

## Initial Notification of Applicability<sup>a</sup>

National Emission Standards for Hazardous Air Pollutants:  
Stationary **Compression Ignition (CI)** Reciprocating Internal Combustion Engines  
**40 CFR Part 63 Subpart ZZZZ**

Yes, I am subject to 40 CFR Part 63 subpart ZZZZ National Emission Standards for Hazardous Air Pollutants for Stationary Reciprocating Internal Combustion Engines

NAICS code(s): \_\_\_\_\_

Compliance Date:  Existing source: May 3, 2013  New/reconstructed source: upon initial startup

**Note: The May 3, 2013 compliance date for existing sources applies to the following engine types:**

- Existing non-emergency compression ignition (CI) stationary RICE with a site rating of more than 500 brake HP located at a major source of HAP emissions
- Existing stationary CI RICE with a site rating of less than or equal to 500 brake HP located at a major source of HAP emissions
- Existing stationary CI RICE located at an area source of HAP emissions

Company name: \_\_\_\_\_

Facility name (if different): \_\_\_\_\_

Facility (physical location) address: \_\_\_\_\_

\_\_\_\_\_

My facility is a (please choose one):  Major source  Area source

Owner name/title: \_\_\_\_\_

Owner/company address: \_\_\_\_\_

\_\_\_\_\_

Owner telephone number: \_\_\_\_\_

\_\_\_\_\_

<sup>a</sup> This is an example of the type of information that must be submitted to fulfill the Initial Notification of Applicability Status requirement of 40 CFR 63, subpart ZZZZ. You may submit the information in another form or format, or you may use this form. Initial Notification is due 120 days after the effective date (5/3/2010) of the rule or 120 days after you become subject to the rule.

Stationary Compression Ignition (CI) RICE

p. 2

Owner email address (if available): \_\_\_\_\_

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

Operator name/title: \_\_\_\_\_

Operator telephone number: \_\_\_\_\_

Operator email address (if available): \_\_\_\_\_

Brief description of the stationary RICE at the facility, including number of engines and the site-rated HP of each engine: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that the information presented herein is correct to the best of my knowledge.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Name/title)

(\_\_\_\_\_)\_\_\_\_\_  
(Telephone No.)

**Submit the initial notification to the following two addresses:**

**KDHE Bureau of Air and Radiation**

1000 SW Jackson, Suite 310  
Topeka, KS 66612-1366  
785-296-1570

**USEPA Region 7**

Air Permitting and Compliance Branch  
11201 Renner Blvd.  
Lenexa, KS 66219  
913-551-7599

**For free assistance with completing the form, contact**

**Small Business Environmental Assistance Program**

**Kansas State University**

133 Ward Hall  
Manhattan, KS 66506-2508  
800-578-8898

[www.sbeap.org](http://www.sbeap.org)