



**ANNUAL REPORTING FORM FOR:
SMALL METAL FABRICATION AND FINISHING OPERATIONS**

AQGP-R029

State of Oregon
Department of
Environmental
Quality

1. Source number: _____ 2. Reporting period: (calendar year): _____

3. Company information:

Legal Name:	Other company name (if different than legal name):
Mailing address:	Site address (if different than mailing address):
City, state, zip code:	City, state, zip code:

4. Site Contact Person:

Name:	Telephone number:
Title:	Email address:

5. Facility-wide fuel usage (i.e., natural gas, propane, diesel, oil, used in boilers, heaters, ovens, etc.):

Fuel Type	Fuel Usage	Fuel Usage Units (gallons, therms, etc.)	Fuel Type	Fuel Usage	Fuel Usage Units (gallons, therms, etc.)

6. Facility-wide abrasive material usage:

Abrasive Type	Abrasive Usage (pounds)	Abrasive Type	Abrasive Usage (pounds)

7. Facility-wide welding rod usage:

Welding Process Type	Electrode Type	Electrode Usage (pounds)	Welding Process Type	Electrode Type	Electrode Usage (pounds)



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8. Abrasive blasting dust generation minimization: Describe measures taken to minimize dust generation during emptying of abrasive blasting enclosures (see Condition 3.2)

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9. Machining excess dust minimization: Describe measures taken to minimize excess dust in the area surrounding machining operations (see Condition 3.3)

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10. Dry grinding and dry polishing dust minimization: Describe measures taken to minimize excess dust in the area surrounding dry grinding and dry polishing machines (see Condition 3.4)

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11. Welding emission minimization: Indicate and describe which steps you are taking to minimize welding metal fabrication hazardous air pollutant emissions (see Condition 3.5)

Welding Process Type	Electrode Type	Welding process variations	Filler metals, shielding gases, or carrier gases	Welding process variables	Capture and control system

12. Summary of complaints relating to air quality: List any air quality/nuisance complaints received within the last calendar year: (attach separate sheet if necessary to explain)

Date	Time	Complaint/What was it about?	Response/What did you do?



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13. List permanent changes made to processes and equipment that affected air contaminate emissions:
(attach separate sheet if necessary to explain)

14. Certifying Signature

Name of Official (printed or typed):	Title of Official and Phone Number:
Signature of Official:	Date:

PLEASE SUBMIT THIS REPORTING FORM TO:

Please submit this form to the Permit Coordinator at the Oregon Department of Environmental Quality regional office shown on the cover page of the permit assignment form. The Permit Coordinator addresses are also listed in the Administrative Requirements section of the General Air Contaminant Discharge Permit.