PETROLEUM SOLVENT DRY CLEANING QUESTIONNAIRE

1. Please list the following information in the chart below:

Dryer Unit	Capacity (lbs)	Date of Installation	Date of Manufacture	Solvent Recovery (Y/N)	Unit Type (Dry-to-Dry or Transfer)

∗ *If additional space is needed, please list other dryers on separate page and submit with this form.*

2. Have any of these units been modified since their manufacture date? If so, which units have been modified? Please give a brief description of the modifications.

_____
_____
_____

3. Which petroleum solvent(s) are used at this facility?

_____
_____

4. Are cartridge filters used in your solvent filtration system? If so, what are the procedures used for disposal of spent cartridges?

_____
_____

5. Have there been any changes in ownership at this facility in the past 12 months? (**Y/N**) If so, please indicate below:

_____ _____
Name Date

6. _____ _____ _____
Name of Cleaning Facility **Mailing Address** **City** **Zip**

_____ _____
County **Telephone Number**

_____ _____ _____
Facility Contact (Please Print) **Signature** **Title**

Please return to: ADEM-Air Division
PO Box 301463
Montgomery, AL 36130-1463
Attention: Jennifer Knight