

Sample Initial Notification

National Emission Standards for Hazardous Air Pollutants:

Ferrous Production Facilities

40 CFR 63 subpart YYYYYY

Section 1. Facility Information

Yes, I am subject to 40 CFR Part 63 subpart YYYYYY, National Emission Standards for Hazardous Air Pollutants: Ferrous Production Facilities

Source category and code(s) _____

Compliance Date: Existing source: June 22, 2009 New source: _____
Date of startup

No, I am NOT subject to 40 CFR Part 63 subpart YYYYYY. Reason not applicable:

If you checked the "No" box above, please complete only Section 1 of this form and then proceed directly to Section 3 of this form (skip Section 2).

Company name _____

Facility name (if different): _____

Facility (physical location) address _____

Owner name/title: _____

Owner/company address: _____

Owner telephone number _____

Owner email address (if available): _____

Is the Operator the same person as the Owner? Yes No

If the Operator information is different from the Owner, please provide the following:

Operator name/title: _____

Operator telephone number: _____

Section 2. Identification of Affected Operations

The following are the operations at this facility subject to subpart YYYYYY:

<p>1. Electrometallurgical operations using electric arc furnaces (EAFs) in the production of :</p> <p><input type="checkbox"/> silicon metal, ferrosilicon <input type="checkbox"/> standard ferromanganese, silicomanganese, ferromanganese silicon</p> <p><input type="checkbox"/> calcium carbide <input type="checkbox"/> ferrochrome silicon, high-carbon ferrochrome</p> <p><input type="checkbox"/> other (please specify)_____</p>
<p>2. Electrometallurgical operations using reaction vessels in the production of:</p> <p><input type="checkbox"/> ferrotitanium using the aluminum reduction process <input type="checkbox"/> ferrovanadium</p> <p><input type="checkbox"/> ferromolybdenum <input type="checkbox"/> other (please specify) _____</p>

Section 3. Certification

I hereby certify that the information presented herein is correct to the best of my knowledge.

_____	_____
(Signature)	(Date)
_____	(____)_____
(Name/title)	(Telephone No.)

Section 4. Submittal

Submit the Initial Notification to the following offices:

Tennessee Department of Environment and Conservation Air Pollution Control William R. Snodgrass Tennessee Tower 312 Rosa L. Parks Avenue, 15 th Floor Nashville, Tennessee 37243	EPA Region IV Director, Air, Pesticides and Toxics Management Division Atlanta Federal Center, 61 Forsyth Street, Atlanta, GA 30303-3104
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