

SHELBY COUNTY HEALTH DEPARTMENT
POLLUTION CONTROL SECTION
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NOT TO BE USED FOR TITLE V APPLICATIONS

SURFACE COATING DESCRIPTION

PLEASE TYPE OR PRINT AND SUBMIT IN DUPLICATE FOR EACH SPRAY BOOTH, DIP TANK OR OTHER SURFACE COATING EQUIPMENT, ATTACH TO THE PERMIT APPLICATION.							
1. ORGANIZATION LEGAL NAME:				SCHD-APC FACILITY ID.:			
2. EMISSION SOURCE NUMBER:		NAICS CODE:		SCHD-APC PERMIT ID.:			
3. SOURCE LOCATION	LATITUDE:	LONGITUDE:	UTM VERTICAL:	UTM HORIZONTAL:			
4. TYPE OF COATING OPERATION	SPRAY BOOTH:	DIP TANK:	OTHER (DESCRIBE):				
5. MANUFACTURER	NAME:		MODEL NUMBER:	SERIAL NUMBER:			
	CONSTRUCTION DATE:		MODIFICATION DATE:				
	DESCRIBE ANY MODIFICATIONS*:						
6. DESCRIBE ARTICLES COATED:							
7. NORMAL OPERATION	HOURS/DAY:	DAYS/WEEK:	WEEKS/YEAR:	DAYS/YEAR:			
8. MAXIMUM OPERATION	HOURS/DAY:	DAYS/WEEK:	WEEKS/YEAR:	DAYS/YEAR:			
9. SPRAY BOOTH DIMENSIONS (FT)	WIDTH:	HEIGHT:	DEPTH:	NUMBER OF OPEN SIDES:			
10. METHOD OF SPRAY	AIRLESS	AIR ATOMIZED	ELECTROSTATIC			OVERSPRAY (%):	DATE PURCHASED*:
			AIRLESS	DISC	AIR ATOMIZED		
11. EXHAUST FAN DATA	NUMBER OF FANS:		TOTAL HORSEPOWER:		TOTAL VOLUME (CFM):		
12. EXHAUST CONTROL	NONE	WATERWASH	EXHAUST FILTERS	BAFFLE PLATES	ADSORPTION**	OTHER**	
13. EXHAUST STACK DATA***	DIAMETER (FT)	HEIGHT ABOVE GRADE (FT)	FLOW (CFM)	SPECIFY SERIAL NUMBERS THAT SHARE THIS VENT			

* THE ACTUAL SURFACE COATING EQUIPMENT (SPRAY GUN, SPRAY HEADS, ETC.), AND NOT THE SPRAY BOOTH PER SE, DETERMINES THE STATUS OF THE SOURCE (NEW OR EXISTING).

** ATTACH A DETAILED DESCRIPTION.

*** COMPLETE ONE LINE FOR EACH STACK OR VENT. IF ADDITIONAL SPACE IS NEEDED USE BLOCK 15.

(OVER)

