaumont/Port Arthur Area | Other | |
|---------------------|--|---|----------------------------------|---|--|
| El Paso | Johnson Kaufman Parker Rockwall Collin Denton Dallas Tarrant Ellis | Brazoria Chambers Fort Bend Galveston Harris Liberty Montgomery Waller | Hardin Orange Jefferson | Bastrop Bexar Caldwell Comal Gregg Guadalupe | Hays Nueces Travis Victoria Williamson Wilson |

In addition to other requirements, sources of Volatile Organic Compounds (VOC) located in the counties listed above may be required to meet requirements outlined in 30 TAC 115.

| Air Regulations (30 TAC 115 Requirements) | | Yes | No | N/A |
|--|---|------------|-----------|------------|
| 80* | Does the facility comply with any applicable 30 TAC 115 requirements? (Control of Air Pollutants from Volatile Organic Compounds) | | | |

These include, but are not limited to:

- Storage of volatile organic carbons (VOCs) (Subchapter B, Division 1);
- VOC water separator (Subchapter B, Division 3);
- Industrial wastewater containing VOCs (Subchapter B, Division 4);
- Batch Process (Subchapter B, Division 6);
- Petroleum Dry Cleaning (Subchapter F, Division 4)

Air Regulations (30 TAC 117 Requirements – Dallas/Fort Worth Area)

In addition to other requirements, sources of Nitrogen Oxides (NO_x) located in the counties in the **Dallas/Ft. Worth Ozone Nonattainment Area** listed above must meet the requirements in this section.

| Air Regulations 117 Requirements – DFW | | Yes | No | N/A |
|---|---|------------|-----------|------------|
| 81* | Is the facility a major source of NO _x as defined in 117.10(29)? | | | |
| | * If yes, is the facility compliant with all applicable parts of 117 Subchapter B? | | | |
| 82* | Is the facility a minor source of NO _x , operating a stationary internal combustion engine? | | | |
| | a. *If yes, is the facility meeting an exemption listed in 117.2103? | | | |
| | b.* If yes, does the facility have records showing compliance with the exemption and 117.2130(c), 117.2135(e), and 117.2145(b) and (c)? | | | |
| 83* | If the facility is not meeting an exemption, does the engine meet the associated emission specification and does the facility comply with the applicable operational, testing, reporting and recordkeeping requirement in 117 Subchapter D? | | | |

Air Regulations (30 TAC 117 Requirements – Houston/Galveston/Brazoria Area)

In addition to other requirements, sources of Nitrogen Oxides (NO_x) located in the counties in the **Houston/Galveston Ozone Nonattainment Area** listed above must meet the requirements of this section.

| Air Regulations 117 Requirements – HGB | | Yes | No | N/A |
|---|--|------------|-----------|------------|
| 84* | Is the facility a major source of NO _x as defined in 117.10(29)? | | | |
| | * If yes, is the facility compliant with all applicable parts of 117 Subchapter B? | | | |
| 85* | Is the facility a minor source of NO _x , operating a boiler, process heater, gas turbine, or stationary internal combustion engine? | | | |
| | a. *If yes, is the facility meeting an exemption listed in 117.2003? | | | |
| | b.* If yes, does the facility have records showing compliance with the exemption and 117.2030(c), 117.2035(g), and 117.2045(b) and (c)? | | | |

