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# Application for a 112(j) MACT Determination Part I

<b>Agency Use Only</b> Date Received
ID No.

Name of Plant or Establishment	Date of Application
Mailing Address (street address or P.O. Box)	City, State, Zip Code
Physical Location of Source (street address)	City, State, Zip Code

Provide a brief description of the major source and identify the relevant source category. Reference: 40 CFR 63.53(a)(2)

Identify the types of emission points belonging to the relevant source category. Reference: 40 CFR 63.53(a)(3)

Identify any affected sources for which a case-by-case MACT determination has been made under Section 112(g), according to 40 CFR 63.40 through 63.44. Reference: 40 CFR 63.53(a)(4)

**I certify, based on information and belief formed after reasonable inquiry, the statements and information in this document are true, accurate, and complete.**

\_\_\_\_\_  
 Signature of Responsible Official\*

\_\_\_\_\_  
 Date/Time Field

\_\_\_\_\_  
 Responsible Official (print/type)

\_\_\_\_\_  
 Title (print/type)

	Yes	No
*Has the responsible official changed from the current AOP? If the answer to this question is 'Yes', attach <a href="#">Responsible Official-Duly Authorized Representative Form</a> .	<input type="checkbox"/>	<input type="checkbox"/>

Note: If additional space is required, complete on a blank page and attach to this form.