PRINTING/PUBLISHING FACILITY REGISTRATION FORM

Oklahoma Department of Environmental Quality Air Quality Division

Letterpress
Other (please list):

ASSISTANCE AVAILABLE @

DEQ Customer Assistance: (405) 702-9100

(800) 869-1400

Air Quality Division: (405) 702-4100

If your facility performs any type	e of printing and/or p	ublishing,	check one	of the followin	g boxes.
 □ We are a photocopying/repr □ We currently have an air q inventory. (Complete only □ We currently use less than and other solvents. (Compl □ All other facilities. (Completes type, or print legibly. Subspice of the print legibly. 	uality permit (Numb sections I and V.) 200 gallons/month lete only sections I at lete sections I, II, III,	of all chennd V.) IV and V.	micals, inc	nd submit an ar luding inks, wa	nnual emissions
I. GENERAL FACILITY I	NFORMATION				
Company Name:					
Street Address:		City:		State:	Zip:
Mailing Address: □ same as	above	City:		State:	Zip:
Phone:	Fax:		E-mail:		
Technical Contact:		Position:			
II. PRINTING PROCESSES	S PERFORMED AT	THIS FA	CILITY	(Check all t	that apply)
Process type			Chec	ck if "Yes"	
Lithography					
Flexography					
Gravure/Rotogravi	are				

III. PRINTING EQUIPMENT INVENTORY

Please list the following information for each press. Please attach an additional sheet if necessary.

PRINTING PRESS INFORMATION						
Press Name	Model	Emissions Control Equipment ¹	Date of Mfg.	Web or Sheet-Fed	Type of Ink (Heatset or Non-heatset)	# of Print Units

¹Examples include: thermal/catalytic incineration (burning) and carbon adsorption.

IV. MATERIAL USAGE INFORMATION

Please list the types and amount of inks, fountain solutions/washes, blanket cleaners, solvents or other chemicals used at the facility.

Material	Soy or Water Based Ink? (Yes/No)	Annual Usage Pounds or Gallons		% Volatile Organic Compound (VOC) by weight ¹

¹Information can be obtained from the product MSDS (usually in Section 9). Attach an additional sheet if needed.

V. SIGNATURE

I certify that the sta	Based on information and belief formed after reasonable inquiry, atements and information contained in this document are true, accurate, and complete.
Printed name	
Signature	Date
RETURN TO: Oklahoma Dej	partment of Environmental Quality, AQD Permitting Section, P.O. Box 1677, Oklahoma City, OK 73101