



South Coast Air Quality Management District
Form 400-A
Application Form for Permit or Plan Approval
 List only one piece of equipment or process per form.

Mail To:
 SCAQMD
 P.O. Box 4944
 Diamond Bar, CA 91765-0944
 Tel: (909) 396-3385
 www.aqmd.gov

Section A - Operator Information

1. Facility Name (Business Name of Operator to Appear on the Permit): Prime Wheel Corporation	2. Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD): 105903
3. Owner's Business Name (If different from Business Name of Operator):	

Section B - Equipment Location Address	Section C - Permit Mailing Address
4. Equipment Location Is: <input checked="" type="radio"/> Fixed Location <input type="radio"/> Various Location (For equipment operated at various locations, provide address of initial site.) 17704 South Broadway Street Street Address Carson, CA 90746 City State Zip Wei Chen, Director of Env. Contact Name Title (310) 819-4149 (310) 326-6509 Phone # Ext. Fax # E-Mail: wchen@primewheel.com	5. Permit and Correspondence Information: <input type="checkbox"/> Check here if same as equipment location address 17703 South Main Street Address Gardena, CA 90248 City State Zip Wei Chen, Director of Env. Contact Name Title (310) 819-4149 (310) 326-6509 Phone # Ext. Fax # E-Mail: wchen@primewheel.com

Section D - Application Type

6. The Facility Is: Not In RECLAIM or Title V In RECLAIM In Title V In RECLAIM & Title V Programs

7. Reason for Submitting Application (Select only ONE):

7a. New Equipment or Process Application: <input type="radio"/> New Construction (Permit to Construct) <input type="radio"/> Equipment On-Site But Not Constructed or Operational <input type="radio"/> Equipment Operating Without A Permit * <input type="radio"/> Compliance Plan <input type="radio"/> Registration/Certification <input type="radio"/> Streamlined Standard Permit	7c. Equipment or Process with an Existing/Previous Application or Permit: <input type="radio"/> Administrative Change <input type="radio"/> Alteration/Modification <input type="radio"/> Alteration/Modification without Prior Approval * <input type="radio"/> Change of Condition <input type="radio"/> Change of Condition without Prior Approval * <input type="radio"/> Change of Location <input type="radio"/> Change of Location without Prior Approval * <input checked="" type="radio"/> Equipment Operating with an Expired/Inactive Permit *
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7b. Facility Permits:
 Title V Application or Amendment (Also submit Form 500-A) RECLAIM Facility Permit Amendment

A Higher Permit Processing Fee and additional Annual Operating Fees (up to 3 full years) may apply (Rule 301(c)(1)(D)(i)).

Existing or Previous Permit/Application
 If you checked any of the items in 7c., you MUST provide an existing Permit or Application Number:

8a. Estimated Start Date of Construction (mm/dd/yyyy): _____ 8b. Estimated End Date of Construction (mm/dd/yyyy): _____ 8c. Estimated Start Date of Operation (mm/dd/yyyy): _____

9. Description of Equipment or Reason for Compliance Plan (list applicable rule): Title V permit renewal	10. For identical equipment, how many additional applications are being submitted with this application? (Form 400-A required for each equipment / process) _____
11. Are you a Small Business as per AQMD's Rule 102 definition? (10 employees or less and total gross receipts are \$500,000 or less OR a not-for-profit training center) <input checked="" type="radio"/> No <input type="radio"/> Yes	12. Has a Notice of Violation (NOV) or a Notice to Comply (NC) been issued for this equipment? <input checked="" type="radio"/> No <input type="radio"/> Yes If Yes, provide NOV/NC#: _____

Section E - Facility Business Information

13. What type of business is being conducted at this equipment location? Automobile part	14. What is your business primary NAICS Code? (North American Industrial Classification System) 336399
15. Are there other facilities in the SCAQMD jurisdiction operated by the same operator? <input type="radio"/> No <input checked="" type="radio"/> Yes	16. Are there any schools (K-12) within 1000 feet of the facility property line? <input checked="" type="radio"/> No <input type="radio"/> Yes

Section F - Authorization/Signature *I hereby certify that all information contained herein and information submitted with this application are true and correct.*

17. Signature of Responsible Official: 	18. Title of Responsible Official: President	19. I wish to review the permit prior to issuance. (This may cause a delay in the application process.) <input type="radio"/> No <input checked="" type="radio"/> Yes
20. Print Name: Mitch Tung	21. Date: 05/07/2012	22. Do you claim confidentiality of data? (If Yes, see instructions.) <input checked="" type="radio"/> No <input type="radio"/> Yes

23. Check List: Authorized Signature/Date Form 400-CEQA Supplemental Form(s) (ie., Form 400-E-xx) Fees Enclosed

AQMD USE ONLY	APPLICATION TRACKING # 537670	CHECK # 208081	AMOUNT RECEIVED \$ 11,165.15	PAYMENT TRACKING #	VALIDATION 5-1012		
DATE	APP DATE	APP REJ	CLASS I III	BASIC CONTROL	EQUIPMENT CATEGORY CODE	ENGINEER	REASON/ACTION TAKEN

S. D. S. M.
ENGINEERING

12 MAY 10 P5 53



South Coast Air Quality Management District

Form 400-CEQA

California Environmental Quality Act (CEQA) Applicability

Mail To:
SCAQMD
P.O. Box 4944
Diamond Bar, CA 91765-0944
Tel: (909) 396-3385
www.aqmd.gov

The SCAQMD is required by state law, the California Environmental Quality Act (CEQA), to review discretionary permit project applications for potential air quality and other environmental impacts. This form is a screening tool to assist the SCAQMD in clarifying whether or not the project¹ has the potential to generate significant adverse environmental impacts that might require preparation of a CEQA document [CEQA Guidelines §15060(a)].² Refer to the attached instructions for guidance in completing this form.³ For each Form 400-A application, also complete and submit one Form 400-CEQA. If submitting multiple Form 400-A applications for the same project at the same time, only one 400-CEQA form is necessary for the entire project. If you need assistance completing this form, contact Permit Services at (909) 396-3385 or (909) 396-2668.

Section A - Facility Information	
1. Facility Name (Business Name of Operator To Appear On The Permit): <u>Prime Wheel Corporation</u>	2. Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD): <u>105903</u>
3. Project Description: <u>Title V renewal.</u>	

Section B - Review For Exemption From Further CEQA Action		
Check "Yes" or "No" as applicable		
	Yes	No
Is this application for:		
1. A CEQA and/or NEPA document previously or currently prepared that specifically evaluates this project? If yes, attach a copy of the signed Notice of Determination to this form.	<input type="radio"/>	<input checked="" type="radio"/>
2. A request for a change of permittee only (without equipment modifications)?	<input type="radio"/>	<input checked="" type="radio"/>
3. A functionally identical permit unit replacement with no increase in rating or emissions?	<input type="radio"/>	<input checked="" type="radio"/>
4. A change of daily VOC permit limit to a monthly VOC permit limit?	<input type="radio"/>	<input checked="" type="radio"/>
5. Equipment damaged as a result of a disaster during state of emergency?	<input type="radio"/>	<input checked="" type="radio"/>
6. A Title V (i.e., Regulation XXX) permit renewal (without equipment modifications)?	<input type="radio"/>	<input checked="" type="radio"/>
7. A Title V administrative permit revision?	<input type="radio"/>	<input checked="" type="radio"/>
8. The conversion of an existing permit into an initial Title V permit?	<input type="radio"/>	<input checked="" type="radio"/>

If "Yes" is checked for any question in Section B, your application does not require additional evaluation for CEQA applicability. Skip to Section D - Signatures on page 2 and sign and date this form.

Section C - Review of Impacts Which May Trigger CEQA		
Complete Parts I-VI by checking "Yes" or "No" as applicable. To avoid delays in processing your application(s), explain all "Yes" responses on a separate sheet and attach it to this form.		
	Yes	No
Part I - General		
1. Has this project generated any known public controversy regarding potential adverse impacts that may be generated by the project? Controversy may be construed as concerns raised by local groups at public meetings; adverse media attention such as negative articles in newspapers or other periodical publications, local news programs, environmental justice issues, etc.	<input type="radio"/>	<input checked="" type="radio"/>
2. Is this project part of a larger project? If yes, attach a separate sheet to briefly describe the larger project.	<input type="radio"/>	<input checked="" type="radio"/>
Part II - Air Quality		
3. Will there be any demolition, excavating, and/or grading construction activities that encompass an area exceeding 20,000 square feet?	<input type="radio"/>	<input checked="" type="radio"/>
4. Does this project include the open outdoor storage of dry bulk solid materials that could generate dust? If Yes, include a plot plan with the application package.	<input type="radio"/>	<input checked="" type="radio"/>

¹ A "project" means the whole of an action which has a potential for resulting in physical change to the environment, including construction activities, clearing or grading of land, improvements to existing structures, and activities or equipment involving the issuance of a permit. For example, a project might include installation of a new, or modification of an existing internal combustion engine, dry-cleaning facility, boiler, gas turbine, spray coating booth, solvent cleaning tank, etc.

² To download the CEQA guidelines, visit http://ceres.ca.gov/env_law/state.html.

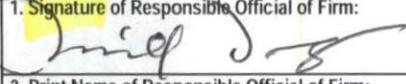
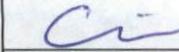
³ To download this form and the instructions, visit <http://www.aqmd.gov/ceqa> or <http://www.aqmd.gov/permit>

Section C - Review of Impacts Which May Trigger CEQA (cont.)			
	Yes	No	Part II - Air Quality (cont.)
5.	<input type="radio"/>	<input checked="" type="radio"/>	Would this project result in noticeable off-site odors from activities that may not be subject to SCAQMD permit requirements? For example, compost materials or other types of greenwaste (i.e., lawn clippings, tree trimmings, etc.) have the potential to generate odor complaints subject to Rule 402 - Nuisance.
6.	<input type="radio"/>	<input checked="" type="radio"/>	Does this project cause an increase of emissions from marine vessels, trains and/or airplanes?
7.	<input type="radio"/>	<input checked="" type="radio"/>	Will the proposed project increase the QUANTITY of hazardous materials stored aboveground onsite or transported by mobile vehicle to or from the site by greater than or equal to the amounts associated with each compound on the attached Table 1? ⁴
Part III - Water Resources			
8.	<input type="radio"/>	<input checked="" type="radio"/>	Will the project increase demand for water at the facility by more than 5,000,000 gallons per day? The following examples identify some, but not all, types of projects that may result in a "yes" answer to this question: 1) projects that generate steam; 2) projects that use water as part of the air pollution control equipment; 3) projects that require water as part of the production process; 4) projects that require new or expansion of existing sewage treatment facilities; 5) projects where water demand exceeds the capacity of the local water purveyor to supply sufficient water for the project; and 6) projects that require new or expansion of existing water supply facilities.
9.	<input type="radio"/>	<input checked="" type="radio"/>	Will the project require construction of new water conveyance infrastructure? Examples of such projects are when water demands exceed the capacity of the local water purveyor to supply sufficient water for the project, or require new or modified sewage treatment facilities such that the project requires new water lines, sewage lines, sewage hook-ups, etc.
Part IV - Transportation/Circulation			
10.	Will the project result in (Check all that apply):		
	<input type="radio"/>	<input checked="" type="radio"/>	a. the need for more than 350 new employees?
	<input type="radio"/>	<input checked="" type="radio"/>	b. an increase in heavy-duty transport truck traffic to and/or from the facility by more than 350 truck round-trips per day?
	<input type="radio"/>	<input checked="" type="radio"/>	c. increase customer traffic by more than 700 visits per day?
Part V - Noise			
11.	<input type="radio"/>	<input checked="" type="radio"/>	Will the project include equipment that will generate noise GREATER THAN 90 decibels (dB) at the property line?
Part VI - Public Services			
12.	Will the project create a permanent need for new or additional public services in any of the following areas (Check all that apply):		
	<input type="radio"/>	<input checked="" type="radio"/>	a. Solid waste disposal? Check "No" if the projected potential amount of wastes generated by the project is less than five tons per day.
	<input type="radio"/>	<input checked="" type="radio"/>	b. Hazardous waste disposal? Check "No" if the projected potential amount of hazardous wastes generated by the project is less than 42 cubic yards per day (or equivalent in pounds).

****REMINDER:** For each "Yes" response in Section C, attach all pertinent information including but not limited to estimated quantities, volumes, weights, etc.**

Section D - Signatures

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT THIS FORM IS A SCREENING TOOL AND THAT THE SCAQMD RESERVES THE RIGHT TO CONSIDER OTHER PERTINENT INFORMATION IN DETERMINING CEQA APPLICABILITY.

1. Signature of Responsible Official of Firm: 		2. Title of Responsible Official of Firm: President	
3. Print Name of Responsible Official of Firm: Mitch Tung		4. Date Signed: 05/07/2012	
5. Phone # of Responsible Official of Firm: (310) 516-9126	6. Fax # of Responsible Official of Firm: (310) 326-6509	7. Email of Responsible Official of Firm: mtung@primewheel.com	
8. Signature of Preparer, (If prepared by person other than responsible official of firm): 		9. Title of Preparer: Director of Environmental Division	
10. Print Name of Preparer: Wei Chen		11. Date Signed: 05/07/2012	
12. Phone # of Preparer: (310) 819-4149	13. Fax # of Preparer: (310) 326-6509	14. Email of Preparer: wchen@primewheel.com	

THIS CONCLUDES FORM 400-CEQA. INCLUDE THIS FORM AND ANY ATTACHMENTS WITH FORM 400-A.

⁴Table 1 - Regulated Substances List and Threshold Quantities for Accidental Release Prevention can be found in the Instructions for Form 400-CEQA.



Form 500-A1
Title V Permit Application Supplemental

Mail To:
SCAQMD
P.O. Box 4944
Diamond Bar, CA 91765-0944
Tel: (909) 396-3385
www.aqmd.gov

Section I - Operator Information

1. **Facility Name** (Business Name of Operator That Appears On Permit): Prime Wheel Corporation
2. **Valid AQMD Facility ID** (Available On Permit Or Invoice Issued By AQMD): 105903

3. **Facility Is Located In Title V Area:**

- 1 All other zip codes not listed below
- 2

92201	92202	92203	92210	92211	92234	92235	92236	92239*	92240	92241	92247	92248
92253	92254	92255	92258	92260	92261	92262	92263	92264	92270	92274	92275	92276
92282	92292	92561										
- 3 92239*

* If your zip code is 92239, please call (909) 396-3385 to verify your Title V area.

Section II - Title V Application

1. This is an application for a(n) (Check all applicable boxes and provide the requested information as appropriate):

- a. Initial Title V Permit
- b. Permit Renewal: (Provide current permit expiration date) 7/13/2013
- c. Administrative Change (check all that apply)
 - Change of Operator. (Complete and attach equipment-specific Form 400-E-XX series forms)
 - Change of Facility Information
 - Other, Please specify: _____
- d. Title V Permit Revision
- e. Title V Exemption Plan
- f. MACT Part 1
- g. Permit Shield

Complete and attach equipment specific Form 400-E-XX series form(s) to this form if your application involves permit action for new construction, change of location, non-administrative permit revision, alternative operating scenario (AOS), permit shield, streamlined permit conditions, or temporary source permit.

2. Is this facility required to prepare a Risk Management Plan (RMP) for another agency? Yes No

Section III - Title V Submittal Checklist

1. Enter the quantity of each type form submitted in the space provided:

<input checked="" type="checkbox"/> 400-A (REQUIRED)	<input checked="" type="checkbox"/> 500-C1 (REQUIRED)	_____ 500-F1	_____ 500-H (REQUIRED)
<input checked="" type="checkbox"/> 400-CEQA (REQUIRED)	_____ 500-C2	_____ 500-F2	_____ 500-MACT PART 1
<input checked="" type="checkbox"/> 500-A2 (REQUIRED)	_____ 500-D	_____ 500-F3	_____ OTHER (SPECIFY): _____
_____ 500-B (REQUIRED)	_____ 500-E	_____ 500-F4	

2. Additional information referenced in this application submitted:



South Coast Air Quality Management District
Form 500-A2
Title V Application Certification

Mail To:
 SCAQMD
 P.O. Box 4944
 Diamond Bar, CA 91765-0944
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Section I - Operator Information

1. **Facility Name** (Business Name of Operator That Appears On Permit):
 Prime Wheel Corporation

2. **Valid AQMD Facility ID** (Available On Permit Or Invoice Issued By AQMD):
 105903

3. This Certification is submitted with a (Check one):

a. Title V Application (Initial, Revision or Renewal)

b. Supplement/Correction to a Title V Application

c. MACT Part 1

4. Is Form 500-C2 included with this Certification? Yes No

Section II - Responsible Official Certification Statement

Read each statement carefully and check each that applies - You must check 3a or 3b.

1. For Initial, Permit Renewal, and Administrative Application Certifications:

- a. The facility, including equipment that are exempt from written permit per Rule 219, is currently operating and will continue to operate in compliance with all applicable requirement(s) identified in Section II and Section III of Form 500-C1,
- i. except for those requirements that do not specifically pertain to such devices or equipment and that have been identified as "Remove" on Section III of Form 500-C1.
- ii. except for those devices or equipment that have been identified on the completed and attached Form 500-C2 that will not be operating in compliance with the specified applicable requirement(s).
- b. The facility, including equipment that are exempt from written permit per Rule 219, will meet in a timely manner, all applicable requirements with future effective dates.

2. For Permit Revision Application Certifications:

- a. The equipment or devices to which this permit revision applies, will in a timely manner comply with all applicable requirements identified in Section II and Section III of Form 500-C1.

3. For MACT Hammer Certifications:

- a. The facility is subject to Section 112(j) of the Clean Air Act (Subpart B of 40 CFR part 63), also known as the MACT "hammer." The following information is submitted with a Title V application to comply with the Part 1 requirements of Section 112(j).
- b. The facility is not subject to Section 112(j) of the Clean Air Act (Subpart B of 40 CFR part 63).

Section III - Authorization/Signature

I certify under penalty of law that I am the responsible official for this facility as defined in AQMD Regulation XXX and that based on information and belief formed after reasonable inquiry, the statement and information in this document and in all attached application forms and other materials are true, accurate, and complete.

1. Signature of Responsible Official: 	2. Title of Responsible Official: President
3. Print Name: Mitch Tung	4. Date: 05/07/2012
5. Phone #: (310) 516-9126	6. Fax #: (310) 326-6509
7. Address of Responsible Official: 17703 S. Main Street Street # City State Zip Gardena CA 90248	

Acid Rain Facilities Only: Please Complete Section IV