

**RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
DIVISION OF AIR RESOURCES**

**APPLICATION FOR APPROVAL OF PLANS
TO INSTALL DRY CLEANING MACHINERY**

PART I.

Business Name: _____ Phone: _____

Street: _____ City: _____ Zip: _____

PART II.

Approval is requested for the installation of the following perchloroethylene dry cleaning machine:

Make: _____ Model: _____

Capacity of Machine: _____ (lbs. of garments)

Refrigeration Capacity of Machine: _____ Coolant Used: _____

Estimated Installation Date: _____

PART III.

Is the proposed dry cleaning machine equipped with a totally enclosed refrigerated condenser system?: Yes___ No___

Does the proposed dry cleaning machine require venting to the atmosphere?: Yes___ No___

Is the proposed dry cleaning machine equipped with a temperature gauge after the condensing coil to measure the temperature of the air-vapor stream?: Yes___ No___

Will the air-vapor stream achieve a temperature of less than or equal to 40°F (4.4°C) when the door of the unit is opened?: Yes___ No___

Will the proposed dry cleaning machine replace any existing equipment?: Yes___ No___

(OVER)

Below, list any equipment which will be replaced. This information should include type of equipment being replaced (e.g. washer/extractor, reclaimer, dry to dry machine), manufacturer, model no. and capacity (lbs. of garments) for each.

PART IV.

I certify that all the statements made on this application are true and complete to the best of my knowledge.

Signature of Owner: _____

Type or Printed Name of Owner: _____

Date: _____

Signature of Preparer of Application: _____

Typed or Printed Name of Preparer: _____

Title of Preparer: _____ Employer: _____

Date: _____

Return to: ^{office} ~~Division~~ of Air Resources
Department of Environmental Management
235 ~~291~~ Promenade Street
Providence, RI 02908-5767

FOR OFFICE USE ONLY
Approved: yes: <input type="checkbox"/> no: <input type="checkbox"/>
Approved by: _____
Date: _____