PERC FACILITY ANNUAL REPORT
For Reporting Period:

January 1 to December 31, ______

Facility Name: ______________________________ Facility ID: ______________
Street Address: ________________________________________________________
City: __________________ State: ______ Zip Code: __________

The State Air Toxic Control Measure (ATCM) and District Rule 7070 – Perchloroethylene From Dry
Cleaning Operations requires each facility to provide the following information annually:

1. Total number of pounds of material cleaned during the reporting period. __________ lbs.
2. Total gallons of PERC purchased during the reporting period. __________ gals.
3. The make, model, serial number, and date of manufacture for each dry cleaning machine operated
during the reporting period.

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<th>Permit #</th>
<th>Make</th>
<th>Model</th>
<th>Serial #</th>
<th>Date Manufactured</th>
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4. The most current copy of the “Environmental Training Program” record of completion for each
trained operator (attach).

Submitted By: ______________________________ Telephone: __________________
Print Name
Signature: ______________________________ Date: ______________