



# General Order Application: Perchloroethylene Dry Cleaners Purchasing \*Less Than 2,100 Gallons Per Year

*\*Dry cleaners purchasing more than this amount are not eligible for a general order.*

## I. INSTRUCTIONS

This application applies statewide for facilities under the Department of Ecology's jurisdiction. Fill out the form completely in order to obtain coverage.

- Read the Perchloroethylene Dry Cleaners General Order. You can find it online at [www.ecy.wa.gov/programs/air/AOP\\_Permits/Boiler/GeneralOrders.htm](http://www.ecy.wa.gov/programs/air/AOP_Permits/Boiler/GeneralOrders.htm), or call the appropriate regional office (see below) for a copy.
- Fill out the application completely, sign it, and date it.
- Enclose a check to the Department of Ecology for the application fee.
- State Environmental Policy Act (SEPA) Compliance
  - \$250 application fee** if SEPA review is complete – Include a copy of the final SEPA checklist and SEPA determination (e.g., DNS, MDNS, EIS) with your application.
  - \$535 application fee** if SEPA review is required – If SEPA review has not been conducted, please fill out a SEPA checklist and submit it with your application. You can find a SEPA checklist online at [www.ecy.wa.gov/programs/sea/sepa/docs/echecklist.doc](http://www.ecy.wa.gov/programs/sea/sepa/docs/echecklist.doc).
- Mail the complete application package to:
 

<i>For Fiscal Office Use Only:</i> 001-NSR-216-0299-000404	<b>Department of Ecology</b> <b>Cashiering Unit</b> <b>P.O. Box 47611</b> <b>Olympia, WA 98504-7611</b>
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**Check the box for the location of your proposal.** For assistance, call the appropriate office listed below:

<input type="checkbox"/>	<b>Chelan, Douglas, Kittitas, Klickitat, or Okanogan County</b> Ecology Central Regional Office (509) 575-2490	CRO
<input type="checkbox"/>	<b>Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Stevens, Walla Walla, or Whitman County</b> Ecology Eastern Regional Office (509) 329-3400	ERO
<input type="checkbox"/>	<b>San Juan County</b> Ecology Northwest Regional Office (425) 649-7000	NWRO
<input type="checkbox"/>	<b>For actions taken at Kraft and Sulfite Paper Mills and Aluminum Smelters only</b> Ecology Industrial Section (360) 407-6900	IND
<input type="checkbox"/>	<b>For actions taken on the US Department of Energy Hanford Reservation only</b> Ecology Nuclear Waste Program (509) 372-7950	NWP

## II. COMPANY INFORMATION

1. Company Name:		
2. Company Mailing Address (street, city, state, zip):		
3. Facility Location (if different than company mailing address):		4. County:
5. Company Contact Person, Title:	6. Company Phone Number:	7. Company Fax Number:
8. Contact Person Phone Number:	9. E-Mail Address:	

## III. PLANT INFORMATION

Diagram of facility showing the location of the building that houses dry cleaning machine(s) (include distances to nearby buildings on and off the property and their current uses). Include a layout of the locations of the machine(s) in the building.

**IV. OPERATING DATA FOR THE DRY CLEANING OPERATION**

1. Business Operating Schedule	_____ hours per day, _____ days per week, _____ weeks per year Circle days when facility is operating:    M   T   W   Th   F   Sat   Sun
2. Estimated Perchloroethylene (PCE) Usage (not including initial storage tank filling)	<input type="checkbox"/> less than 140 gallons PCE per year <input type="checkbox"/> between 140-2100 gallons PCE per year

**V. DRY CLEANING MACHINE INFORMATION**

	Machine #1	Machine #2	Machine #3
Manufacturer			
Model			
Serial Number			
Model Year			
Control Device(s)	<input type="checkbox"/> Refrigerated Condenser	<input type="checkbox"/> Refrigerated Condenser	<input type="checkbox"/> Refrigerated Condenser
Vented?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

If more than 3 machines are being installed, include those machines on additional pages.

**VI. SIGNATURE BLOCK**

I certify, based on information and belief formed after reasonable inquiry, the statements and information in this application are true, accurate, and complete.	
Printed Name _____	Title _____
Signature _____	Date _____

If you need this document in a format for the visually impaired, call the Air Quality Program at 360-407-6800. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.