



Public Health  
Prevent. Promote. Protect.

Linn County, Iowa

LINN COUNTY PUBLIC HEALTH  
AIR QUALITY DIVISION

7D Initial Notification – Notification of Compliance Status

National Emission Standards for Hazardous Air Pollutants:  
Area Source Standards for Prepared Feeds Manufacturing

40 Code of Regulation (CFR) Part 63 Subpart DDDDDDD, Section 63.11624(a)(1) and (2), and 40 CFR 63 Subpart A, Section 63.9(b) and (h)

This is a multi-purpose notification form that may be used to fulfill the requirements for 1) Initial Notification and 2) Notification of Compliance Status. The questions below indicate the information that is required for each type of notification.

1. Facility Information (required for all notifications):

Company Name:		Facility Name (if different):		Facility Number (if known):	
Facility Street Address:			City:	State:	Zip:
Owner's Name and Title:		Owner's phone number:		Owner's email (if available):	
Owner's Mailing Address (if different from facility street address):			City:	State:	Zip:

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

Operator's Name and Title:		Operator's phone number:		Operator's email (if available):	
Operator's Street Address (if different from facility street address):			City:	State:	Zip:

2. Identification of Standard (required for all notifications):

Yes, I am subject to 40 CFR Part 63, Subpart DDDDDDD, *National Emission Standards for Hazardous Air Pollutants: Area Source Standards for Prepared Feeds Manufacturing (7D NESHAP)* because this facility fits one of the following descriptions:

- Are a prepared feeds manufacturing facility that is primarily engaged in manufacturing animal feed. A facility is "primarily engaged" if the production of animal feed comprises greater than 50 percent of the total production of the facility on an annual basis.
- Are a prepared feeds manufacturing facility that uses material containing chromium in amounts  $\geq 0.1\%$  by weight, or materials containing manganese in amounts  $\geq 1.0\%$  by weight.
- A prepared feeds manufacturing facility that does **not** use material containing chromium in amounts  $\geq 0.1\%$  by weight, or materials containing manganese in amounts  $\geq 1.0\%$  by weight is exempt from the 7D NESHAP. **If your source is in this category, you do not need to complete this notification.**

3. Brief description of the operation (required for all notifications):

a. Does your facility produce a pelleted feed product?  Yes  No

If yes:

- Facility has average daily feed production level\* equal to or less than 50 tons per day
- Facility has average daily feed production level\* exceeding 50 tons per day

\* Average daily feed production level is the amount of feed product produced in a one-year period divided by the number of operating days.

- b. Please write a brief description of your operation: \_\_\_\_\_  
 c. Source category and NAICS code(s) \_\_\_\_\_

4. **Certification of Compliance Status, please check one (required for the Notification of Compliance Status):**

- This facility is a new source (initial startup was after July 27, 2009). Startup Date: \_\_\_\_\_
- If the source is a **new source**, a responsible official must certify below that the source is in compliance with each of the relevant requirements of the 7D NESHAP. *NOTE: New facilities must submit the Notification of Compliance Status within 120 days of initial startup, or by May 4, 2012, whichever is later.*
- This facility is an existing source (initial startup date was on or before July 27, 2009). Startup Date: \_\_\_\_\_
- If the source is an **existing source**, a responsible official may certify below that the source is already in compliance with each of the relevant requirements of the 7D NESHAP, or submit a separate certification no later than May 4, 2012, as specified in 40 CFR 63.11624(a)(2). Please check one:
    - I am certifying below.
    - I will submit the Notification of Compliance Status by **May 4, 2012**.

<b>Responsible Official Certification</b> (check <u>all</u> that apply)		
<input type="checkbox"/>	<b>I certify the truth, accuracy, and completeness of this notification.</b>	
<input type="checkbox"/>	<b>The source has complied with <u>all</u> the relevant standards and other requirements of the 7D NESHAP. This notification also serves as the Notification of Compliance Status.</b>	
Responsible Official Name	Responsible Official Signature	Date
Phone Number	Email	

**Submit the Initial Notification to the following office:**

Linn County Public Health  
 Air Quality Division  
 1240 26<sup>th</sup> Ave Ct. SW  
 Cedar Rapids, IA 52404