

## Annual Compliance Certification

*This is a sample annual compliance certification that can be used to comply with 40 CFR 63.1516(c). See <https://www.epa.gov/stationary-sources-air-pollution/secondary-aluminum-production-national-emission-standards-hazardous> for more information. You should complete separate forms for each plant at which secondary aluminum production occurs.*

Applicable Rule: 40 CFR Part 63 Subpart RRR - National Emission Standards for Hazardous Air Pollutants for Secondary Aluminum Production. Annual compliance certification is being made in accordance with §63.1516(c).

### I. GENERAL INFORMATION

**Print or type** the following information for each plant that produces secondary aluminum:

Owner/Operator \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Website (optional) \_\_\_\_\_

Plant Name \_\_\_\_\_

Plant Contact/Title \_\_\_\_\_

Plant Contact Phone Number (optional) \_\_\_\_\_

Plant Street Address \_\_\_\_\_

Plant Mailing Address \_\_\_\_\_

Plant Fax Number (optional) \_\_\_\_\_

Plant Email Address (optional) \_\_\_\_\_

Plant 4-digit Standard Industrial Classification (SIC) Code(s) (optional; for help see

[http://www.osha.gov/](http://www.osha.gov/oshstats/sicser.html)

[oshstats/sicser.html](http://www.osha.gov/oshstats/sicser.html)) \_\_\_\_\_

Plant UTM coordinates (optional; for help see <http://teraserver.homeadvisor.msn.com/>) \_\_\_\_\_

Plant Permit Number (optional) \_\_\_\_\_

**II. CERTIFICATION** *(Note: You may edit the text in this section as deemed appropriate.)*

I certify that any period of excess emissions, as defined in §63.1516(b)(1), that occurred during the year were reported as required by 40 CFR Part 63 Subpart RRR and that all monitoring, reporting, and recordkeeping requirements were met during the year.

I **certify** that the \_\_\_\_\_ *(specify affected sources and emission units)* is/are in compliance with each applicable requirement in §63.1500 through §63.1520, the Secondary Aluminum Production NESHAP. For operations that are not in compliance, provide a written description of your non-compliant operations, including any corrective actions being taken.

Name of Responsible Official: \_\_\_\_\_

Title of Responsible Official: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date