



## ANNUAL REPORT: SOLVENT FACILITIES

Company Name: \_\_\_\_\_ Facility ID#: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Permit #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 City/State/Zip Code: \_\_\_\_\_ Email: \_\_\_\_\_  
 Facility Name/Location: \_\_\_\_\_  
 Reporting Year: \_\_\_\_\_  
 Operating Schedule: Year \_\_\_\_\_ Hours/Day: \_\_\_\_\_ Days/Week: \_\_\_\_\_ Weeks/Year: \_\_\_\_\_

**Annual Usage:** Please list additional materials and usage information on a separate sheet, if needed.

ROC-CONTAINING MATERIAL			TOTAL USAGE (GALS/YEAR)	TOTAL RECYCLED (GALS/YEAR)	NET USAGE (GALS/YEAR)	ROC CONTENT* (LBS/GAL)	EMISSIONS (LBS/YEAR)
METHYL ETHYL METONE (MEK)						6.73	
ISOPROPYL ALCOHOL (IPA)						6.55	
TOLUENE						7.22	
XYLENE						7.17	
OTHER SOLVENTS:							
PAINT(S):							
BRAND NAME	STOCK ID	TYPE					
TOTAL			N/A	N/A	N/A	N/A	

\* **IMPORTANT - Materials with different ROC contents must be listed on separate lines in this table.**

NON-ROC CONTAINING MATERIAL	TOTAL USAGE (GALS/YEAR)	TOTAL RECYCLED (GALS/YEAR)	NET USAGE (GALS/YEAR)
ACETONE			
1,1,1, TRICHLOROETHANE			
TOTAL			

**Monthly Usage:** Please list additional materials and usage information on a separate sheet, if needed.

MONTH	MATERIAL NAME: _____			MATERIAL NAME: _____		
	TOTAL USAGE (GALS/MONTH)	TOTAL RECYCLED (GALS/MONTH)	NET USAGE (GALS/MONTH)	TOTAL USAGE (GALS/MONTH)	TOTAL RECYCLED (GALS/MONTH)	NET USAGE (GALS/MONTH)
JANUARY						
FEBRUARY						
MARCH						
APRIL						
MAY						
JUNE						
JULY						
AUGUST						
SEPTEMBER						
OCTOBER						
NOVEMBER						
DECEMBER						
TOTAL ANNUAL USAGE (GALS/YR)						

Does this annual report contain confidential information?     Yes     No

All information claimed as confidential must be submitted in accordance with APCD Policy & Procedure 6100-020 (Handling of Confidential Information): <http://www.ourair.org/wp-content/uploads/6100-020.pdf>. Failure to follow the required procedures shall be deemed a waiver by the applicant of the right to protect such information from public disclosure.

I certify that the information provided is accurate and complete to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name / Date

**PLEASE RETURN THE COMPLETED ANNUAL REPORT TO:**  
AIR POLLUTION CONTROL DISTRICT, 260 N. SAN ANTONIO RD., SUITE A, SANTA BARBARA CA 93110-1315  
or E-mail to [annualreport@sbcapcd.org](mailto:annualreport@sbcapcd.org) (FAXES NOT ACCEPTED)

## ANNUAL REPORT INSTRUCTIONS FOR SOLVENT FACILITIES

1. **MATERIAL:** List all materials used by **type** for solvents (i.e., isopropyl alcohol (IPA), methyl ethyl ketone (MEK), acetone, etc.) and any paints that were used by **brand name, stock ID, and type** in this column from your monthly records. It is not necessary to group by type of material, but please list all materials used. If you need extra space, you may either make extra copies or write the information on a separate sheet.
2. **TOTAL USAGE:** In the columns to the right of the material categories, please list the total amount of material used, recycled, and the maximum lbs/gallon of ROCs that the material has. To convert grams/liter to lbs/gallon, calculate as follows:
 
$$\frac{\text{grams/liter}}{120} = \text{lbs/gallon}$$
3. **TOTAL RECYCLED:** This is the amount of material sent off site, either by hazardous waste hauler, sent to a recycling center, or sent back to the manufacturer. If you are recycling by some other method, please attach explanation.
4. **NET USAGE:** The **total usage** minus the **total recycled** equals the **net usage**.
5. **ROC (Reactive Organic Compound) LBS/GAL:** Consult your supplier for assistance if unable to determine the ROC limit of your material
6. **EMISSIONS LBS/YEAR:** Multiply the **net usage** with the **ROC\* lbs/gal** to get the **emissions lbs/year**.
7. **CHECK YOUR PERMIT:** Check the *Reporting* condition of your permit, there may be additional information that needs to be submitted with this report. Please provide any additional information that you are required to submit.
8. **SUBMITTAL:** Submit by mail or e-mail. When submitting via e-mail, if you do not receive a response within 72 hours confirming that the District has received your submittal, please assume the annual report was not received and contact us at (805) 979-8050. *Faxes Not Accepted*.

Example:

MATERIAL	TOTAL USAGE (GALS)	TOTAL RECYCLED (GALS)	NET USAGE (GALS)	ROC* LBS/GAL	EMISSIONS LBS/YEAR
IPA	24.0	0.0	24.0	6.55	157
MEK	8.5	2.0	6.5	6.73	44
TOLUENE	13.0	2.0	11.0	7.22	79
TOTAL	N/A	N/A	N/A	N/A	280