



## INITIAL NOTIFICATION REPORT

### National Emission Standard for Hazardous Air Pollutants (NESHAP) 40 CFR 63 Subpart WWWW

Applicable Rule: 40 CFR Part 63, Subpart WWWW – National Emission Standards for Hazardous Air Pollutants for Hospital Ethylene Oxide Sterilization. Initial notification is being made in accordance with §63.10430.

**Please print or type all information.**

<b>1. COMPLETE THIS SECTION FOR EACH PRODUCTION FACILITY. MAKE ADDITIONAL COPIES AS NECESSARY.</b>			
OWNER/OPERATOR			
HOSPITAL NAME			
EQUIPMENT LOCATION ADDRESS			
CITY	STATE	ZIP CODE	COUNTY
PLANT CONTACT, NAME AND TITLE			TELEPHONE AREA CODE & NUMBER
MAILING ADDRESS (if different from above)	CITY	STATE	ZIP CODE
Primary SIC Code/NAICS Code	RENEWABLE OPERATING OR AIR USE PERMIT NUMBER (If applicable)		STATE REGISTRATION NUMBER (SRN), if known

<p><b>2. Facility subject to 40 CFR Part 63, Subpart WWWW?:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>You are subject to 40 CFR Part 63, Subpart WWWW if both of the following are true:                  Your facility is an Area Source of Hazardous Air Pollutants, and                  You own or operate an ethylene oxide (EtO) sterilization facility at your hospital</p>
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<p><b>3. Total annual actual EtO usage at the facility:</b> _____ lbs</p>
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<p><b>4. The Initial Notification of Compliance Status is due:</b></p> <p><input type="checkbox"/> On or before June 27, 2009 if you are an existing source (i.e., 180 days after the compliance date)</p> <p>You are an existing source if you commenced construction or reconstruction before November 6, 2006. Your compliance date is December 29, 2008.</p> <p><input type="checkbox"/> 180 days after the compliance date if you are a new source</p> <p>You are a new source if you commenced construction or reconstruction on or after November 6, 2006.</p>
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<b>5. Number of EtO sterilizers:</b>		<b>Number of separate aeration units:</b>		
For each sterilizer, please provide:				
No.	Sterilizer volume:	No. sterilization cycles/yr:	EtO vented to add-on air pollution control device (APCD)	Type of add-on APCD (if applicable)
1	ft <sup>3</sup>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	ft <sup>3</sup>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	ft <sup>3</sup>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	ft <sup>3</sup>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	ft <sup>3</sup>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	ft <sup>3</sup>		<input type="checkbox"/> Yes <input type="checkbox"/> No	

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**7. Compliance Demonstration (check one):**

- I certify that the source sterilizes full loads of medical items having a common aeration time, except under medically necessary circumstances.
- The sterilization unit(s) operates with add-on APCD(s) (for reducing EtO emissions to the atmosphere) pursuant to a State Air Permit. I certify that the sterilization unit operates in accordance with the State regulation and follows the add-on APCD manufacturer's recommended practices.
- The sterilization unit(s) operates with add-on APCD(s) (for reducing EtO emissions to the atmosphere) but are not subject to any State or local regulation for limiting EtO emissions. I certify that the sterilization unit operates by venting EtO emissions from each unit to an add-on APCD and certify that the add-on APCD (for reducing EtO emissions to the atmosphere) operates during all sterilization processes and follows the add-on APCD manufacturer's recommended practices.

**8. Certification**

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this report and the supporting enclosures are true, accurate and complete.

**Print or type the name and title of the "Responsible Official\*" for the plant:**

Name of Responsible Official (print or type)	Title	Phone Number
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\*A "Responsible Official" can be:

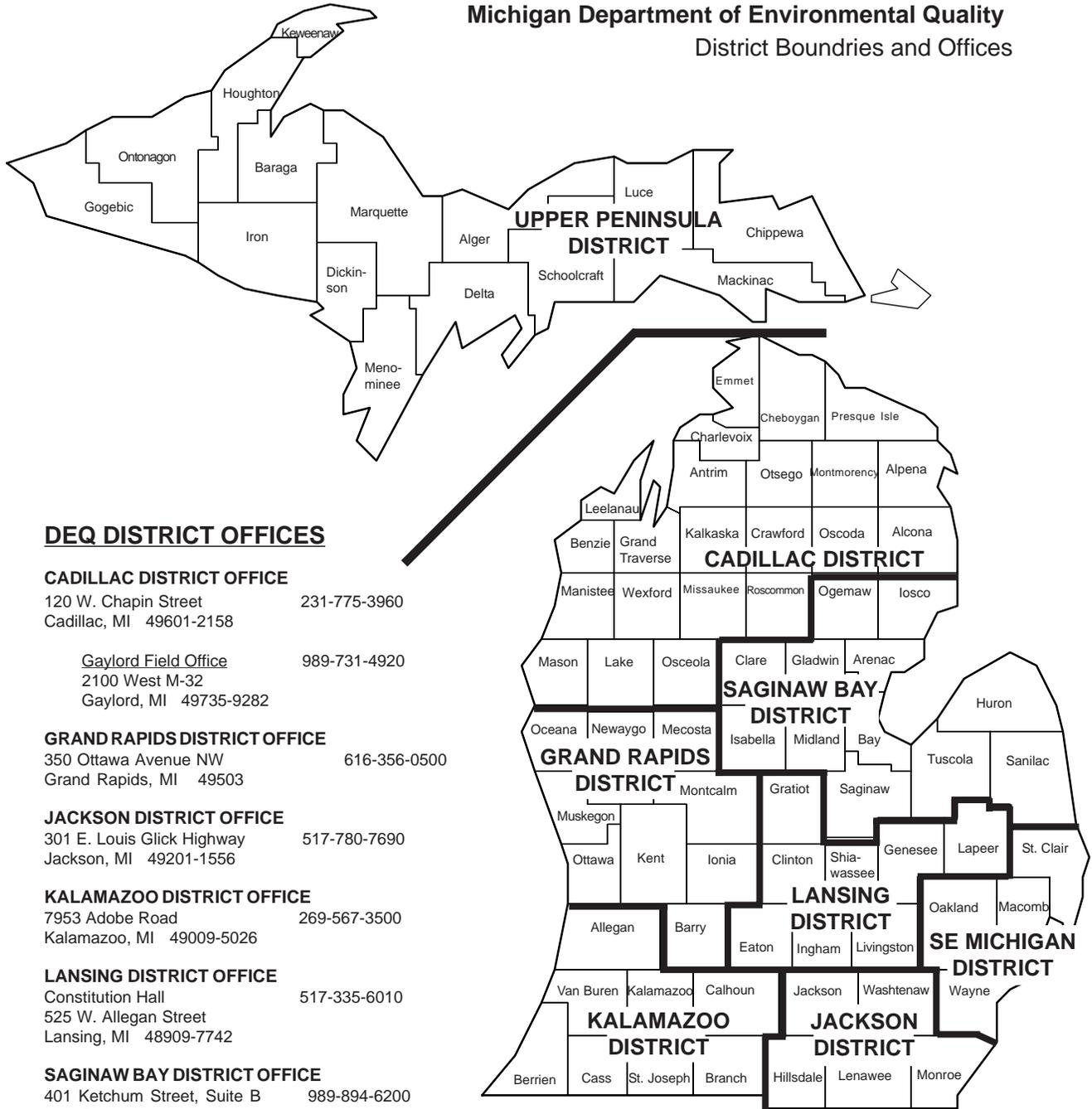
- The president, vice-president, secretary, or treasurer of the company who owns the plant
- The owner of the plant
- The plant engineer or supervisor
- A government official if the plant is owned by the Federal, State, City, or County government
- A ranking military officer if the plant is located on a military base

Signature of "Responsible Official"	Date
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**Please make three copies of this Initial Notification Report and submit to the following:**

- 1) Original signed copy to the appropriate MDEQ Air Quality Division district office (Attachment A)
- 2) U.S. Environmental Protection Agency (USEPA) Region 5  
Compliance Tracker (AE-17J)  
77 West Jackson Boulevard  
Chicago, IL 60604-3507
- 3) U.S. Environmental Protection Agency (USEPA)  
Sector Policies and Programs Division  
Coatings and Chemicals Group (E143-01)  
Attn: Hospital Sterilizers Project Leader  
Research Triangle Park, NC 27711
- 4) Keep a copy for your records.

**Michigan Department of Environmental Quality  
District Boundries and Offices**



**DEQ DISTRICT OFFICES**

**CADILLAC DISTRICT OFFICE**

120 W. Chapin Street 231-775-3960  
Cadillac, MI 49601-2158

Gaylord Field Office 989-731-4920  
2100 West M-32  
Gaylord, MI 49735-9282

**GRAND RAPIDS DISTRICT OFFICE**

350 Ottawa Avenue NW 616-356-0500  
Grand Rapids, MI 49503

**JACKSON DISTRICT OFFICE**

301 E. Louis Glick Highway 517-780-7690  
Jackson, MI 49201-1556

**KALAMAZOO DISTRICT OFFICE**

7953 Adobe Road 269-567-3500  
Kalamazoo, MI 49009-5026

**LANSING DISTRICT OFFICE**

Constitution Hall 517-335-6010  
525 W. Allegan Street  
Lansing, MI 48909-7742

**SAGINAW BAY DISTRICT OFFICE**

401 Ketchum Street, Suite B 989-894-6200  
Bay City, MI 48708

**SOUTHEAST MICHIGAN DISTRICT OFFICE**

27700 Donald Court 586-753-3700  
Warren, MI 48092-2793

Detroit Field Office 313-456-4700  
Cadillac Place  
3058 West Grand Boulevard, Suite 2-300  
Detroit, MI 48202-6058

**UPPER PENINSULA DISTRICT OFFICE**

420 5th Street 906-346-8300  
Gwinn, MI 49841

**ENVIRONMENTAL ASSISTANCE CENTER**

(for general information):

Telephone: 800-662-9278  
Fax: 517-241-0673

**POLLUTION EMERGENCIES**

Telephone: 800-292-4706

**DEQ WEB PAGE**

[www.michigan.gov/deq](http://www.michigan.gov/deq)