



Form 400-E-15 Printing Equipment

Mail To:
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www.aqmd.gov

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

Section A - Operator Information

Facility Name (Business Name of Operator That Appears On Permit): _____	Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD): _____
Address where the equipment will be operated (for equipment which will be moved to various locations in AQMD's jurisdiction, please list the initial location site): _____	
Fixed Location	Various Locations

Section B - Equipment Description

Press Type	Manufacturer: _____	Model: _____	Serial No.: _____
	Flexographic	Lithographic	Gravure
	Screen	Letter Press	Inkjet
	Other (specify): _____		
	Number of Color Stations: _____		
Paper Feed Method	Sheet	Web	
	Maximum Sheet/Web Width: _____ in.		Maximum Speed: _____ (specify unit)
Substrate Type	Porous	Non-Porous	Textile
			Coated
			Uncoated

Section C - Operation Information

Product Description	Paper Packaging	Reports	Calendars	Labels
	Plastic Packaging	Inserts	Brochures	Publication
	Newspaper	Magazines	Other (specify) _____	
Mode of Ink Drying	Air Dry	Infrared Lamps or Electric Elements ¹ : _____ kW		Ultraviolet ¹ : _____ kW ¹
	Natural Gas Fired ¹	Rating: _____ Btu/hr		
	No. of burners: _____	BTU Rating of Each Burner: _____ Btu/hr	Total Btu Rating: _____ Btu/hr	
	Is Burner Low NOx?	No	Yes	
	If Yes, Mfg: _____	Model: _____		
		_____ ppm NOx ² @ _____ %O ₂		
	¹ Is the drying or curing device permanently attached to the press? If No, a separate permit is required for the drying or curing device.		No	Yes
	² Provide support document			
Air Pollution Control (APC)	Is printing equipment vented to APC equipment?	No	Yes	
	If Yes, a separate permit is required. If already permitted, permit no.: _____ or application no.: _____			

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Section D - Material Information
Identify all materials used in association with this equipment. Material Safety Data Sheets (MSDS) for all materials must be included.

Type of Materials	Coating VOC ^① (lbs VOC/gal coating)	Material VOC ^② (lbs VOC/gal material)	Weight% Oil (Litho)	Average Amount Used (gal/day)	Maximum Amount Used (gal/day)
Ink #1					
Ink #2					
Plastisol Ink					
Varnish, oil base					
Varnish, water base					
Ink, thinner					
Other: _____					
Other: _____					

Type of Materials	Vapor Pressure (mmHg @ 20° Celsius)	Material VOC ^② (lbs VOC/gal material)	Average Amount Used (gal/day)	Maximum Amount Used (gal/day)
Clean Up Solvent				
Blanket Wash				
Roller Wash #1				
Roller Wash #2				
Other: _____				

Fountain Solution	Mixing Ratio (by Volume)	Material VOC ^② (lbs VOC/gal material)	Average Amount Used (gal/day)	Maximum Amount Used (gal/day)
Water				
Alcohol				
Alcohol Substitute				
Etch/Concentrate				
Other: _____				

① Less water and exempt solvents
② Including water and exempt solvents

Section E - Equipment Operating Schedule

Operating Schedule	Normal: _____ hours/day _____ days/week _____ weeks/yr
	Maximum: _____ hours/day _____ days/week _____ weeks/yr

Section F - Authorization/Signature

I hereby certify that all information contained herein and information submitted with this application is true and correct.

Preparer Info	Signature: _____ Date: _____	Name: _____
	Title: _____ Company Name: _____	Phone #: _____ Fax #: _____
Contact Info	Name: _____	Phone #: _____ Fax #: _____
	Title: _____ Company Name: _____	Email: _____

THIS IS A PUBLIC DOCUMENT

Pursuant to the California Public Records Act, your permit application and any supplemental documentation are public 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.

Check here if you claim that this form or its attachments contain confidential trade secret information.