# EGLE

## MICHIGAN DEPARTMENT OF ENVIRONMENT, GREAT LAKES, AND ENERGY AIR QUALITY DIVISION

#### INITIAL NOTIFICATION REPORT

# NESHAP: Chromium Emissions from Hard and Decorative Chromium Electroplating and Chromium Anodizing Tanks

40 CFR Part 63, Subpart N

Required by 1994 PA 451, as amended, and the Federal Clean Air Act of 1990. Failure to provide this information may result in penalties and/or imprisonment.

**NOTE:** All affected facilities are required to complete and submit this report to the Michigan Department of Environment, Great Lakes and Energy to the appropriate Air Quality Division District Office (see Attachment A).

1. Complete this section for each plant in which wood furniture manufacturing operations are

### Please print or type all information.

ormed.		-				-			
Owner/Operator Contact Name and Title				Owner Telephone	e Area Code	& Num	ber		
Owner Mailing Address (If different than company)					State		Zip Co	ode	
Owner/Operator E-Mail Address									
			ı						
Facility Name (if different than company)				Facility Telephone Area Code & Number					
Facility Address (If different than company)				City	State		Zip Co	ode	
State Registration Number (SRN) (If known)									
2. Complete this section for all affected tanks using a chromic acid bath. If only trivalent chromium baths are used at the facility, go to section 3. If additional space is needed, make copies of this page.									
Type of Tank	Startup Date <b>1</b>	Total Installed Rectifier Capacity (Amperes)	D	escription of Parts	s Plated	Emiss	sion	Compliance Date <b>2</b>	
	Mailing Address Departor E-Mai Name (if difference of the differen	Deperator Contact Name and Mailing Address (If differed Deperator E-Mail Address Name (if different than contact Address (If different than egistration Number (SRN) plete this section for all are used at the facility Type of Startup	Departor Contact Name and Title  Mailing Address (If different than company)  Departor E-Mail Address  Name (if different than company)  Address (If different than company)  egistration Number (SRN)  n)  plete this section for all affected tanks are used at the facility, go to section  Type of Tank Startup Date 1 Rectifier Capacity	Departor Contact Name and Title  Mailing Address (If different than company)  Departor E-Mail Address  Name (if different than company)  Address (If different than company)  egistration Number (SRN)  n)  plete this section for all affected tanks using are used at the facility, go to section 3. If  Type of Startup Total Installed Rectifier Capacity	Deperator Contact Name and Title  Mailing Address (If different than company)  Deperator E-Mail Address  Name (if different than company)  Address (If different than company)  City  Egistration Number (SRN)  In)  Plete this section for all affected tanks using a chromic acid are used at the facility, go to section 3. If additional space is  Type of Startup Date 1  Total Installed Rectifier Capacity  Description of Parts	Departor Contact Name and Title  Mailing Address (If different than company)  City  State  Departor E-Mail Address  Name (if different than company)  Address (If different than company)  City  State  Pacility Telephone Area Code  City  State  Egistration Number (SRN)  In)  Plete this section for all affected tanks using a chromic acid bath. If one is are used at the facility, go to section 3. If additional space is needed, m  Type of Startup Date 1 Rectifier Capacity  Description of Parts Plated	Departor Contact Name and Title  Mailing Address (If different than company)  Departor E-Mail Address  Name (if different than company)  Facility Telephone Area Code & Num  Address (If different than company)  City  State  Pagistration Number (SRN)  Pagistration Number (SRN)  Pagistration Section for all affected tanks using a chromic acid bath. If only trival are used at the facility, go to section 3. If additional space is needed, make cop  Type of Type of Tank  Total Installed Rectifier Capacity  Description of Parts Plated  Applications  Emiss  Lim	Departor Contact Name and Title  Mailing Address (If different than company)  Departor E-Mail Address  Name (if different than company)  Facility Telephone Area Code & Number  Address (If different than company)  City  State  Zip Co  Pacility Telephone Area Code & Number  City  State  Zip Co  Degistration Number (SRN)  Degistration Number (SRN)  Description of Parts Plated  Total Installed  Rectifier  Capacity  Description of Parts Plated  Applicable  Emission  Limit	

1	New or reconstructed tanks with an initial startup date after 01/25/1995 must submit a <b>Notification of Construction/</b>
	Reconstruction Report and notify the Michigan Department of Environment, Great Lakes, and Energy of the date
	construction/reconstruction commenced and the actual startup date in accordance with 40 CFR 63.347 (c) (2).



2	Existing tanks for which operation commenced on or before 12/16/93	Compliance Dates	New tanks for which construction or reconstruction commenced after 12/16/93	Compliance Dates
	Hard Chromium Plating	1/25/97	If Initial Startup Occurred Between 12/16/93 & 1/25/95	1/25/95
	Decorative Chromium Plating	1/25/96	If Initial Startup Occurred After 1/25/95	Upon Startup
	Chromium Anodizing	1/25/97		

#### **EXAMPLE RESPONSE:**

Tank ID#	Type of Tank	Startup Date 1	Total Installed Rectifier Capacity (Amperes)	Description of Parts Plated	Applicable Emission Limit	Compliance Date 2
10	Chrome anodizing	1/1/85	5,000		45 dynes/cm or 0.01 mg/dscm	1/25/97
23	Hard chrome plating	1/1/85	10,000		0.015 mg/dscm	1/25/97
24	Hard chrome plating	1/1/95	12,000		0.015 mg/dscm	1/25/95
25	Hard chrome plating	3/1/95	12,000		0.015 mg/dscm	3/1/95

A.	Tanks will be located at a facility which is a:
	☐ Major Source (emits greater than 10 tons per year of any one hazardous air pollutant [HAP] or 25 tons per year of multiple HAP's.
	☐ Area Source (all sources which are not Major Sources)
NOTE:	The major/area source determination is based on all HAP emission points inside the facility fence line, not just the chromium electroplating and anodizing tanks.
B.	If hard chromium electroplating tanks are being operated, check all boxes that apply:  The maximum cumulative potential rectifier capacity of the hard chromium electroplating tanks
	(Total installed Rectifier Capacity [amperes] X 8400 Hours/Yr X .70 for Each Tank) is:
	greater than or equal to 60 million amp-hr/hr.
	less than 60 million amp-hr/yr.
	Records show that the facility's previous 12-month cumulative current usage for the hard
	chromium electroplating tanks was <b>less than</b> 60 million amp-hr.
	The facility wishes to accept a federally enforceable limit of less than 60 million amp-hr/yr on the
	maximum cumulative potential rectifier capacity of the hard chromium electroplating tanks.



Tank ID#	Startup Date 1	Description of Parts Plated	Compliance

2	EXISTING TANKS FOR WHICH OPERATION COMMENCED ON OR BEFORE 12/16/93	COMPLIANCE DATES	NEW TANKS FOR WHICH CONSTRUCTION OR RECONSTRUCTION COMMENCED AFTER 12/16/93	COMPLIANCE DATES
		1/25/97	If Initial Startup Occurred Between 12/16/93 & 1/25/95	1/25/95
			If Initial Startup Occurred After 1/25/95	Upon Startup

A.	Provide a brief description of the trivalent chromium electroplating process used at your facility.	Attach
	process flow diagrams for each plating line.	

B.	Check	the	box	that	applies	s.
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The trivalent process used at the facility incorporates a wetting agent.
The trivalent process used at the facility does not incorporate a wetting agent



С	· · · · · · · · · · · · · · · · · · ·	im bath components and clearly identify the wetting	etting				
	agent.						
L	port are true, accurate, and complete.						
	Signature of "Responsible Official"*	Date	_				
	Drinted Name of "Despensible Official"	Tialo	_				
	Printed Name of "Responsible Official"	Title					
	*A "Responsible Official" can be:						
	. The president vice-president secretary or tres	president vice-president secretary or treasurer of the company who owns the facility					

- The president, vice-president, secretary, or treasurer of the company who owns the facility.
- The owner of the facility.
- The facility 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.

Please make a copy of this Initial Notification Report and submit the original signed copy by United States mail, fax, or by another courier to the appropriate Air Quality Division district office (see Attachment A).

For information or assistance on this publication, please contact the Air Quality Division, through EGLE Environmental Assistance Center at 800-662-9278. This publication is available in alternative formats upon request.

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This form and its contents are subject to the Freedom of Information Act and may be released to the public.



#### ATTACHMENT A

### Air Quality Division District Office Contact Information

**Bay City District** 

(Central East Michigan) 401 Ketchum Street, Suite B Bay City, MI 48708-5430

989-894-6200 Fax: 989-891-9237

Counties: Arenac, Bay, Clare, Gladwin, Huron, Iosco, Isabella, Midland, Ogemaw, Saginaw,

Sanilac, and Tuscola

**Detroit District** 

(Wayne County)
Cadillac Place
3058 West Grand Boulevard, Suite 2-300
Detroit. MI 48202-6058

313-456-4700 Fax: 313-456-4692

County: Wayne

**Grand Rapids District** 

(Central West Michigan) 350 Ottawa Avenue NW, Unit 10 Grand Rapids, MI 49503-2316

616-356-0500 Fax: 616-356-0201

Counties: Barry, Ionia, Kent, Mecosta, Montcalm, Muskegon, Newaygo, Oceana, and

Ottawa

Kalamazoo District

(Southwest Michigan) 7953 Adobe Road Kalamazoo, MI 49009-5026

269-567-3500 Fax: 269-567-3555

Counties: Allegan, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren

Marquette District

(Entire Upper Peninsula) 1504 West Washington Street Marquette, MI 49855-3118

906-228-4853 Fax: 906-228-4940

Counties: All counties in the Upper Peninsula

Cadillac District

(Northwest Lower Peninsula) 120 West Chapin Street Cadillac, MI 49601-2158

231-775-3960 Fax: 231-775-4050

Counties: Benzie, Grand Traverse, Kalkaska, Lake, Leelanau, Manistee, Mason, Missaukee,

Osceola, and Wexford

**Gaylord District** 

(Northeast Lower Peninsula) 2100 West M-32 Gaylord, MI 49735-9282

989-731-4920 Fax: 989-731-6181

Counties: Alcona, Alpena, Antrim, Charlevoix, Cheboygan, Crawford, Emmet, Montmorency, Oscoda, Otsego, Presque Isle, and Roscommon

Jackson District

(South Central Michigan) State Office Building, 4th Floor 301 East Louis Glick Highway Jackson, MI 49201-1535

517-780-7690 Fax: 517-780-7855

Counties: Hillsdale, Jackson, Lenawee,

Monroe, and Washtenaw

Lansing District

(Central Michigan) P.O. Box 30242 Lansing, MI 48909-7742

517-284-6651 Fax: 517-241-3571

Counties: Clinton, Eaton, Genesee, Gratiot, Ingham, Lapeer, Livingston, and Shiawassee

Warren District

(Southeast Michigan) 27700 Donald Court Warren, MI 48092-2793

586-753-3700 Fax: 586-753-3731

Counties: Macomb, Oakland, and St. Clair