

## $\frac{POLYESTER}{FABRICATION} \frac{PRODUCTS}{FABRICATION}$



## COMPLIANCE INSPECTION CHECKLIST

	UAL (INS1, INS2)  NSPECTION (FUI)	COMPLAINT/DISCOVERY ARMS COMPLAINT NO:	(CI)		
AIRS ID#: 0550048 DATE: <u>05/15/2007</u> ARRIVE: <u>10:00 a.m.</u> DEPART: <u>10:30 a.m.</u>					
FACILITY NAME: SEA HAWK					
FACILITY LOCATION:	523 Pear Street				
	SEBRING, FL 33870				
RESPONSIBLE OFFICIAL:	B. J. WYATT	PHONE: (	863)385-1995		
CONTACT NAME:		PHONE:			
REMITTANCE YEAR:	ENTITLE	MENT PERIOD: 12/15/2003 (effective date)	/ 12/15/2008 (end date)		
☑ IN COMPLIANCE ☐ MINOR Non-COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE					
PART II: CONTROL TECHNOLOGY/RECORDKEEPING REQUIREMENTS – Rule 62-210.300, F.A.C. (check ☑ appropriate box(es))					
1. Does the facility operate any emissions units other than the polyester resin plastic products fabrication units and emissions units which are exempt from permitting pursuant to the criteria of paragraph 62-210.300(3)(a) or (b), F.A.C., or have been exempted from permitting under Rule 62-4.040, F.A.C.? (Rule 62-210.300(3)(c)5.a., F.A.C.)——————————————————————————————————					
of at least five years? (C. 6. Is this polyester resin pla Reasonably Available Co.	hapter 62-210.300(3)(c)5.d. astic products fabrication acontrol Technology (RACT)	tivity subject to a volatile organic emission limiting standard of Ch			

PART III: <u>CONTROL/OPERATING/MAINTENANCE REQUIREMENTS</u> – Rule 62-210.300, F.A.C.					
(check ☑ appropriate box(es))					
1. Does the owner or operator voluntarily encourage pollution prevention through such measures as training employees involved in product fabrication on methods of reducing evaporative losses by:  a) lessening the exposure of fresh resin surfaces to the air?					
<ul><li>b) alterations to existing process equipment withou</li><li>c) replacement of existing equipment substantially</li></ul>	ut replacement?y different than that noted on the most				
d) If you answered <u>YES</u> to any of the above, did the notification form and appropriate fee (Rule 62-4 local program office?	☐Yes ☐No				
ROBERT J. STEWART	05/15/2007				
Inspector's Name (Please Print)	Date of Inspection				
	05/2008				
Inspector's Signature	Approximate Date of Next Inspection	_			
COMMENTS: 05					