

# SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT

## Title V Permit Summary

AQMD Facility ID:	141901	Company Name:	CMH Manufacturing West, Inc., Golden West Homes dba	
Equipment Location:	3100 N. Perris Boulevard, Perris, CA 92571			SIC Code: 2451
Permit Revision #:	Revision Date:	Facility Permit Section(s) Affected:		
Application #(s):	517791	Application Submittal Date(s):	12/29/10	
AQMD Contact Person:	Hamed Mandilawi	Phone #:	(909) 396-3275	E-Mail Address: hmandilawi@aqmd.gov
Project Description: This is an existing facility applying for a Title V permit renewal that is engaged in the manufacturing of manufactured homes. The facility operates spray booths, open spray systems, and other supporting equipment.				
Permit Type: <input type="checkbox"/> Initial Title V Permit <input type="checkbox"/> New Facility <input type="checkbox"/> Administrative Revision <input type="checkbox"/> Minor Revision <input checked="" type="checkbox"/> Permit Renewal <input type="checkbox"/> De Minimis Significant Revision <input type="checkbox"/> Significant Revision				
Permit Features: <input checked="" type="checkbox"/> Federally Enforceable Emission Cap For Exemption From Certain NESHAP Requirements <input type="checkbox"/> Permit Shield Applies <input type="checkbox"/> Permit Contains Conditions Allowing Emission Trading <input type="checkbox"/> Alternative Operating Scenario <input type="checkbox"/> Permit Streamlines Overlapping or Outdated Requirements <input type="checkbox"/> Other: _____ <input type="checkbox"/> Source Out of Compliance With Applicable Requirements and/or Operating Under a Variance				
Toxic Air Contaminant Emissions (TAC) – Annual Reported Emissions for Reporting Year: 2010		<input type="checkbox"/> No TACs Reported <input checked="" type="checkbox"/> <u>The Following TACs Were Reported:</u> Nickel		<u>Emissions (lbs/yr):</u> 0.059
Health Risk From Toxic Air Contaminants: <input type="checkbox"/> Health Risk Reduction Plan in Force (AQMD Rule 1402) (date): _____ <input type="checkbox"/> Health Risk Assessment Required for this Permit Action (AQMD Rule 1401) <input checked="" type="checkbox"/> Facility is Subject to Review by the Air Toxics Information and Assessment Act (AB2588) <input checked="" type="checkbox"/> Facility Determined to be Exempt from AB2588 Requirements <input type="checkbox"/> AQMD is Tracking Status of Facility under AB2588 <input type="checkbox"/> Health Risk Assessment Submitted to AQMD and Is Being Reviewed <input type="checkbox"/> Final Facility Health Risk Approved (date) _____ Cancer Risk = _____ <u>in one million</u> Acute Hazard Index = _____ Chronic Hazard Index = _____				
Criteria Pollutant Emissions Annual Reported Emissions: (tons/year) for Reporting Year: 2010		<input checked="" type="checkbox"/> NOx    0	<input checked="" type="checkbox"/> PM    2.889	
		<input checked="" type="checkbox"/> CO    0	<input checked="" type="checkbox"/> SOx    0	
		<input checked="" type="checkbox"/> VOC    2.626	<input type="checkbox"/> Other: _____	
Compliance History: <input checked="" type="checkbox"/> Citizen Complaints Filed in Last Two Calendar Years (# 0) <input checked="" type="checkbox"/> Notices to Comply Issued in Last Two Calendar Years (# 0) <input checked="" type="checkbox"/> Notices of Violation Issued in Last Two Calendar Years (# 1)				
Comments:				