

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



COMPLIANCE INSPECTION CHECKLIST

	ANNUAL (INS1, INS2) RE-INSPECTION (FUI)	COMPLAINT/DISCO	· / _	
AIRS ID#: 0112651 DAT	E: <u>1/26/11</u>	ARRIVE: <u>0930</u>	DEPART: <u>1035</u>	
FACILITY NAME: Z-GLASSING				
FACILITY LOCATION:	231 S.E. 1ST TERRACE			
	DEERFIELD BEACH	33441		
RESPONSIBLE OFFICIAL: BOB ZACHELMAYER PHONE: (954)481-9024				
CONTACT NAME: Same		PHONE: same		
REMITTANCE YEAR:	ENTITLE	EMENT PERIOD: 5/29/2		
☐ IN COMPLIANCE ☐ SIGNIFICANT Non-COMPLIANCE				
 (check ☑ appropriate Does the facility op and emissions units 62-210.300(3)(a) or (Rule 62-210.300(3) Does the facility con not cause, suffer, all odor? Does the combined in any consecutive Does the owner/ope used on a monthly Does the owner/ope of at least five year Is this polyester res Reasonably Availal 	berate any emissions units other is which are exempt from permitter (b), F.A.C., or have been exempt by the control of the control of the control of the facility maintain receptables (Chapter 62-210.300(3)(control of the control of the control of the facility maintain receptations (Chapter 62-210.300(3)(control of the control of the control of the facility maintain receptations (Chapter 62-210.300(3)(control of the control	than the polyester resin placeting pursuant to the criteria apted from permitting under the probabilition of subsection are pollutants which cause of the po	stic products fabrication units of paragraph Rule 62-4.040, F.A.C.?	

PART III: CONTROL/OPERATING/MAINTENANCE REQUIREMENTS – 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?					
c) replacement of existing equipment substantially	□Yes ☑No t replacement? □Yes ☑No different than that noted on the most				
recent notification form?					
Art Pennetta	1/26/11				
Inspector's Name (Please Print)	Date of Inspection				
	N/A				
Inspector's Signature	Approximate Date of Next Inspection				
COMMENTS: Facility is operating with an expired GP.					