

Initial Notification of Applicability^a

National Emission Standards for Hazardous Air Pollutants:
Stationary Reciprocating Internal Combustion Engines
40 CFR Part 63 Subpart ZZZZ

Yes, I am subject to 40 CFR Part 63 subpart ZZZZ National Emission Standards for Hazardous Air Pollutants for Stationary Reciprocating Internal Combustion Engines

NAICS code(s): _____

Compliance Date: Existing source: May 3, 2013 New/reconstructed source: Upon initial startup

Note: The May 3, 2013 compliance date for existing sources applies to the following engine types:

- Existing non-emergency CI stationary RICE with a site rating of more than 500 brake HP located at a major source of HAP emissions
- Existing stationary CI RICE with a site rating of less than or equal to 500 brake HP located at a major source of HAP emissions
- Existing stationary CI RICE located at an area source of HAP emissions

Company name: _____

Facility name (if different): _____

Facility (physical location) address: _____

Maine Air License # _____

My facility is a (please choose one): Major source Area source

Owner name/title: _____

Owner/company address: _____

Owner telephone number: _____

Owner email address (if available): _____

^a This is an example of the type of information that must be submitted to fulfill the Initial Notification of Applicability Status requirement of 40 CFR 63, subpart ZZZZ. You may submit the information in another form or format, or you may use this form. Initial Notification is due 120 days after the effective date of the rule or 120 days after you become subject to the rule.

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

Operator name/title: _____

Operator telephone number: _____

Operator email address (if available): _____

Brief description of the stationary RICE at the facility, including number of engines and the site-rated HP of each engine:

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

(Signature)

(Date)

(Name/title)

(_____)_____
(Telephone No.)

Submit the Initial Notification to the following:

Director, Air Compliance Programs
EPA-New England
5 Post Office Square
Suite 100 (OES04-2)
Boston, MA 02109-3912
Attn: Air Compliance Clerk

State of Maine
Department of Environmental Protection
Bureau of Air Quality
State House, Station 17
Augusta, Maine 04333-0017
Attn: Lisa P. Higgins