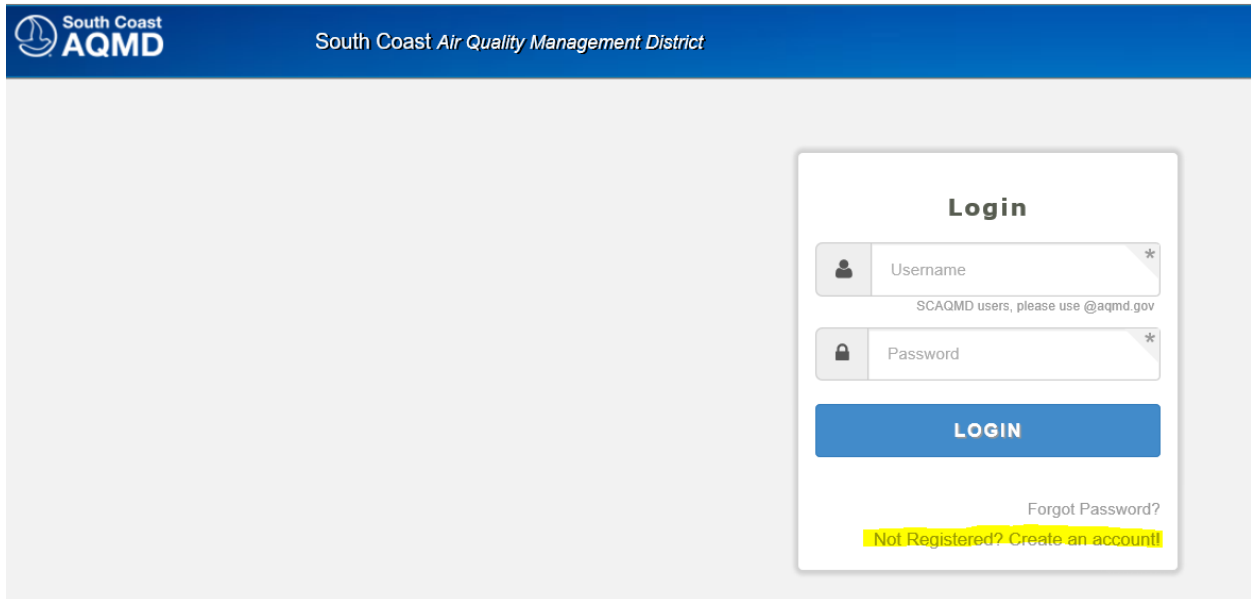
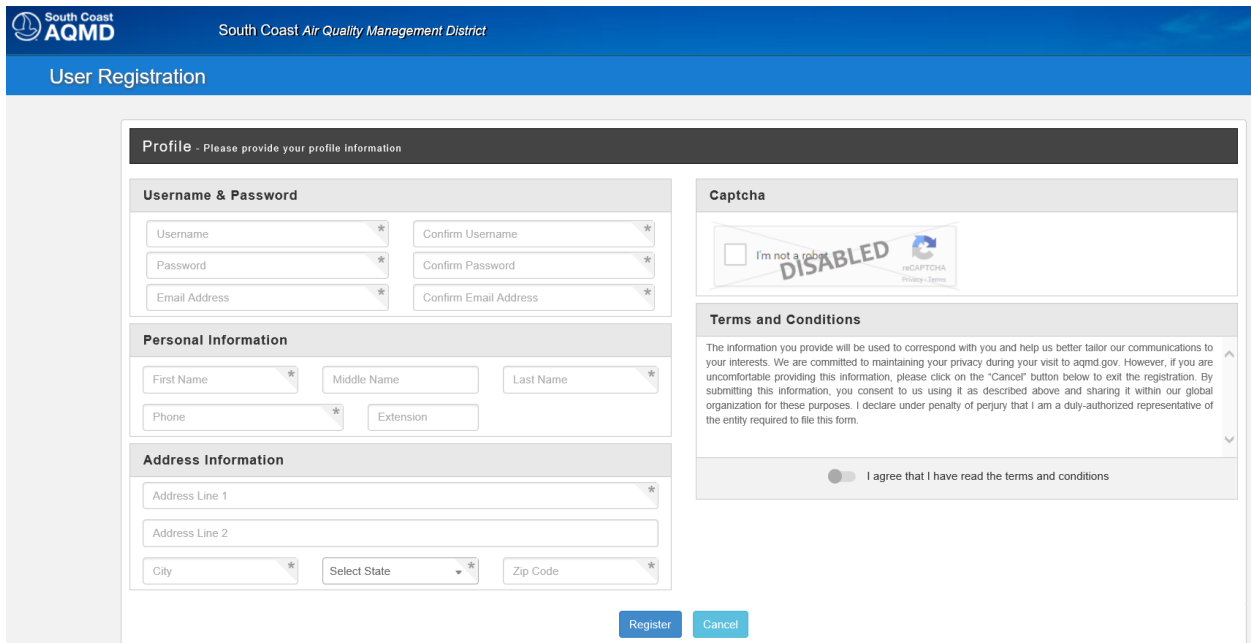


SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

1. If you have not yet created an account, click on “Not Registered? Create an account”. If you have registered, enter you Username and Password and click “Login”, and proceed to the Dashboard (jump to Step 7).

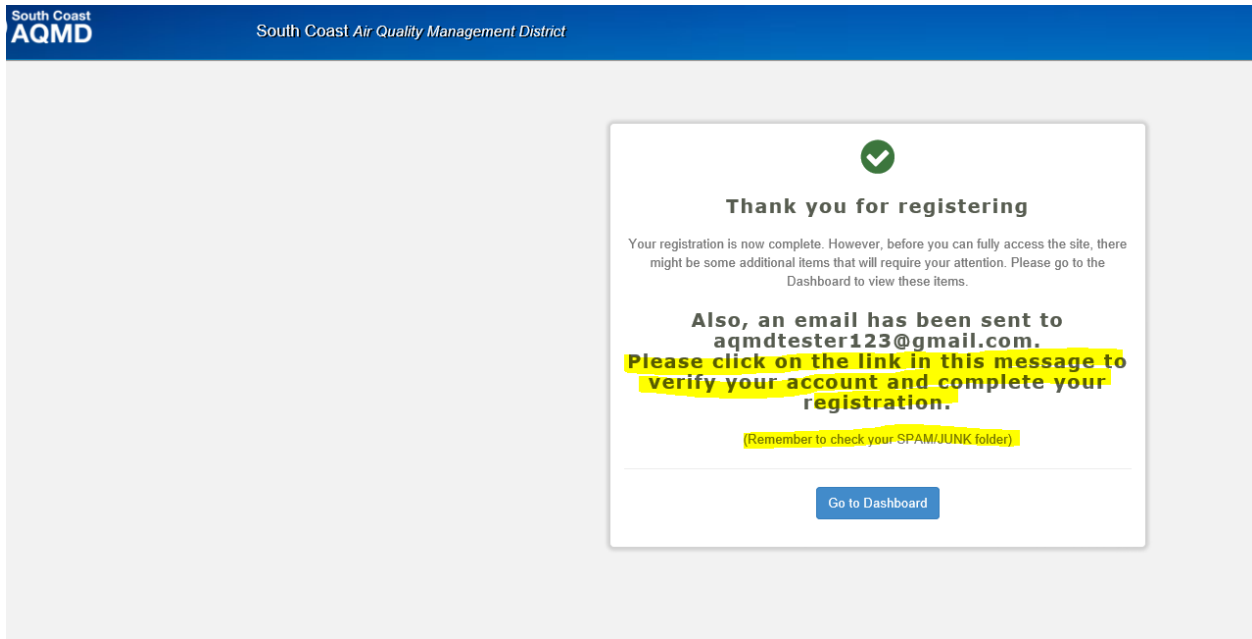


2. Create a USERNAME and PASSWORD. Provide the remaining information and click “Register”.

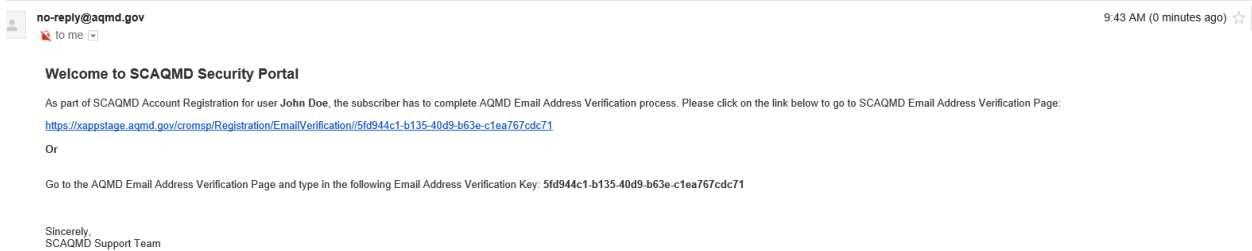


SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

3. Open the email account that you used for your registration.

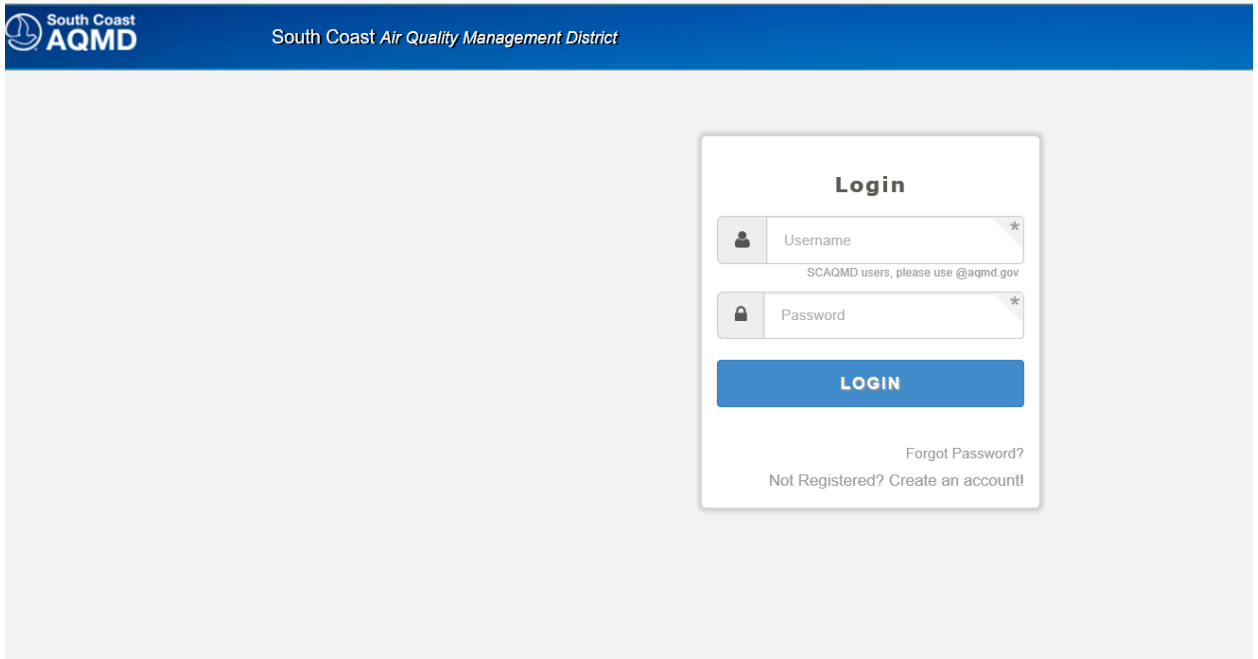


4. Click on the link in the email to complete your registration.



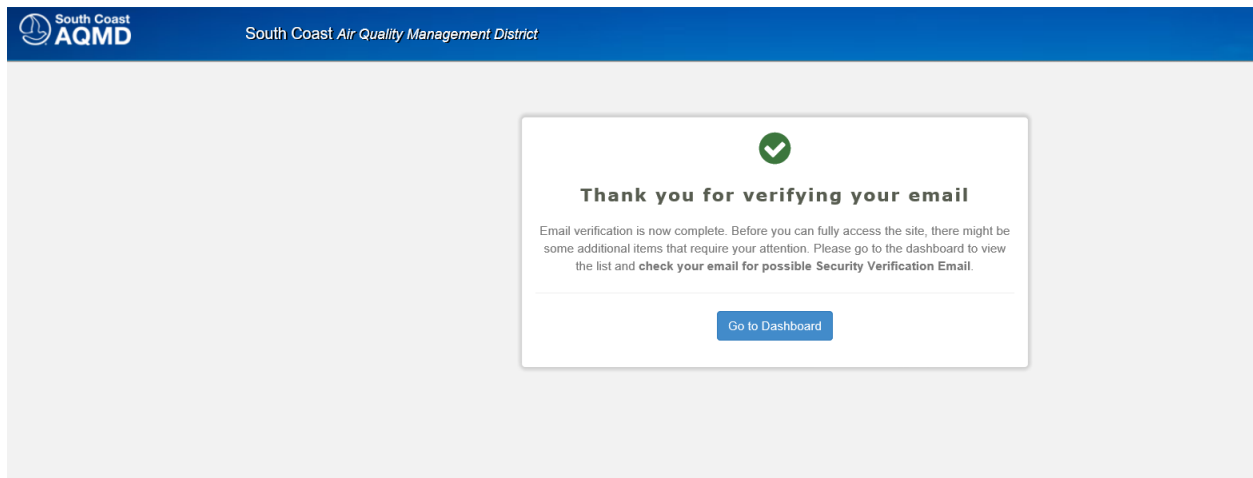
SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

5. Clicking on the link in your email will bring you to this screen. Enter your newly created USERNAME and PASSWORD, and click “LOGIN”.



The screenshot shows the SCAQMD login interface. At the top, there is a blue header with the SCAQMD logo and the text "South Coast Air Quality Management District". The main content area is light gray and contains a white login box. The box is titled "Login" and has two input fields: "Username" and "Password". Below the "Username" field, there is a note: "SCAQMD users, please use @aqmd.gov". Below the "Password" field, there is a "LOGIN" button. At the bottom of the login box, there are two links: "Forgot Password?" and "Not Registered? Create an account!"

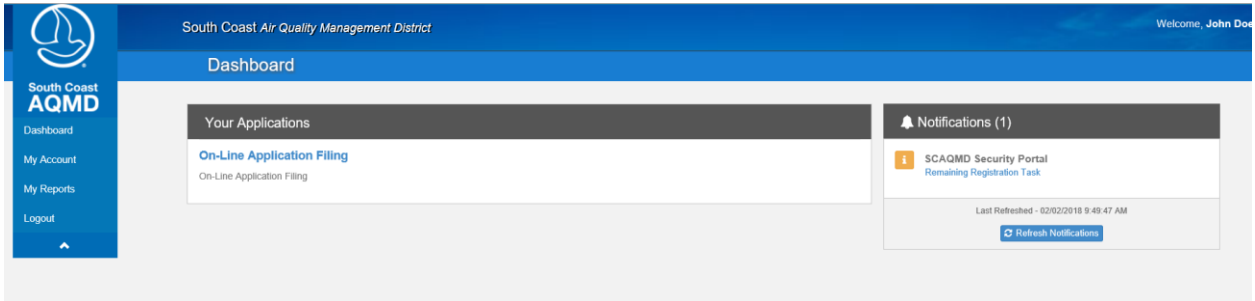
6. Your registration is now complete. Click on “Go to Dashboard” to continue.



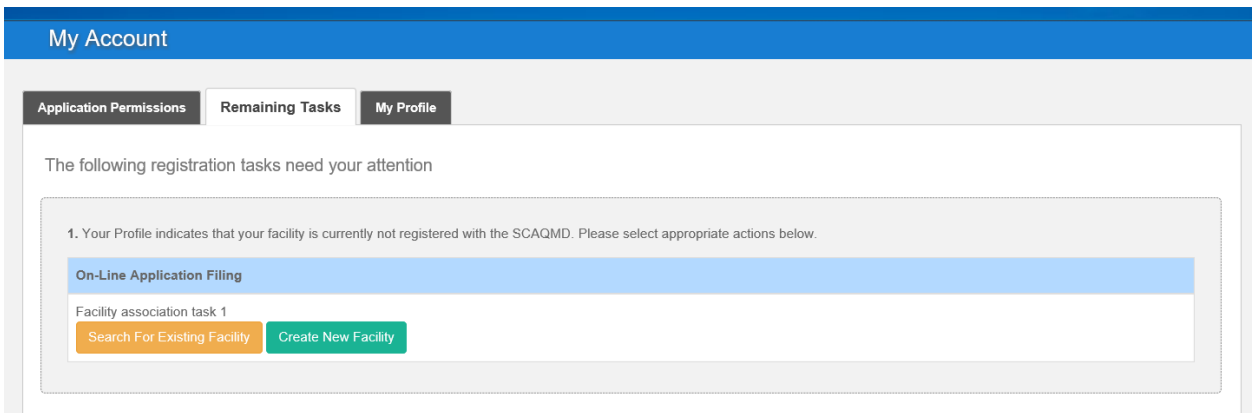
The screenshot shows the SCAQMD registration completion page. At the top, there is a blue header with the SCAQMD logo and the text "South Coast Air Quality Management District". The main content area is light gray and contains a white confirmation box. The box has a green checkmark icon at the top, followed by the heading "Thank you for verifying your email". Below the heading, there is a paragraph of text: "Email verification is now complete. Before you can fully access the site, there might be some additional items that require your attention. Please go to the dashboard to view the list and check your email for possible Security Verification Email." At the bottom of the box, there is a "Go to Dashboard" button.

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

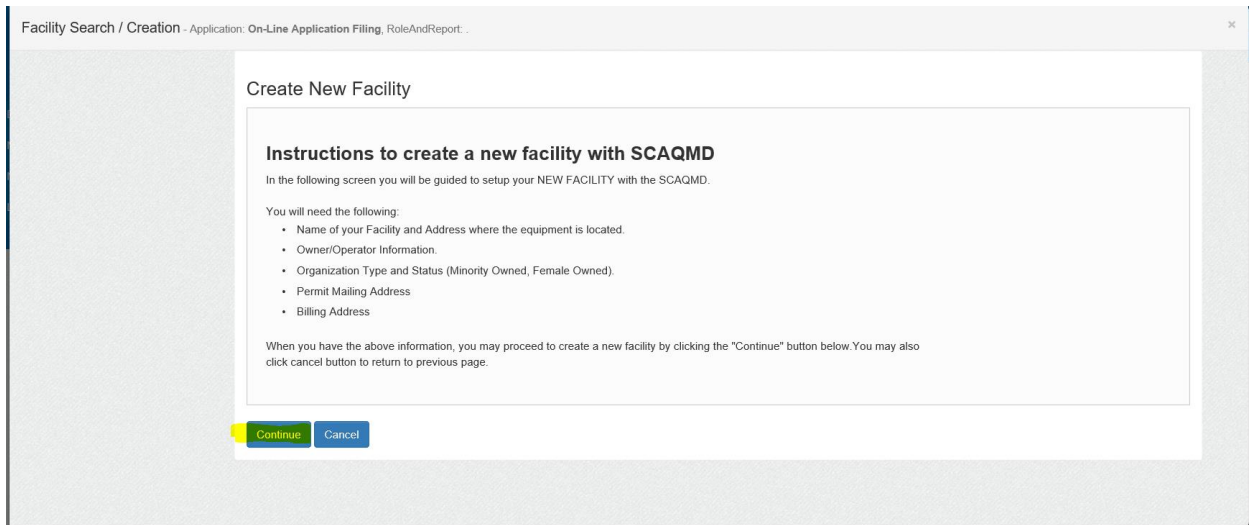
7. Click on “On-line Application Filing” in the middle of the screen.



8. If you have an existing Facility ID, click on “Search for Existing Facility”.
If you do not have an existing Facility ID, click on “Create New Facility”.



9. Clicking on “Create New Facility” will bring you to this screen. Gather the information that will be needed, and click “Continue”.



10. If you do not have a Facility ID, provide the information requested.

If your address contains a Suite #, Unit #, etc., AVOID USING A STREET DIRECTION OR SUFFIX.

Leave these two fields blank. The program will verify the address and provide a suggested correction if necessary. Enter the Suite or Unit # in the Street Name field, after the street name.

EXAMPLE: If your address is 123 Main Street, Suite 789, Diamond Bar, CA 91765,
Enter "123" in the Street # field
"Main Suite 789" in the Street Name field

Facility Search / Creation - Application: Online Application Filing, RoleAndReport: .

Create New Facility

Business Information

* Fields are required

Facility Information

*FACILITY NAME (BUSINESS NAME OF OPERATOR TO APPEAR ON THE PERMIT)

OWNER'S BUSINESS NAME (IF DIFFERENT FROM BUSINESS NAME OF OPERATOR)

Equipment Location Contact and Address

PREFIX *FIRST NAME *LAST NAME SUFFIX

TITLE DEPARTMENT

*EMAIL *PHONE (000) 000-0000 EXT FAX (000) 000-0000

Various Locations in SCAQMD

*STREET # SELECT DIRECTION *STREET NAME SELECT SUFFIX

SELECT CITY CA SELECT ZIP

Facility Search / Creation - Application: Online Application Filing, RoleAndReport: .

Various Locations in SCAQMD

*STREET # SELECT DIRECTION *STREET NAME SELECT SUFFIX

SELECT CITY CA SELECT ZIP

Use above information for Permit Contact and Address ⓘ

Use above information for Billing Contact and Address ⓘ

More Information

Are you a Small Business as per AQMD's Rule 102 definition? (10 employees or less and total annual gross receipts are \$500,000 or less OR a not-for-profit training center) Yes No

Select Organization Type

Minority Owned Female Owned

[Go to Search Page](#) [Next](#)

11. Please verify the information on these screens. If you would like to make changes to the Facility Contact, Permit Mailing Contact, or the Billing Contact, click the “Edit” button.

Facility Search / Creation - Application: Online Application Filing, RoleAndReport: .

Facility Summary

Facility : 180126	Small Business : NO
Doing Business As :	Number of Employees : --
Equipment Location	Gross Receipts : --
Address : 21865 COPLEY DR STE 180126 DIAMOND BAR, CA 91765	Organization Type : EDUCATION FACILITY
Name : D D	Female Owned : NO
Title :	Minority Owned : NO
Department :	
Telephone : (999) 999-9999	
Extension :	
Fax :	
Email : DHAUCK@AQMD.GOV	

[Edit](#)

Contacts Summary

PERMIT MAILING CONTACT	BILLING CONTACT
-------------------------------	------------------------

Facility Search / Creation - Application: Online Application Filing, RoleAndReport: .

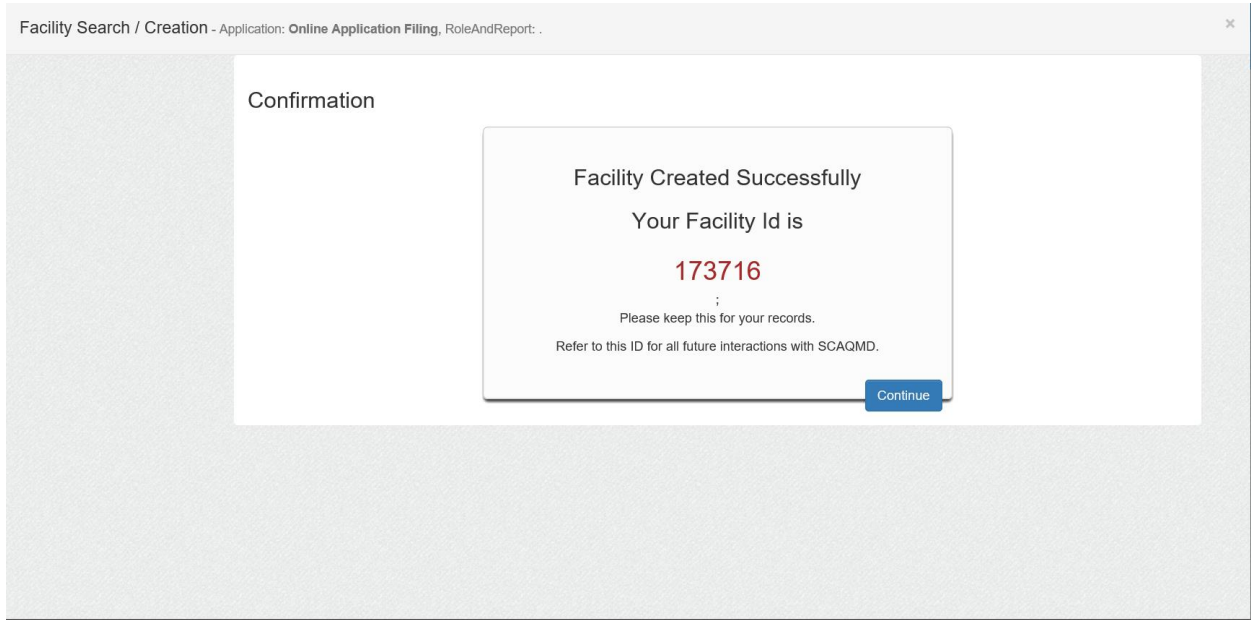
PERMIT MAILING CONTACT	BILLING CONTACT
-------------------------------	------------------------

Contact: D D	Contact: D D
Title:	Title:
Department:	Department:
Address: 21865 COPLEY DR STE 180126 DIAMOND BAR, CA 91765	Address: 21865 COPLEY DR STE 180126 DIAMOND BAR, CA 91765
Tel: (999) 999-9999	Tel: (999) 999-9999
Fax:	Fax:
Email: DHAUCK@AQMD.GOV	Email: DHAUCK@AQMD.GOV

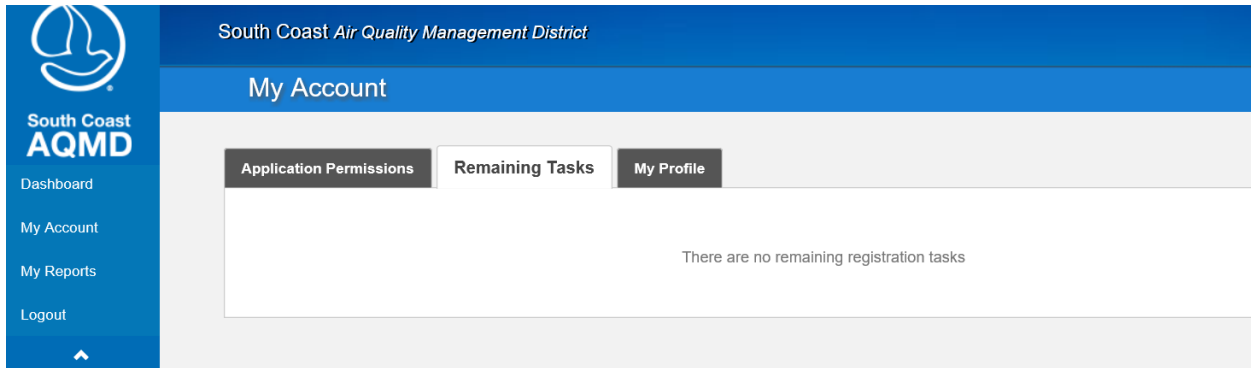
[Edit](#) [Edit](#)

[Back to Search](#) **DISABLED** [Submit](#)

12. You have now created a Facility ID. This ID will be used for all communications with the SCAQMD. Click “Continue”.

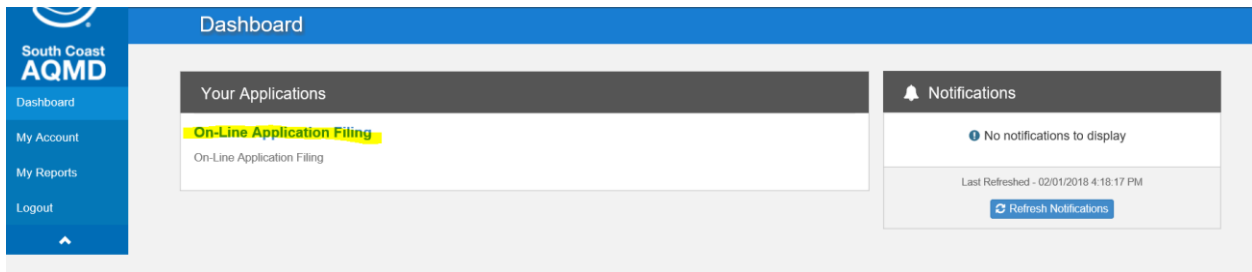


13. This screen shows that your registration is complete, and that you are ready to apply for a permit. To do so, click “Dashboard” which is located in the tool bar on the left.

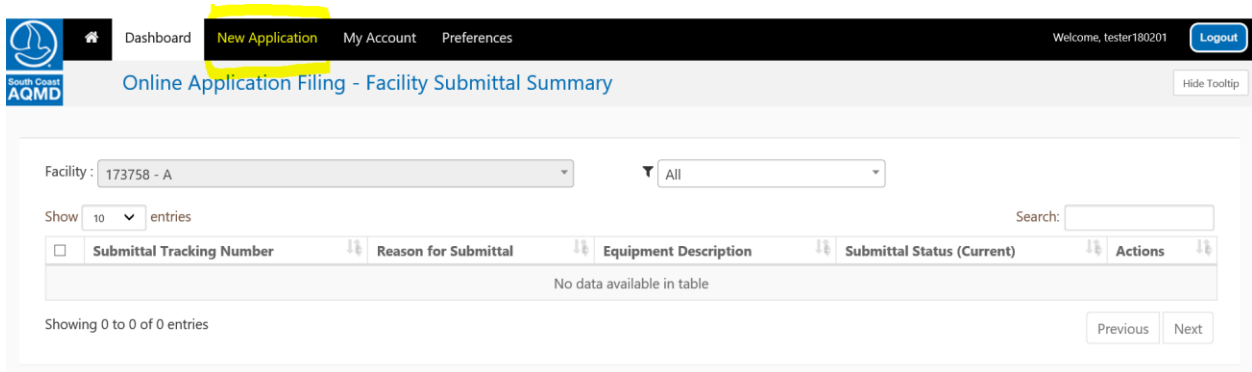


SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

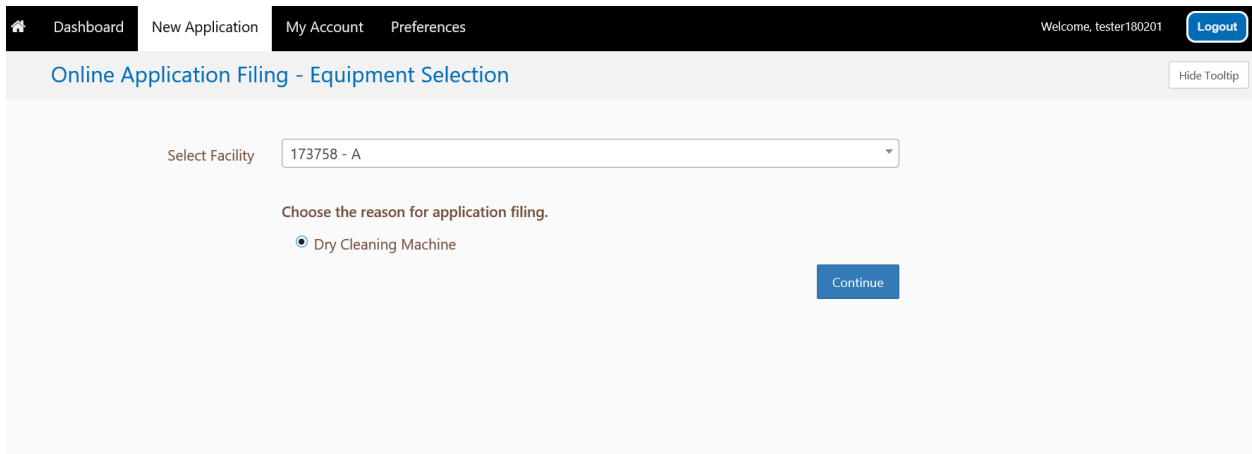
14. Click on “On-line Application Filing” in the middle of the screen.



15. Now click on “New Application” in the upper ribbon.



16. Choose the Facility ID for which you would like to file an application. Click the bubble next to “Dry Cleaning Machine”, and click “Continue”.



You are now in the Dry Cleaning Module. Please follow the instructions at the top of each page.

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

[Dashboard](#)
[New Application](#)
[My Account](#)
[Preferences](#)
Welcome, tester180201 [Logout](#)


South Coast AQMD
Hide Tooltip

Online Application Filing - General Instructions


Instructions

This Online Application Filing System will allow you to file your application for permit and pay the application processing fee online, and in many cases, receive (via email), your permit to construct/operate shortly after completing the online process. For those cases where further engineering evaluation is required, your application data will be filed electronically and directed to an engineer for processing.


The horizontal status bar along the top of each screen shows your completion status of each step, from left to right. The vertical status bar within each screen shows the completion status for each step, from top to bottom.



A blank circle means this phase has not been started.



A half-orange circle means the phase has been started, but not completed.



A green circle means that phase has been completed.

Clicking "Next" in the lower right of any screen will not only advance you to the next screen, it will also save your data input. You can stop at any time, and pick up where you left off. The entire process should take between 20 and 45 minutes. For security purposes, you will be logged off after 20 consecutive minutes of inactivity.

For support, please contact: onlinepermits@aqmd.gov

Please note that the online permit application system is unavailable due to data server maintenance on weekdays between 11 pm and 1 am PT, including Fridays between 6 pm and 1 am PT.

[Return to Home](#)
[Continue](#)

[Dashboard](#)
[New Application](#)
[My Account](#)
[Preferences](#)
Welcome, tester180201 [Logout](#)

South Coast AQMD
Hide Tooltip

Online Application Filing - Application

Form 400-A
Form 400-PS
Form 400-CEQA
Form 400-E-7
Supplemental Documents
Payment
Form 400-E-7 Review
Submission

Form: 400-A > Facility : 173758 - A [Show/Hide Instructions](#)

Instructions

Please verify facility information below. If changes are needed, please contact onlinepermits@aqmd.gov.

Facility ID
This is a unique 6 digit ID number assigned by the SCAQMD for a facility at a specific site location. The facility ID number may be found on an invoice or a permit previously issued for the same location.

Facility Name
A special format is used on the permit to identify both the legal entity and the business name. For example:

[Show more ...](#)

- Operator Information
- Facility Business Information
- Application Information
- Authorization

Operator Information * Required Field

Facility ID: 173758
 Facility Name: A
 Business Owner's Name: N/A
 Equipment Location Address: 21865 COPLEY DR STE 12345555, DIAMOND BAR, CA 91765

Facility Type

Title V

Rec/Gen

Small Business

Permit Mailing Address and Contact

Permit Mailing Address: 21865 COPLEY DR STE 12345555, DIAMOND BAR, CA 91765
 Contact Name: D D
 (909) 396-2000 | N/A | aqmdtester123@gmail.com

[Previous](#)
[Cancel](#)
[Save & Exit](#) [Next](#)

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Form: 400-A > Facility : 173758 - A

Instructions
Please verify facility information below. If changes are needed, please contact onlinepermits@sqmd.gov.

Facility ID
This is a unique 6 digit ID number assigned by the SCAQMD for a facility at a specific site location. The facility ID number may be found on an invoice or a permit previously issued for the same location.

Facility Name
A special format is used on the permit to identify both the legal entity and the business name. For example:

Operator Information * Required Field

Facility ID: 173758
Facility Name: A
Business Owner's Name: N/A
Equipment Location Address: 21865 COPLEY DR STE 12345555, DIAMOND BAR, CA 91765

Facility Type

- Title V
- Reclean
- Small Business

Permit Mailing Address and Contact

Permit Mailing Address: 21865 COPLEY DR STE 12345555, DIAMOND BAR, CA 91765
Contact Name: D D
(909) 396-2000 | N/A | aqmdtester123@gmail.com

For Business Primary NAICS Code for Dry Cleaning, enter 812320

Form: 400-A > Facility : 173758 - A

Instructions
Please enter the type of business, number of employees and Gross Annual Receipts for this location.

Type of Business Conducted at Equipment Location
This is a brief description of the type of business or operation at this facility. This information is used to determine which permit processing team will review your application. See link to permit processing teams: <http://www.aqmd.gov/contact/permitting-staff>.

Business Primary NAICS (North American Industrial Classification System) Code

Facility Business Information * Required Field

Type of Business Conducted at Equipment Location *

Business Primary NAICS Code
Select...

Number of Full Time Employees (no commas or spaces) *

Gross Annual Revenue (no commas or spaces) *
\$

Are there other facilities in SCAQMD jurisdiction operated by same operator? Yes No

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Form: 400-A - Facility : 173758 - A [Show/Hide Instructions](#)

Instructions
Please choose the appropriate Application Type, and corresponding construction/operation dates.

Application Type:
The following types of applications can be processed online:
New Equipment (Permit to Construct)
New equipment which has not yet been constructed or on site and requires a Permit to Construct.

Application Information * Required Field

Application Type *
Select...

Estimate Operation Start Date*
[Date Picker]

Description of Equipment or Reason for Compliance Plan
Dry Cleaning Machine

Has a Notice of Violation(NOV) been issued for the equipment? *
 Yes No

[Previous](#) [Cancel](#) [Save & Exit](#) [Next](#)

Form: 400-A - Facility : 173758 - A [Show/Hide Instructions](#)

Instructions
Please choose the appropriate Application Type, and corresponding construction/operation dates.

Application Type:
The following types of applications can be processed online:
New Equipment (Permit to Construct)
New equipment which has not yet been constructed or on site and requires a Permit to Construct.

Application Information * Required Field

Application Type *
New Construction (Permit to Construct)

Change of Location

Estimate Construction Start Date *
02/03/2018

Estimate Construction End Date *
02/05/2018

Estimate Operation Start Date*
02/10/2018

Description of Equipment or Reason for Compliance Plan
Dry Cleaning Machine

Has a Notice of Violation(NOV) been issued for the equipment? *
 Yes No

[Previous](#) [Cancel](#) [Save & Exit](#) [Next](#)

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Dashboard | New Application | My Account | Preferences | Welcome, tester180201 | Logout

Online Application Filing - Application | Hide Tooltip

Form 400-A | Form 400-PS | Form 400-CEQA | Form 400-E-7 | Supplemental Documents | Payment | Form 400-E-7 Review | Submission

Form: 400-A > Facility : 173758 - A | Application No: 534538 | Status: Created | Show/Hide Instructions

Authorization * Required Field

Do you wish to review permit prior to issuance? Yes No

Do you claim confidential data? Yes No

Name of Responsible Official *

First Name Last Name

Title of Responsible Official Email of Responsible Official

Equipment Location Contact

First Name * Last Name * Job Title

D D

Phone * Fax Email *

(909) 396-2000 agmtester123@gmail.com

Previous Cancel Save & Exit Next

Dashboard | New Application | My Account | Preferences | Welcome, tester180201 | Logout

Online Application Filing - Application | Hide Tooltip

Form 400-A | Form 400-PS | Form 400-CEQA | Form 400-E-7 | Supplemental Documents | Payment | Form 400-E-7 Review | Submission

Form: 400-PS > Facility : 173758 - A | Application No: 534538 | Status: Created | Show/Hide Instructions

Instructions

Please provide the zoning classification for your facility's location (available from the city or county zoning office). If there is a school with any part of its fence/line within 1/4 mile of the facility, please provide the name and address of the school.

CA Health & Safety Code 42301.9: 'School' means any public or private school used for purposes of the education of more than 12 children in kindergarten or any of grades 1 to 12, inclusive, but does not include any private school in which education is primarily conducted in private homes. Any subsequent changes will require a new application package submittal, including associated fees. Online application tool support: onlinepermits@aqmd.gov.

Location Data * Required Field

Zoning Classification *

Population Density? * Urban Rural

Is the facility located within a 1/4 mile radius (1,320 feet) of the outer boundary of a school? * Yes No

Previous Cancel Save & Exit Next

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

For Dry Cleaning Equipment, enter “0” for Stack Height, Height of Closest Building, Stack Inside Diameter, Stack Flow, and Stack Temperature.

Answer “N/A” for “Is Rain Cap Present” and “What is the Stack Orientation”.

Form: 400-PS - Facility : 173758 - A
Application No: 534538 | Status: Created

Instructions
Please provide the information for the exhaust stack. If there is no exhaust stack, enter zeroes and mark the Rain Cap presence and Stack Orientation as 'N/A' and the Stack Height less than 2.5 times the closest building to 'No'.
The Receptor Distance is provided for your reference. AQMD Rule 1470 defines SENSITIVE RECEPTOR as meaning any residence including private homes, condominiums, apartments, and living quarters, schools as defined under paragraph (b)(57), preschools, daycare centers and health facilities such as hospitals or retirement and nursing homes. A sensitive receptor includes long term care hospitals, hospices, prisons, and dormitories or similar live-in housing.
Online application tool support: onlinepermits@aqmd.gov.

Stack Data * Required Field

Stack Height (above ground level) * feet

Height of Closest Building Nearest the Stack * feet

Stack Inside Diameter * inches

Stack Flow * acfm

Stack Temperature * °F

Is a Rain Cap present? * Yes No N/A

What is the Stack Orientation? * Vertical Horizontal N/A

Is stack height less than 2.5 times the closest building? * Yes No

Receptor Distance From Equipment Stack or Roof Vents/Openings

Distance to Nearest Residence feet

Distance to Nearest Business feet

Distance to Nearest Sensitive Receptor feet

Are the emissions released from vents and/or openings from a building? * Yes No

Save work and address to next screen

Previous Cancel Save & Exit Next

For “Project Name” enter a unique name, such as “Dry Cleaning Machine #2”.

Form: 400-CEQA - Facility : 173758 - A

Instructions
Please answer each question as it relates to your application.
A copy of the California Environmental Quality Act (CEQA) Guidelines is available at the following: http://ceqa.ca.gov/env_law/state.html
Detailed instructions for this form are available at the following: <http://www.aqmd.gov/docs/default-source/ceqa-forms/Permit/400-cepq-instruction.pdf?sfvrsn=4>
Online application tool support: onlinepermits@aqmd.gov.

Project Information * Required Field

Do you want to use existing CEQA Application? Yes No

Project Name *

Project Description

A request for a change of operator only (without equipment or process change modifications)? * Yes No

A functionally identical permit unit replacement with no increase in equipment unit rating or emissions? * Yes No

A change of daily VOC permit limit to a monthly VOC permit limit? * Yes No

Equipment damaged as a result of a disaster during state of emergency? * Yes No

A Title V (e.g., SCAQMD Regulation XXX) permit renewal without equipment or process change modifications? * Yes No

A Title V administrative permit revision? * Yes No

The conversion of an existing permit into an initial Title V permit? * Yes No

Previous Cancel Save & Exit Next

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Dashboard | New Application | My Account | Preferences | Welcome, user102001 | Logout

Online Application Filing - Application

Form 400-A | Form 400-PS | **Form 400-CEQA** | Form 400-E-7 | Supplemental Documents | Payment | Form 400-E-7 Review | Submission

Form: 400-CEQA - Facility : 173758 - A Show/Hide Instructions

Instructions
Please answer each question as it relates to your application.
A copy of the California Environmental Quality Act (CEQA) Guidelines is available at the following: http://ceres.ca.gov/emr_law/stats.html.
Detailed instructions for this form are available at the following: <http://www.aqmd.gov/docs/default-source/aqmd-forms/Permit/400-ceqa-instruction.pdf?sfvrsn=6>
Any identified additional or supplemental documents should be uploaded in the Supplemental Documents step.
Online application tool support: onlinepermits@aqmd.gov.

Review For Exemption From Further CEQA Action * Required Field

Review For Impacts

Is this project specifically evaluated in a previously certified or adopted CEQA document? * Yes No

Is this project specifically exempted from CEQA by another entity (e.g., city or agency)? * Yes No

Is this project part of a larger project? * Yes No

Will the project increase the QUANTITY of hazardous materials stored aboveground onsite or transported by mobile vehicle to or from the site by greater than or equal to the amounts associated with each compound listed on Form 400-CEQA, Table 1 - Regulated Substances List and Threshold Quantities for Accidental Release Prevention <http://www.aqmd.gov/home/regulations/ceqa/ceqa-permit-forms>? * Yes No

Will the project emit any air toxic listed on Form 400-CEQA, Table 2 - Other Air Toxics and Their Screening Levels <http://www.aqmd.gov/home/regulations/ceqa/ceqa-permit-forms>? * Yes No

Will the project require any demolition, excavation, and/or grading construction activities that encompass an area exceeding 20,000 square feet? * Yes No

Will the project utilize a boiler, engine, or other combustion equipment that uses fuel (e.g., gasoline, diesel, natural gas, liquefied petroleum gas (LPG), or landfill gas)? * Yes No

Will the project utilize other types of equipment that require the use of, or will generate, any chemicals listed on Form 400-CEQA, Table 3 - Greenhouse Gases <http://www.aqmd.gov/home/regulations/ceqa/ceqa-permit-forms>? * Yes No

Will the project include the open outdoor storage of dry bulk solid materials that could generate dust? * Yes No

Will the project result in or make worse noticeable off-site odors from activities that may not be subject to SCAQMD permit requirements? * Yes No

Dashboard | New Application | My Account | Preferences | Welcome, user102001 | Logout

Online Application Filing - Application

Form 400-A | Form 400-PS | **Form 400-CEQA** | Form 400-E-7 | Supplemental Documents | Payment | Form 400-E-7 Review | Submission

sufficient water for the project; 6) a project that requires new or the expansion of existing, water supply and conveyance facilities; and, 7) a project that requires water to hydrotest pipelines, storage tanks etc. for structural integrity.

Will the project increase demand for potable water at the facility by more than 262,820 gallons per day? * Yes No

Will the project create an increase in the mass inflow of effluents to a public wastewater treatment facility that would require a new, or revision to an existing, National Pollutant Discharge Elimination System (NPDES) or other related permit at the facility? * Yes No

Will the project result in the need for more than 350 new employees? * Yes No

Will the project result in an increase in heavy-duty transport truck traffic to and/or from the facility by more than 350 truck round-trips per day? * Yes No

Will the project result in an increase in customer traffic by more than 700 visits per day? * Yes No

Will the project result in temporary or permanent noise or vibration in excess of what is allowed by the applicable local noise ordinance? * Yes No

Will the project create a permanent need for new or additional solid waste disposal? * Yes No
Check "No" if the projected potential amount of solid waste to be generated by the project is less than five tons per day.

Will the project create a permanent need for new or additional hazardous waste disposal? * Yes No
Check "No" if the projected potential amount of hazardous wastes to be generated by the project is less than 42 cubic yards per day (or equivalent in pounds).

Will the project include equipment that after installation or modification will change the visual character of the site and its surroundings or block views? * Yes No

Will the project have equipment that will create a new source of external lighting that will be visible at the property line? * Yes No

Previous | Cancel | Save & Exit | Next

View with and without zoom to read screen

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Choose the Manufacturer and Model Number from the dropdown list. If the manufacturer and/or model are not listed, you can enter it manually, but this will delay your permitting process.

Dashboard New Application My Account Preferences Welcome, tester180201 [Logout](#)

Online Application Filing - Dry Cleaner [Hide Tooltip](#)

Form 400-A Form 400-PS Form 400-CIQA **Form 400-E-7** Supplemental Documents Payment Form 400-E-7 Review Submission

Form 400-E-7 Dry-Cleaning Equipment > Facility : 173758 - A [Show/Hide Instructions](#)

Application No: 534538 | Status: Created

Instructions
Please identify the manufacturer, model, control type, and whether a carbon adsorber will be used as secondary control. If the name of the manufacturer or model number is not on the pull down list, please continue to provide the information for submittal as a new entry.

Equipment Description

Manufacturer: * Model*

Serial Number(Optional): Select The Control Type:*

Are you using carbon adsorber as secondary control? * Yes No

[Cancel](#) [Save & Exit](#) [Next](#)

Dashboard New Application My Account Preferences Welcome, tester180201 [Logout](#)

Online Application Filing - Dry Cleaner [Hide Tooltip](#)

Form 400-A Form 400-PS Form 400-CIQA **Form 400-E-7** Supplemental Documents Payment Form 400-E-7 Review Submission

Form 400-E-7 Dry-Cleaning Equipment > Facility : 173758 - A [Show/Hide Instructions](#)

Application No: 534538 | Status: Created

Instructions
The maximum operating schedule defaults to 8 hr/day, 7 day/week, 52 wk/yr. Please change these values if your maximum operating schedule is different.

Equipment Description

Maximum Operating Schedule

Hours/Day:* Days/Week* Weeks/Year*

[Previous](#) [Cancel](#) [Save & Exit](#) [Next](#)

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Dashboard | New Application | My Account | Preferences | Welcome, tester180201 | Logout

Online Application Filing - Dry Cleaner | Hide Tooltip

Form 400-A | Form 400-PS | Form 400-CIGA | **Form 400-E-7** | Supplemental Documents | Payment | Form 400-E-7 Review | Submission

Form 400-E-7 Dry-Cleaning Equipment - Facility : 173758 - A | Application No: 534538 | Status: Created | Show/Hide Instructions

Equipment Description

Operating Schedule

Process Description

Summary

Cleaning Solvent Information

Type of Cleaning Solvent Used: * Density of Cleaning Solvent (lbs/gal): * Gallons of Solvent Used Per Month*

Solvent Used = Solvent Purchase + Initial Inventory - Final Inventory - Waste Credit

Operating Parameters

Max. No. of Loads (per day):* Min. No. of Loads (per day):*

Drying Cycle Time (minutes/load):* Cool Down Cycle Time (minutes/load):*

Equipment Capacity

Capacity (pounds): * Clothes Cleaned Per Day (pounds/day): *

Previous Cancel Save & Exit Next

Dashboard | New Application | My Account | Preferences | Welcome, tester180201 | Logout

Online Application Filing - Dry Cleaner | Hide Tooltip

Form 400-A | Form 400-PS | Form 400-CIGA | **Form 400-E-7** | Supplemental Documents | Payment | Form 400-E-7 Review | Submission

Form 400-E-7 Dry-Cleaning Equipment - Facility : 173758 - A | Application No: 534538 | Status: Created | Show/Hide Instructions

Instructions

The following table summarizes the data that you provided. Please review for accuracy, and make changes where needed by using the "Previous" button.

Equipment Description

Manufacturer: BERGPAMA/FORCE	Model: HC50
Serial Number:	Control Type: Chilled Water Vapor Condenser
Are you using carbon adsorber as secondary control? No	Regeneration Time: 0
No. Of Loads Required Before Carbon Adsorber Is Regenerated: 0	

Operating Schedule

Maximum Operating Schedule of the Dry Cleaning Equipment

Hours/Day: 8	Days/Week: 7	Weeks/Year: 52
--------------	--------------	----------------

Process Description

Cleaning Solvent Information

Type of Cleaning Solvent Used: Hydrocarbons: DF 2000 Fluid	Density of Cleaning Solvent: 6.42 lbs/gal
Gallons of Solvent Used Per Month: 10	

Operating Parameters

Max. No. of Loads: 10 per day	Min. No. of Loads: 10 per day
Drying Cycle Time: 10 min/load	Cool Down Cycle Time: 10 min/load

Equipment Capacity

Capacity: 10 pounds	Clothes Cleaned Per Day: 10 pounds/day
---------------------	--

Previous Cancel Next

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Supplemental Documents - Facility : 173758 - A
Application No: 534538 | Status: Created

Instructions
Please upload a plot plan of your facility.
Please also upload any documents required as part of Form 400-CIQA by choosing 'Add Additional Document'. Any other supplemental documents can also be uploaded to support your permit application by clicking on the green 'Add Additional Document'. The following file types are accepted: doc, docx, txt, png, jpg, jpeg, xls, xlsx, odt, pdf.
Online application tool support: onlinepermits@aqmd.gov.

Supplemental Documents * Required Field

Plot Plan

Payment - Facility : 173758 - A
Application No: 534538 | Status: Created

Payment

Expedited processing is available for applications that cannot be verified online as compliant and that require final processing by an SCAQMD permit engineer. If this is the case, click on the Expedited Processing Fee checkbox at that time if you wish to submit additional fees for expedited processing on an overtime basis in accordance with Rule 301(a) (see link: rule-301.pdf).

Expedited Processing Fee

Below are the Permit fees calculated based on the information entered.

Permit Unit

Dry Cleaning Machine	\$1,660.65
- Small Business Discount	(\$830.32)

Summary

Total Fees	\$830.33
Paid Amount	\$0.00
Balance	\$830.33



SCAQMD Online Payment

[Online Invoice Payment](#) >>> **Payment Method**

Please select the payment method you would like to use and click "**Next**" to proceed with Checkout.

Please note: For credit card payments, a convenience fee will be added at the time of payment. The convenience fee is not retained by SCAQMD.

Select a Payment Method:

- Credit card** (convenience fee will be charged)
- E-Check / Checking or savings account** (no charge)

Next >>>

For questions or information, please click [Here](#) for help.



SCAQMD Online Payment

Online Invoice Payment >>> Confirmation

Please review the list of Invoice(s) you have selected for payment.

Click the "**Checkout**" button below to pay.

Invoice Number	Invoice Type	Invoice Balance
2212172	PERMIT PROCESS	\$830.33
Invoice(s) Total:		\$830.33


Payment Method: Credit Card

<<< Back

Checkout

For questions or information, please click [Here](#) for help.

Enter your payment information. Please remember, there is no additional charge for using an e-check. Using a credit will incur a convenience fee that is collected by the third-party payment processor.



SCAQMD Online Payment

Payment Details

Complete the information below and click "Continue."


Payment Method:





Card Information




Card Number

Re-enter Card Number

Expiration Date Month Year

Card Identification Code 





Billing Information

***Name**

***Address**

***City**

***State**

***Zip**

Phone

***Email**

*Required fields.
Billing Information must match Account information.



SCAQMD Online Payment

Terms of Payment

TERMS OF PAYMENT

PLEASE READ THESE TERMS OF PAYMENT CAREFULLY.

IT CONTAINS VERY IMPORTANT INFORMATION ABOUT YOUR RIGHTS AND OBLIGATIONS, AS WELL AS LIMITATIONS AND EXCLUSIONS THAT MAY APPLY TO YOU.

Conditions of Payment

These Terms of Payment set forth apply between you and the South Coast Air Quality Management District ("South Coast AQMD") with respect to your payment from South Coast AQMD's website. These Terms of Payment shall apply and may not be altered, supplemented, or amended by the use of any other document.

Payments made to this Internet Site are limited to customers who are at least 18 years of age and who are residents of either the United States of America or foreign countries supporting a minimum of 128 bit encryption. South Coast AQMD will NOT accept payments through this website from parties who are underage. By submitting your payment through this website, you certify that you meet all of the requirements set forth in these Terms of Payment.

Credit/Debit Card/e-check Payments

Payments are limited to e-checks, American Express, Discover Card, Visa & MasterCard and are the only methods of payment that will be accepted through this website. All payments received by South Coast AQMD are subject to acceptance at South Coast AQMD's sole discretion.

Other Payment Methods

Please note that in addition to the website, payments can be mailed to South Coast AQMD, P.O. Box 4943, Diamond Bar, CA 91765. South Coast AQMD payments may also be made in person Tuesday through Friday, between the hours of 8:00am and 5:00pm Pacific Standard Time at 21855 Copley Drive, Diamond Bar, CA 91765.

Payment Date

Your payment is deemed received at the time you select the "Submit" button for a payment if we confirm the transaction and provide you with a confirmation number.

Transaction Receipt

A payment is not deemed made until we provide you with an online confirmation number for such payment. You can download or print a copy of the receipt page with your confirmation number for your records. In addition, we will send you an email confirmation of your payment.

Your Representations

In addition to the representations in the Terms of Use, you represent to us that: (i) the information you provide to us will be accurate; (ii) you have the right to authorize us to obtain payment from the account designated in your instruction; and (iii) no other person's authorization or action is needed to approve our creation and processing of the payment against your designated account.

Electronic Communications

In order to use our South Coast AQMD website, you will need a working connection to the Internet from a personal computer device. Your Internet browser must support the Secure Sockets Layer (SSL), 128-bit encryption protocol. Mozilla Firefox 2.X or higher and Microsoft Internet Explorer 5.X or higher will support this feature. You also will need either a printer connected to your computer to print Communications or sufficient hard drive space available to save the information. You must have your own Internet service provider (ISP), as we do not provide ISP services.

Refunds

All refunds will be processed through South Coast AQMD's Billing Services Department. They may be contacted at (909) 395-2900 for further assistance.

Disclaimer, Limitation of Liability

In addition to the limitation of liability included in the Terms of Use, you agree that for any liability related to the payment, neither South Coast AQMD nor the County of Los Angeles is liable for any amount of damages above the aggregate dollar amount paid by you under this Terms of Payment.

Amendments/Revision

We reserve the right to amend (add to, delete or change) these Terms of Payment.


Entire Agreement

These Terms of Payment, the Terms of Use, and the Privacy & Security Policy constitute the entire agreement between South Coast AQMD and you.

By clicking/pressing the "Agree" button below, you are confirming that: (1) you agree to receive Communications electronically; (2) your computer system meets the requirements set forth above; (3) you are able to access and print or store information presented at this Site; and (4) you agree to this Terms of Payment, which will be deemed to supplement the Terms of Use and Privacy & Security Policy found elsewhere at this Site.

Last Updated: 08/29/2012

I agree that I have read fully and accept the above terms and conditions



SCAQMD Online Payment

Payment Confirmation

Click "Process Payment" to proceed.

Facility ID : 173758


Facility Name : A

Invoice Amount	Invoice Type	Amount Due
2212172	PERMIT PROCESS	\$830.33
		Payment Amount: \$830.33
		Convenience Fee: \$18.68
		Total Payment Amount: \$849.01

Card Information

Card Number *5454

Expiration Date 7/25



Billing Information

***Name** d

Country US

***Address** 1221 c

***City** diamond bar

***State** CA

***Zip** 91765


Phone


***Email** d@d.com

Go Back/Edit
Cancel
Process Payment

[Terms of Payment](#) | [Terms of Use](#) | [Privacy & Security Policy](#)

[Browser Support](#)





SCAQMD Online Payment


Thank you for your payment.

Please print this receipt and keep it for your records.

Facility ID : 173758
Facility Name : A


Invoice Amount	Invoice Type	Amount Due
2212172	PERMIT PROCESS	\$830.33
		Payment Amount: \$830.33
		Convenience Fee: \$18.68
		Total Payment Amount: \$849.01

Receipt Number: 4006286963
Transaction Date: 02/01/2018 07:09 PM

Payment Type: 

Account Number: *5454

Print View as PDF Finish



[Terms of Payment](#) | [Terms of Use](#) | [Privacy & Security Policy](#)

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Payment - Facility : 173758 - A
Application No: 534938 | Status: Payment Success

Payment

Expedited processing is available for applications that cannot be verified online as compliant and that require final processing by an SCAQMD permit engineer. If this is the case, click on the Expedited Processing Fee checkbox at that time if you wish to submit additional fees for expedited processing on an overtime basis in accordance with Rule 301(v) (see link: rule-301.pdf).

Expedited Processing Fee

Below are the Permit fees calculated based on the information entered.

Permit Unit	Amount
Dry Cleaning Machine	\$1,660.65
Small Business Discount	(\$830.32)

Summary	
Total Fees	\$830.33
Paid Amount	\$830.33
Balance	\$0.00

[Next](#)

Form 400-E-7 Dry-Cleaning Equipment > Facility : 173758 - A
Application No: 534538 | Status: Payment Success

[Show/Hide Instructions](#)

Instructions

Please review the following emission results and Rule Evaluation determinations and make any corrections to your application as needed by clicking on the appropriate form from the progress bar above and saving before proceeding to submittal. Please refer to the SCAQMD rule book online as needed: <http://www.aqmd.gov/home/regulations/rules/scaqmd-rule-book>.

<input checked="" type="checkbox"/> Rule Evaluation	Monthly Uncontrolled Emissions =	VOC Consumption x VOC (Petroleum) Density	64.20	lbs/month
<input checked="" type="checkbox"/> Permit Preview	Monthly Controlled Emissions =	Monthly Uncontrolled x (1 - eff)	21.83	lbs/month
	Daily Uncontrolled Emissions =	(Monthly Uncontrolled/4.33 weeks)/(No. of days per week)	2.12	lbs/day
	Daily Controlled Emissions =	(Monthly Controlled/4.33 weeks)/(No. of days per week)	0.72	lbs/day
	Hourly Uncontrolled Emissions =	R1 = Daily Uncontrolled/Max. hours per day	0.26	lbs/hr
	Hourly Controlled Emissions =	R2 = Daily Controlled/Max. hours per day	0.09	lbs/hr
	Annual Average =	R2 x (Max. hours/day) x (days/wk) x (wks/year)	262.08	lbs/year
	30 days Average =	R2 x (Max. hours/day) x (days/wk) x (4.33 wk/mon)/30 days	0.73	lbs/day

Click on each rule to see the details.

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Dashboard New Application My Account Preferences Welcome, tester180201 Logout

South Coast AQMD Online Application Filing - Dry Cleaner Hide Tooltip

Form 400-A Form 400-PS Form 400-CEQA Form 400-E-7 Supplemental Documents Payment Form 400-E-7 Review Submission

Click on each rule to see the details.

- ✓ Rule:212(c)(1): In Compliance
- ✓ Rule:212(c)(2): In Compliance
- ✓ Rule:212(c)(3): In Compliance
- ✓ Rule:401: In Compliance
- ✓ Rule:402: In Compliance
- ✓ Rule:442: In Compliance
- ✓ Rule:1102: In Compliance
- ✓ Rule:1303(a)(1): In Compliance
- ✓ Rule:1303(b)(1): In Compliance
- ✓ Rule:1303(b)(2): In Compliance
- ✓ Rule:1401: In Compliance

Cancel Edit Next

Dashboard New Application My Account Preferences Welcome, tester180201 Logout

South Coast AQMD Online Application Filing - Dry Cleaner Hide Tooltip

Form 400-A Form 400-PS Form 400-CEQA Form 400-E-7 Supplemental Documents Payment Form 400-E-7 Review Submission

Form 400-E-7 Dry-Cleaning Equipment > Facility : 173758 - A Show/Hide Instructions

Application No: 534538 Status: Payment Success

Instructions
Important! Please review the Equipment Description and Permit Conditions for relevance and accuracy. Once permit is issued, any changes to Equipment Description or Permit Condition will require a new application and filing fee.

- ✓ Rule Evaluation
- ✓ Permit Preview

Please review carefully
Revisions to either Equipment Description or Permit Conditions require submission of a new approval.

EQUIPMENT DESCRIPTION
Dry cleaning machine, Hydrocarbon: DF 2000 Fluid Solvent, BERGPARMA/FORCE, Model No. HC60, Closed Loop, with a Chilled water vapor condenser

PERMIT CONDITIONS:

1. Operation of this equipment shall be conducted in accordance with all data and specifications submitted with the application under which this permit is issued unless otherwise noted below.
2. This equipment shall be properly maintained and kept in good operating condition at all times.
3. This equipment shall only use Hydrocarbon: DF 2000 Fluid solvent as a dry cleaning fluid.
4. The total quantity of solvent that is replenished in this equipment shall not exceed 10 gallons per month averaged over any consecutive 12 month period.
5. The operator shall inspect and clean with a wet cloth the following component on each day of operation: the gaskets and edges of the loading door, loading door liner, lint filter, air filter, and wastewater separator. If any of the seals or gaskets show signs of wear (e.g. cuts or tears) such that they will not provide an impervious seal against liquid or vapor leakage or air leakage into the machine, the dry cleaning machine shall not be operated until those seals or gaskets are replaced.

<https://sappstage.aqmd.gov/OnlineApplicationFiling/F1>

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

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Online Application Filing - Dry Cleaner

Hide Tooltip

Form 400-A Form 400-PS Form 400-CEQA Form 400-E-7 Supplemental Documents Payment Form 400-E-7 Review Submission

5. The operator shall inspect and clean with a wet cloth the following component on each day of operation: the gaskets and edges of the loading door, loading door liner, lint filter, air filter, and wastewater separator. If any of the seals or gaskets show signs of wear (e.g. cuts or tears) such that they will not provide an impervious seal against liquid or vapor leakage or air leakage into the machine, the dry cleaning machine shall not be operated until those seals or gaskets are replaced.

6. Material safety data sheets for all dry cleaning solvents used at this facility and subject to district rules shall be kept current and made available to district personnel upon request.

7. All waste materials which have come into contact with any solvent shall be stored in closed containers and disposed of in accordance with the requirements of the Department of Health Services.

8. In addition to the record-keeping requirements of Rule 1102, records of solvent usage, inspections and repairs shall be maintained to prove compliance with conditions Nos. 4 and 5. These records shall be retained on-site for at least two years and shall be made available to District representatives upon request.

9. Hydrocarbon: DF 2000 Fluid solvents used in this equipment shall not contain any carcinogenic air contaminants identified in Rule 1401, Table 1 as amended on September 10, 2010.

10. This equipment shall comply with the requirements of Rules 442 and 1102.

Previous Cancel Evaluation Report Next

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Dashboard New Application My Account Preferences Welcome, tester190201 Logout

Online Application Filing - Application

Hide Tooltip

Form 400-A Form 400-PS Form 400-CEQA Form 400-E-7 Supplemental Documents Payment Form 400-E-7 Review Submission

Submission > Facility : 173758 - A

Application No: 534538 Status: Rule Passed Show/Hide Instructions

Instructions

Please click on the "Generate Application Package" to finalize your permit application for submittal.

NOTE: You will not be able to make changes to this application following generation of the application package. Any subsequent changes will require a new application package submittal, including associated fees.

The system may take a few moments to complete the process. We appreciate your patience.

Online application tool support: onlinepermits@aqmd.gov.

Submit Application

400-A	Not Generated
400-PS	Not Generated
400-CEQA	Not Generated
400-E	Not Generated

Previous Cancel Generate Application Package

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Dashboard | New Application | My Account | Preferences | Welcome, tester180201 | Logout

Online Application Filing - Application

Form 400-A | Form 400-PS | Form 400-CEQA | Form 400-E-7 | Supplemental Documents | Payment | Form 400-E-7 Review | Submission

Submission > Facility : 173758 - A | Show/Hide Instructions

Application No: 534538 | Status: Ready to Submit

Instructions
Please click on the 'Generate Application Package' to finalize your permit application for submittal.
NOTE: You will not be able to make changes to this application following generation of the application package. Any subsequent changes will require a new application package submittal, including associated fees.
The system may take a few moments to complete the process. We appreciate your patience.
Online application tool support: onlinepermits@aqmd.gov.

Submit Application

400-A	Generated ✓
400-PS	Generated ✓
400-CEQA	Generated ✓
400-E	Generated ✓

Previous | Continue to Submit

Make sure to click “I have read the document” at the bottom of each of the four documents.

South Coast Air Quality Management District | Welcome

Review Sign & Submit Report

Sign and Submit - Review each section before submitting the report

Report Info

Application	On-Line Application Filing
Report Type	Authority to Construct or Permit to Operate and Associated Forms
Report Name	Authority to Construct or Permit to Operate and Associated Forms
Facility	173758-A
Year	1

Master Copy of Record(s)


Application Number : 534538

Mail to:
SCAQMD
P.O. Box 4944
Diamond Bar, CA
91765-0944

South Coast Air Quality Management District
Form 400-A
Application Form for Permit or Plan Approval
List only one piece of equipment or process per form.

Section A - Operator Information	
1. Facility Name (Business Name of Operator to Appear on the permit) A	2. Valid AQMD Facility ID 173758
3. Owner's Business Name N/A	
Section B - Equipment Location Address	Section C - Permit Mailing Address
4. Equipment Location is : 21865 COPLEY DR STE 12345555 DIAMOND BAR, CA 91765	5. Permit and corresponding information: 21865 COPLEY DR STE 12345555 , DIAMOND BAR, CA 91765
Section D - Application Type	

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions




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9. Description of Equipment or Reason for Compliance Plan(list applicable rule): Dry Cleaning Machine	
10. For Identical equipment, how many additional applications are being submitted with this application?	
11. Are you a Small Business as per AQMD's Rule 102 definition?(10 employees or less and total gross receipts are \$500,000 or less or not-for-profit training center): no	
12. Has a Notice of Violation (NOV) or a Notice to Comply(NC) been issued for this equipment?	
Section E - Facility Business Information	
13. What type of business is being conducted at this equipment location? dry cleaning	
14. What is your business primary NAICS Code? (North American Industrial Classification System): 812320	
15. Are there other facilities in the SCAQMD jurisdiction operated by the same operator?: No	
16. Are there any schools (K-12) within 1000 feet of the facility property line? No	
Section F - Authorization I hereby certify that all information herein and information submitted with this application are true and correct.	
17. Do you wish to review the permit prior to issuance? No	
18. Do you claim confidentiality of data? No	

I agree that I have read the document.

Mail To:
SCAQMD
P.O Box 4944
Diamond Bar, CA
91705-0944
www.aqmd.gov




South Coast Air Quality Management District
Form 400-PS
Plot Plan And Stack Information Form

This form must be accompanied by a completed Application for a Permit to Construct/Operate - Form 400A and Form 400-CEQA.

Application Number : 534538

Section A - Facility Information

Facility Name(Business Name of Operator To Appear On The Permit): A	Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD): 173758
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My Reports
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Stack Inlet Diameter: 6 inches	Stack Height: 6.00m	Stack Temperature: 0.00
Rain Cap Present: N/A	Stack Orientation: NA	
Receptor Distance From Equipment Stack or Roof Vents/Opening	Distance to nearest residence or sensitive receptor : 1519 Feet Distance to nearest business: 10 Feet	
Building Information	Are the emissions released from vents and/or openings from a building? No	

I agree that I have read the document.

Mail To:
SCAQMD
P.O Box 4944
Diamond Bar, CA
91705-0944
www.aqmd.gov



South Coast Air Quality Management District
Form 400-CEQA
California Environmental Quality Act (CEQA) Applicability


The SCAQMD is required by state law, the California Environmental Quality Act (CEQA), to review discretionary permit project applications for potential air quality and other environmental impacts. This form is a screening tool to assist the SCAQMD in clarifying whether or not the project has the potential to generate significant adverse environmental impacts that might require preparation of a CEQA document [CEQA Guidelines § 15060(a)]. Form 400-CEQA and the instructions for guidance on completing this form are available at <http://www.aqmd.gov/home/regulations/ceqa/ceqa-permit-forms> or <http://www.aqmd.gov/home/permits/permit-application-forms>. For each Form 400-A application, also complete and submit one Form 400-CEQA. If submitting multiple Form 400-A applications for the same project at the same time, only one Form 400-CEQA is necessary for the entire project. If you need assistance completing this form, contact Permit Services at (909) 396-3385.

Application Number : 534538

Section A - Facility Information

1. Facility Name(Business Name of Operator to Appear on the permit): A	2. SCAQMD Facility ID: 173758
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SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions




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3	<input checked="" type="checkbox"/>	A change of daily VOC permit limit to a monthly VOC permit limit?
4	<input checked="" type="checkbox"/>	Equipment damaged as a result of a disaster during state of emergency?
5	<input checked="" type="checkbox"/>	A Title V (e.g., SCAQMD Regulation XXX) permit renewal without equipment or process change modifications?
6	<input checked="" type="checkbox"/>	A Title V administrative permit revision?
7	<input checked="" type="checkbox"/>	The conversion of an existing permit into an initial Title V permit?

Section C - Review of Impacts Which May Trigger Further CEQA Review

I agree that I have read the document



South Coast Air Quality Management District
FORM 400-E-7
Dry-Cleaning Equipment


This form must be accompanied by a completed Application for a Permit to Operate - Forms 400-A, Form 400-CEQA, and Form 400-PS.

Facility Id : 173758
Application Number : 534538

Tel: (909) 396 3385
www.aqmd.gov

Facility Information			
Facility Name	A		
Facility ID	173758		
Address			
21865 COPLEY DR STE 12345555, DIAMOND BAR, CA 91765			
Equipment Description			
Dry-Cleaning Machine	Manufacturer	Model	Serial #
	BERGPAMA/FORCE	HC60	
Control	Control type		
	Chilled water vapor condenser		
	Capacity (Pounds)	Clothes Cleaned Per Day (pounds/day)	

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My Reports
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Solvent Usage	Gallons of solvent used* per month		Density of cleaning solvent: (lbs/gal)	
Operating Schedule	10		6.42	
Operating Parameters	Hours/day	Days/week	Weeks/yr	
	8	7	52	
	Max. No. of Loads (per day)	Min. No. of Loads (per day)	Drying Cycle Time (minutes/load)	Cool Down Cycle Time (minutes/load)
	10	10	10	10
Control Equipment Operation				
Carbon Adsorber As Secondary Control	No. of loads required before Carbon Adsorber is regenerated			Regeneration Time (minutes)
	0			0
THIS IS A PUBLIC DOCUMENT				
Pursuant to the California Public Records Act, your permit application and any supplemental documentation are records and may be disclosed to a third party. If you wish to claim certain limited information as exempt from disclosure because it qualifies as a trade secret, as defined in the District's Guidelines for Implementing the California Public Records Act, you must make such claim at the time of submittal to the District.				
© South Coast Air Quality Management District, Form 400-E-7 (2018.2)				

I agree that I have read the document

There are no file attachments

SCAQMD Certification Statement

I certify that by signing and submitting this agreement, I have read, understand, and accept the terms and conditions of the electronic signature agreement.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this report and I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

I understand and agree that I will be held as legally bound, obligated, or responsible by my use of my electronic signature as I would be using my hand-written signature, and that legal action can be taken against me based on my use of my electronic signature in knowingly submitting false information in an electronic document to the SCAQMD Electronic Reporting System.

me, D H

SCAQMD Online Registration and Dry Cleaning Application Module – Screenshots & Directions

Control Equipment Operation

Carbon Adsorber As Secondary Control	No. of loads required before Carbon Adsorber is regenerated 0	Regeneration Time (minutes) 0
--------------------------------------	--	----------------------------------

THIS IS A PUBLIC DOCUMENT

Pursuant to the California Public Records Act, your permit application and any supplemental documentation are records and may be disclosed to a third party. If you wish to claim certain limited information as exempt from disclosure because it qualifies as a trade secret, as defined in the District's Guidelines for Implementing the California Public Records Act, you must make such claim at the time of submittal to the District.

© South Coast Air Quality Management District, Form 400-E-7 (2018.2)

I agree that I have read the document

File Attachments

There are no file attachments

SCAQMD Certification Statement

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this report and I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

I understand and agree that I will be held as legally bound, obligated, or responsible by my use of my electronic signature as I would be using my hand-written signature, and that legal action can be taken against me based on my use of my electronic signature in knowingly submitting false information in an electronic document to the SCAQMD Electronic Reporting System.

I agree that I have read the statement

Submission

In order to submit the report, please ensure that you have checked all the checkboxes

This is the final screen. You will receive pdf versions the forms shown above. Shortly after that, you will receive an email with a copy of your permit.

Dashboard | New Application | My Account | Preferences | Welcome, tester180201 | Logout

Online Application Filing - Application | Hide Tooltip

Form 400-A ✓ | Form 400-PS ✓ | Form 400-CEQA ✓ | Form 400-E-7 ✓ | Supplemental Documents ✓ | Payment ✓ | Form 400-E-7 Review ✓ | Submission ✓

Submission - Facility : 173758 - A

Application No: 534538 | Status: Submitted

Your application has been submitted.
You'll receive an email with a confirmation shortly.
If you don't receive an email within an hour, please contact SCAQMD.

[Click here](#) to return to Dashboard.