

PERC DRY CLEANER STATUS UPDATE

1. Print or type the following information for EACH separately located dry cleaning facility. The owner of more than one facility should fill out a separate form for **EACH** facility. *(Make additional copies of this form, if needed).*

Owner/Operator _____

Company Name _____

Mailing Address _____

Physical Address _____

City _____ State _____ Zip _____ County _____

Phone Number _____

2. Initial Submission of Questionnaire ☐ Updated Submission of Questionnaire ☐

3. Check the box below if:

Your dry cleaner is a **Pick-up Store**.

Your dry cleaning facility has only coin-operated dry cleaning machines that are operated by the customers.

Your dry cleaning plant **closed** effective _____ (date).

If you checked any box above, you may STOP HERE and return the form to:

**ADEM-Air Division
P. O. Box 301463
Montgomery, Al 36130-1463**

4. Write in the total volume of perchloroethylene (PERC) purchased for **ALL** of the machines at the dry cleaning plant over the past 12 months. If your facility is new and has not operated an entire year, please estimate how much PERC will be purchased in the next 12 months:
_____ Gallons (**Actual** or **Estimated**)

5. Indicate the number of machines of each type that is located at your facility:
 _____ Dry-to-Dry _____ Transfer
6. Are records of perceptible leaks, parts ordered, repairs, refrigerated condenser temperature monitoring, PERC purchases, etc., being kept? ☐ Yes ☐ No
(If no is checked, these records are a requirement. Your facility should begin keeping these records. They should be kept for five years and be readily available for inspection).
7. Are you using the **20__ Dry Cleaner Compliance Calendar** for recordkeeping?
☐ Yes ☐ No
8. Provide the following information for EACH MACHINE at your plant. If you have more than 4 machines at your plant, make additional copies of this form.

	Machine 1	Machine 2	Machine 3	Machine 4
Machine Type (Circle one)	Dry-to-Dry Transfer	Dry-to-Dry Transfer	Dry-to-Dry Transfer	Dry-to-Dry Transfer
Date Machine was installed				
Control Device (refrigerated condenser or carbon adsorber)				
Date Control Device was installed				

9. If there has been a change in ownership at this facility in the past 12 months, please indicate below.

_____ Name

_____ Date

10. Has there been a change from PERC to another cleaning agent? ☐ Yes ☐ No
 If so, indicate the type of cleaning agent and date of changeover. _____

11. Print or type the name and title of the Responsible Official for the dry cleaning plant:

Name	Title
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Signature	Date
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Please return this form to:

ADEM-Air Division, P. O. Box 301463, Montgomery, Al 36130-1463