Notification of Compliance Status for Perchloroethylene (PERC or PCE) Dry Cleaners

If you have questions on how to complete this form or about the dry cleaner program, contact the Small Business and Local Government Assistance Hotline at 800-447-2827. Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, contact us at 512-239-1066.

Facility Owner/Operator/Business Location Information

Please write the RN number at the top of the form

<table>
<thead>
<tr>
<th>CN Number:</th>
<th>Owner Name:</th>
<th>Facility/Business Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CN</td>
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<table>
<thead>
<tr>
<th>Mailing Address:</th>
<th>City, State, ZIP:</th>
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</table>

<table>
<thead>
<tr>
<th>Street Address (No P.O. Boxes)</th>
<th>City, State, ZIP:</th>
</tr>
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</table>

Facility-Specific Information

Please answer the following questions by checking the appropriate box or completing the appropriate blank:

1. Which type of facility best describes where your facility is located? (check only one):
   - [ ] In a building with residences, even if currently unoccupied (A residential building where people live/reside)
   - [ ] In a building with other commercial occupants (A non-residential, commercial building with other business tenants)
   - [ ] In a building with no other occupants (A stand-alone building with no other commercial tenants)

2. Is your perc dry cleaning facility a Major or an Area Source of hazardous air pollutants? (check only one):
   - [ ] Major Source of hazardous air pollutants (Facilities that purchase more than 2,100 gallons of perc annually)
   - [ ] Area Source of hazardous air pollutants (Facilities that purchase 2,100 gallons or less of perc annually)

3. How many gallons of perc has your facility purchased in the last 12 months?
   ____________ gallons

   - [ ] Yes
   - [ ] No

Certification

I certify that information contained in this report is accurate and true.

Signature of Responsible Official: __________________________ Date: __________________

Printed Name of Responsible Official: __________________________ Title: __________________
**Definitions/Terms**

**RN (Regulated Entity Number):** The TCEQ’s Central Registry assigns this number to sites (locations where regulated activity occurs.) The number begins with RN and is followed by nine digits. If this number has not been issued for the facility, complete a Core Data Form (TCEQ-10400) and submit it with this application. List the facility as the regulated entity.

*Please put the RN Number on the top of Page 1.* This form goes directly to Central Records. The RN number must be at the top of the form to be accepted.

**CN Number:** The TCEQ’s Central Registry assigns each customer a number that begins with CN, followed by nine digits. If the applicant does not have this number, complete a Core Data Form (TCEQ-10400) and submit it with this application. List the applicant as the customer.

**Owner Name:** List the individual or entity that owns the facility for which this form is being submitted.

**Facility/Business Name:** List the name of the facility for which this form is being submitted. A separate form must be submitted for each dry cleaning plant owned.

**Mailing Address, City, State and Zip:** Indicate the complete mailing address of the individual or entity for which this form is being submitted.

**Street Address, City, State and Zip:** Indicate the physical address for the facility for which this form is being submitted.

**Responsible Official:** May be

- The president, vice-president, secretary or treasurer of the company that owns the dry cleaning plant;
- An owner of the dry cleaning plant;
- The manager of the dry cleaning plant;
- A government official, if the dry cleaning plant is owned by the Federal, State, City, or County government; or
- A ranking military officer, if the dry cleaning plant is located at a military base

**Form Submission**

This form must be completed, signed, and sent by registered mail to the following address by **July 28, 2008**.

Texas Commission on Environmental Quality  
Central File Room MC-213  
P.O. Box 13087  
Austin, TX 78711-3087