

OLYMPIC REGION CLEAN AIR AGENCY

2940 Limited Lane NW - Olympia, Washington 98502 - 360-539-7610 – Fax 360-491-6308

FORM 1- NOTICE OF CONSTRUCTION

TO CONSTRUCT - INSTALL - ESTABLISH OR MODIFY AN AIR CONTAMINANT SOURCE

Form 1 Instructions:

1. Please complete all the fields below. **This NOC application is considered incomplete until signed.**
2. If the application contains any confidential business information, please complete a Request of Confidentiality of Records (www.orcaa.org/forms).
3. Duty to Correction Application: An applicant has the duty to supplement or correct an application. Any applicant who fails to submit any relevant facts or who has submitted incorrect information in a permit application must, upon becoming aware of such failure or incorrect submittal, promptly submit supplementary factors or corrected information.

Business Name: Rogers Paint Group, LLC	For ORCAA use only
Mailing Address: PO Box 2024, Port Townsend, WA 98368	File No: 407 County No: 31 Source No: 95 Application No: 23NOE1602
Physical Address of Project or New Source: 151 W. Fredericks St., Port Townsend, WA 98368	Date Received: Received JUL 03 2023 ORCAA
Billing Address: PO Box 2024, Port Townsend, WA 98368	
Project or Equipment to be installed/established: Dust Collection - Updraft Spray Booth	
Anticipated startup date: 03 / 05 / 2020 Is facility currently registered with ORCAA? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
This project must meet the requirements of the State Environmental Policy Act (SEPA) before ORCAA can issue final approval. Indicate the SEPA compliance option: <input type="checkbox"/> SEPA was satisfied by _____ (government agency) on ___/___/___ (date) - Include a copy of the SEPA determination <input type="checkbox"/> SEPA threshold determination by _____ (government agency) is pending - Include a copy of the environmental checklist <input checked="" type="checkbox"/> ORCAA is the only government agency requiring a permit - Include ORCAA Environmental Checklist <input type="checkbox"/> This project is exempt from SEPA per _____ (WAC citation).	
Name of Owner of Business: Ethan Roger	Agency Use Only
Title: owner	
Email: rogerspaintedgroup@outlook.com Phone: 360 821-9918	
Authorized Representative for Application (if different than owner):	
Title: Email: _____ Phone: _____	
I hereby certify that the information contained in this application is, to the best of my knowledge, complete and correct.	
Signature of Owner or Authorized Representative: (sign in Blue Ink)	
[Signature]	Date: 6/30/23
IMPORTANT: Do not send via email or other electronic means. ORCAA must receive Original, hardcopy, signed application and payment prior to processing application.	

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FORM 1D- Contact Information

Business Name Rogers Paint Group, LLC	FOR ORCAA USE
Physical Site Address (Street address, city, state, zip) 151 W. Fredericks St., Port Townsend, WA 98368	FILE # 407
	CTY # 31
	SRC # 95
Previous Business Name (if applicable)	Date Received Received JUL 03 2023
	ORCAA

Contact Information

Inspection Contact	
Name Ethan Rogers	Title Owner
Phone 360-821-9918	Email rogerspaintgroup@outlook.com
Billing Contact	
Name Christina Griffin	Title Bookkeeper
Phone 360-301-3078	Email christina@rogerspaintgroup.com
Emission Inventory Contact	
Name N/A	Title
Phone	Email
Complaint Contact	
Name Ethan Rogers	Title Owner
Phone 360-821-9918	Email rogerspaintgroup@outlook.com
Permit Contact	
Name Ethan Rogers	Title Owner
Phone 360-821-9918	Email rogerspaintgroup@outlook.com

The **inspection contact** is the on-site person responsible for the everyday operation of the site and is available for inspections.

The **billing contact** is the person invoices are sent.

The **emission inventory contact** is the person requests for emissions information and material use information are sent.

The **complaint contact** is the person who receives and responds to complaints received on-site and who is contacted regarding complaints ORCAA receives.

The **permit contact** is the person responsible for filling out permit applications and receiving approval from ORCAA.



ORCAA
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Telephone: (360)-539-7610 – Fax: (360)-491-6308
www.orcaa.org

FORM 8

Fill out all the applicable equipment information requested below and submit the appropriate fees.

SPRAY COATING (Autobody)
SURFACE COATING (Aviation, Wood, Boat, Other)

Shop Information

Business Name: Rogers Paint Group	Contact Person: Ethan Rogers
	Phone Number: 360-821-9918
	Email: rogerspaintgroup@outlook.com
Operating Schedule: 8 hrs/day, 5 days/wk, 52 wks/yr	Indicate days when operating: <input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> T <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> Thu <input checked="" type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun

Process Information

Flow:	<input type="checkbox"/> Cross front flow	<input type="checkbox"/> Full downdraft	<input type="checkbox"/> Side downdraft	<input type="checkbox"/> Combination
	<input type="checkbox"/> Cross reverse flow	<input type="checkbox"/> Semi-downdraft	<input checked="" type="checkbox"/> Updraft	<input type="checkbox"/> Other (explain in attachment)
Exhaust:	<input type="checkbox"/> Side Wall	<input type="checkbox"/> Pit/Trench Design	<input checked="" type="checkbox"/> Ceiling	<input type="checkbox"/> Rear Wall <input type="checkbox"/> Front/Doors
Intake Type:	<input type="checkbox"/> Natural		<input checked="" type="checkbox"/> Forced (air make-up unit)	
Enclosure Type:	<input type="checkbox"/> Fully enclosed	<input type="checkbox"/> Compact/modular	<input checked="" type="checkbox"/> Open table/bench	
	<input type="checkbox"/> Closed top open front (CTOF)	<input type="checkbox"/> Curtain/tent/drape	<input type="checkbox"/> Other (explain in attachment)	
Width (feet):	Length (feet):	Height (feet):		
Manufacturer:	Specs will be furnished			
Model Number:				
Serial Number:				
Pressure Gauge:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Filter Plenum:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Intended Applicator Usage (see next section):	<input checked="" type="checkbox"/> Applicator #1	<input type="checkbox"/> Applicator #3	<input type="checkbox"/> Applicator #5	
	<input checked="" type="checkbox"/> Applicator #2	<input type="checkbox"/> Applicator #4		
Air Pollution Control Methods:	<input type="checkbox"/> Water Wash	<input type="checkbox"/> Low VOC coatings	<input type="checkbox"/> Cartridge unit (Form 12)	
	<input type="checkbox"/> Scrubber	<input type="checkbox"/> Cyclone (Form 13)	<input type="checkbox"/> Enclosed spray gun cleaner	
	<input type="checkbox"/> Oxidizer (Form 35)	<input checked="" type="checkbox"/> Baghouse (Form 12)		
Heater/Curing Information (if applicable) N/A				
Heater Placement:	<input type="checkbox"/> Part of spray booth unit		<input type="checkbox"/> Separate curing enclosure (Form 11)	
Curing/Heating Type :	<input type="checkbox"/> Hot air dryer	<input type="checkbox"/> Infrared dryer	<input type="checkbox"/> Other (explain in attachment)	
	<input type="checkbox"/> Ultraviolet	<input type="checkbox"/> Boiler		
Fuel/Heat Type :	<input type="checkbox"/> Natural gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Other (explain in attachment)	
	<input type="checkbox"/> Propane (LP) Gas	<input type="checkbox"/> Diesel		
Maximum Heating Rate (MMBtu/hr):				
Maximum Air Flow Rate (acfm):				

Coating Operation Information

Type:	<input type="checkbox"/> Existing Stationary Source	<input type="checkbox"/> Temporary Source	<input type="checkbox"/> New Stationary Source
NAICS Code(s):			

Coating Equipment Information

	Applicator #1	Applicator #2	Applicator #3	Applicator #4	Applicator #5	
Coating Type**:	<input checked="" type="checkbox"/> Brush/Roller <input type="checkbox"/> Web <input checked="" type="checkbox"/> Wet spray <input type="checkbox"/> Deposition <input type="checkbox"/> Powder <input type="checkbox"/> Plating	<input checked="" type="checkbox"/> Brush/Roller <input type="checkbox"/> Web <input checked="" type="checkbox"/> Wet spray <input type="checkbox"/> Deposition <input type="checkbox"/> Powder <input type="checkbox"/> Plating	<input type="checkbox"/> Brush/Roller <input type="checkbox"/> Web <input type="checkbox"/> Wet spray <input type="checkbox"/> Deposition <input type="checkbox"/> Powder <input type="checkbox"/> Plating	<input type="checkbox"/> Brush/Roller <input type="checkbox"/> Web <input type="checkbox"/> Wet spray <input type="checkbox"/> Deposition <input type="checkbox"/> Powder <input type="checkbox"/> Plating	<input type="checkbox"/> Brush/Roller <input type="checkbox"/> Web <input type="checkbox"/> Wet spray <input type="checkbox"/> Deposition <input type="checkbox"/> Powder <input type="checkbox"/> Plating	<input type="checkbox"/> Brush/Roller <input type="checkbox"/> Web <input type="checkbox"/> Wet spray <input type="checkbox"/> Deposition <input type="checkbox"/> Powder <input type="checkbox"/> Plating
Manufacturer:	Specs to be furnished					
Model:	"					
Quantity:	1					
Technology Type:	<input type="checkbox"/> HVLP <input type="checkbox"/> Electrostatic <input type="checkbox"/> Air-assisted airless <input checked="" type="checkbox"/> Airless <input type="checkbox"/> Air spray <input type="checkbox"/> Rotary cup <input type="checkbox"/> Airbrush <input type="checkbox"/> Other (explain in attachment)	<input checked="" type="checkbox"/> HVLP <input type="checkbox"/> Electrostatic <input type="checkbox"/> Air-assisted airless <input type="checkbox"/> Airless <input type="checkbox"/> Air spray <input checked="" type="checkbox"/> Rotary cup <input type="checkbox"/> Airbrush <input type="checkbox"/> Other (explain in attachment)	<input type="checkbox"/> HVLP <input type="checkbox"/> Electrostatic <input type="checkbox"/> Air-assisted airless <input type="checkbox"/> Airless <input type="checkbox"/> Air spray <input type="checkbox"/> Rotary cup <input type="checkbox"/> Airbrush <input type="checkbox"/> Other (explain in attachment)	<input type="checkbox"/> HVLP <input type="checkbox"/> Electrostatic <input type="checkbox"/> Air-assisted airless <input type="checkbox"/> Airless <input type="checkbox"/> Air spray <input type="checkbox"/> Rotary cup <input type="checkbox"/> Airbrush <input type="checkbox"/> Other (explain in attachment)	<input type="checkbox"/> HVLP <input type="checkbox"/> Electrostatic <input type="checkbox"/> Air-assisted airless <input type="checkbox"/> Airless <input type="checkbox"/> Air spray <input type="checkbox"/> Rotary cup <input type="checkbox"/> Airbrush <input type="checkbox"/> Other (explain in attachment)	<input type="checkbox"/> HVLP <input type="checkbox"/> Electrostatic <input type="checkbox"/> Air-assisted airless <input type="checkbox"/> Airless <input type="checkbox"/> Air spray <input type="checkbox"/> Rotary cup <input type="checkbox"/> Airbrush <input type="checkbox"/> Other (explain in attachment)
Automation/Control:	<input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	
Air Supply Pressure (psi):						
Fluid Output Pressure (psi):						
Mounting:	<input type="checkbox"/> Handheld Gun <input type="checkbox"/> Machine/ Reciprocator	<input type="checkbox"/> Handheld Gun <input type="checkbox"/> Machine/ Reciprocator	<input type="checkbox"/> Handheld Gun <input type="checkbox"/> Machine/ Reciprocator	<input type="checkbox"/> Handheld Gun <input type="checkbox"/> Machine/ Reciprocator	<input type="checkbox"/> Handheld Gun <input type="checkbox"/> Machine/ Reciprocator	

**Only provide further information for applicators that are not roller/brush

Dry Filter Information *N/A*

	Pre-Filter	Exhaust Filter
Manufacturer:		
Model:		
Media Type:		
Overall Arrest Efficiency (%):		
Filtered Area (squared feet):		

Heavy Metal Information

Application of coatings containing compounds of chromium (Cr), lead (Pb), manganese (Mn), nickel (Ni), or cadmium (Cd):	<input type="checkbox"/> Yes** <input checked="" type="checkbox"/> No
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**Please provide SDS/ MSDS information and estimated annual usage for each product

Other Process Information

Abrasive Blasting:	<input type="checkbox"/> Yes (Form 17) <input checked="" type="checkbox"/> No
Welding:	<input type="checkbox"/> Yes (Form 19) <input checked="" type="checkbox"/> No
Metal Cutting:	<input type="checkbox"/> Yes (Form 31) <input checked="" type="checkbox"/> No
Fluidized Bed Coating:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Cleaning/Etching/Degreasing Information

Methylene Chloride Stripping:	<input type="checkbox"/> Yes** <input checked="" type="checkbox"/> No
Phosphate or Chromate Conversion Coating:	<input type="checkbox"/> Yes** <input checked="" type="checkbox"/> No
Chemical/Acid Rinsing or Bathing:	<input type="checkbox"/> Yes** <input checked="" type="checkbox"/> No

**Please provide SDS/ MSDS information and estimated annual usage for each product

Exhaust/Stack/Building Information

Motor Power (hp):	Specs to be furnished	
Exhaust Air Flow Rate at 0.65" w.g. (acfm):	" "	
Fan Diameter (feet):	2	
Stack Type:	<input checked="" type="checkbox"/> Vertical (Ceiling Outlet)	<input type="checkbox"/> Horizontal (Wall Outlet)
Stack Height (feet from ground):	2	
Stack Inside Diameter (inches):	24	
Stack weatherproof damper or exhaust apparatus:	<input type="checkbox"/> None <input type="checkbox"/> Hexagonal <input checked="" type="checkbox"/> Stack within stack	<input type="checkbox"/> Butterfly <input type="checkbox"/> Inverted cone <input type="checkbox"/> Other (explain in attachment)
Bldg. Peak Height (feet):	18	
Bldg. Width (feet):	49	
Bldg. Length (feet)	48	

Air Quality Modeling Site Information

Distance from the centroid of the stack to the shop's property line (feet):	
Distance from the centroid of the stack to the nearest point on the property line of a permanent residence (feet):	400

Filing Fee:

See <https://www.orcaa.org/services/fee-schedules/> for an up-to-date list of fees

Material Usage Information

Provide the following information and attach copies of Material Safety Data Sheets (MSDS) used in all coating operations, including but not limited to pre-treatment wash, chemical strippers, paint, primer, topcoat, clearcoat, gelcoat, lacquer, stain, catalyst, activator, hardener, resin, filler, sealer, adhesive, solvent and thinner/reducer and any other materials used which contain volatile organic compounds (VOC). Use additional pages if necessary. For similar materials such as multiple color variations of a stain or paint, enter as single item with a usage rate representing the total gallons of all variations used, and provide the MSDS for the constituent which is most used.

NAME OF MATERIAL (as on SDS/ MSDS):	ESTIMATED ANNUAL USAGE (in gallons):	Applicator # (as defined in the "Coating Equipment Information" section):
Lenmar Precat Lacquer	400	
Undercoat Primer-Lenmar	400	
Zinnzer Oil Primer	200	
Latex Primer	400	
Water-Base, Clear	300	
MSDS are very extensive -		
Kept in shop & are viewable		
at any time.		



PO Box 2024
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Rogerspaintgroup@outlook.com

Brief Narrative Description:

The spray booth as 151 W. Fredericks St., Port Townsend, WA 98368, is used for cabinet painting as well as trim. Products used are oil and latex primers and paints, as well as lacquer primer and paint. Waterborne clear as well as oil based clear.