

F&A RECEIPT 760837

DATE: OCT 21 2011

RECEIVED

OCT 25 2011

SECONDARY ALUMINUM SWEAT FURNACES
AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET

DIVISION OF AIR
RESOURCE MANAGEMENT

Facility Identification Number - If known (seven digit number)

1150153

1150153-002

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing permitted facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit). If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. (See "Surrender of Existing Air Operation Permit(s)" below.)
- Operates an existing facility not currently permitted or using an air general permit.

RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
- Continue operating the facility after a change of ownership.
- Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C.
- Any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only, if Applicable

All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit/specifically permit number(s):

NA

General Facility Information

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

Glueck's Auto Parts, Inc.

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a complete registration must be submitted for each.)

Facility Location (Physical location of the facility, not necessarily the mailing address.)

Street Address: 4801 Preymore Street

City: Osprey

County: Sarasota

Zip Code: 34229 - 8832

Facility Start-Up Date (Estimated start-up date of proposed new facility.)(N/A for existing facility.)

NA

Facility Contact

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.) Print Name and Title: <u>Albert William Glueck III, President</u>		
Facility Contact Telephone Numbers Telephone: <u>941-966-5555</u> Fax: <u>941-966-8655</u> Cell phone: _____ E-mail: <u>billy@glueckautoparts.com</u>		
Facility/Contact Mailing Address Organization/Firm: <u>Glueck's Auto Parts, Inc.</u> Mailing Address: <u>4801 Preymore Street</u> City: <u>Osprey</u> County: <u>Sarasota</u> Zip Code: <u>34229 - 8832</u>		

Other Contact/Representative (to serve as additional Department contact)

Name and Position Title Print Name and Title: <u>Albert William Glueck II, Vice President</u>		
Other Contact/Representative Telephone Numbers Telephone: <u>941-966-5555</u> Fax: <u>941-966-8655</u> Cell phone: _____ E-mail: _____		
Other Contact/Representative Mailing Address Organization/Firm: <u>Glueck's Auto Parts, Inc.</u> Mailing Address: <u>4801 Preymore Street</u> City: <u>Osprey</u> County: <u>Sarasota</u> Zip Code: <u>34229 - 8832</u>		

Government Facility Code (check only one)

<input checked="" type="checkbox"/> Facility not owned or operated by a federal, state, or local government.
<input type="checkbox"/> Facility owned or operated by the federal government.
<input type="checkbox"/> Facility owned or operated by the state.
<input type="checkbox"/> Facility owned or operated by the county.
<input type="checkbox"/> Facility owned or operated by the municipality.
<input type="checkbox"/> Facility owned or operated by a water management district.

Facility Description and Comments

Number of secondary aluminum sweat furnace units on site: 1

List and briefly describe all other process operations at the site that may emit air pollutants (for example, scrap shredders, degreasers, paint shops, boilers, emergency generators, etc.). Add any comments about the facility that would be helpful to the Department in understanding the nature of your operation (for example, describe the products made, amount of materials used, air pollution control equipment employed, and hours of operation).

No other processes emit air pollutants