



**Gila River Indian Community  
Department of Environmental Quality  
Air Quality Program**

Return completed form to:  
GRIC DEQ  
168 Skill Center Rd., Sacaton, AZ 85147  
Phone (520) 562-2234  
[air@gric.nsn.us](mailto:air@gric.nsn.us)

**COMPLIANCE CERTIFICATION – COLD CLEANING OPERATIONS**

(As required by GRIC Code – Title 17, Chapter 9, Part VI, Section 3.0)

Use this form to document compliance with the solvent cleaner equipment requirements contained in Part VI, Section 3.0 of the GRIC Air Quality Management Plan. In lieu of using this form, the operator/owner may submit their own form or letter of certification that documents compliance with the requirements. Certifications may be emailed to [air@gric.nsn.us](mailto:air@gric.nsn.us)

Permit Number:	Business Name:
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Solvent Used:	
Solvent Vapor Pressure (at 100F):	<input type="checkbox"/> psi <input type="checkbox"/> mmHg
Cleaner is equipped with a cover that prevents solvent from evaporating when not processing work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cover Type:	<input type="checkbox"/> Sliding <input type="checkbox"/> Rolling <input type="checkbox"/> Bi-parting <input type="checkbox"/> Hinged <input type="checkbox"/> Other _____
Equipment cover and baskets constructed of nonporous or nonabsorbent material (e.g., steel)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Equipment cover forms tight seal with the sides and has no gaps or holes?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cleaner has facility for draining cleaned parts such that drained solvent is returned to container?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If solvent vapor pressure is >32mmHg or 0.6psi at 100F, cleaner is equipped with an internal drainage basket so parts are enclosed under cover while draining?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If solvent vapor pressure is >32mmHg or 0.6psi at 100F or is heated above 120F, one of the following control measures is implemented:	
<input type="checkbox"/> Freeboard height that gives a freeboard ratio greater than or equal to 0.7; <input type="checkbox"/> Water cover at least 2.54 cm (1 in.) in depth; or <input type="checkbox"/> Another system of equivalent control, such as refrigerated chiller or a carbon adsorber Describe: _____ <input type="checkbox"/> N/A	
Does the height of the solvent exceed the manufacturer's fill-line for the machine?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Certification by the Owner/Operator:</b>	
I certify that I am familiar with the operations and equipment represented on this Compliance Certification and the information provided herein is true, accurate, and complete to the best of my knowledge.	
Signature: _____	Date Signed: _____
Type or Print Name: _____	Title: _____ Company: _____