

Saint Louis **COUNTY** **HEALTH**

DRY CLEANERS CONSTRUCTION/OPERATING PERMIT APPLICATION
SECTION A – GENERAL INFORMATION

FACILITY NAME:	PLANT NO:
FACILITY STREET ADDRESS:	FACILITY PHONE NO:
CITY: STATE: ZIP:	OWNER PHONE NO:
OWNERS NAME:	FAX NO:
OWNERS MAILING ADDRESS: CITY: STATE:	ZIP:

SECTION B – MACHINE INFORMATION

MACHINE	TYPE OF MACHINE	TYPE OF CONTROL EQUIPMENT ON MACHINE	MAX. DESIGN RATE (LBS OF CLOTHES)	EMISSION RATE (LBS/HR)	MODEL & YEAR INSTALLED
1.					
2.					
3.					

SECTION C – SOLVENT INFORMATION

TYPE OF SOLVENT USED:

SECTION D - CERTIFICATION STATEMENT

"I CERTIFY, BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY, THE INFORMATION IN THIS DOCUMENT IS TRUE, ACCURATE AND COMPLETE."

_____ **DATE** _____
PRINTED NAME & SIGNATURE OF RESPONSIBLE OFFICIAL OF COMPANY

CONSTRUCTION PERMIT APPLICATION FEE IS \$655.00 PER FACILITY
OPERATING PERMIT APPLICATION FEE IS \$218.00 PER MACHINE

MAIL PAYMENT TO: **ATTN: JENNIFER PHILLIPS**
SAINT LOUIS COUNTY HEALTH DEPARTMENT
AIR POLLUTION CONTROL PROGRAM
111 SOUTH MERAMEC AVE.
CLAYTON, MO 63105