



BUSINESS
ENVIRONMENTAL
PROGRAM
NEVADA

2021 Dry Cleaner Compliance Calendar



Free and Confidential Assistance
(800) 882-3233
www.unrbep.org

Pollution Prevention Guidelines

- Close machine doors immediately after transferring articles to or from the machines.
- Keep machine doors closed between transfers.
- Follow the manufacturer's instructions for operating and maintaining machines and equipment.
- Drain cartridge filters in a closed container for at least 24 hours before disposing.
- Store all perc and wastes in sealed containers that do not leak.
- Inspect all dry cleaning equipment daily for any leaks that are obvious by sight, smell or touch. Leaks include instances where drops of perc are visible on the outside of a machine or where air can be felt coming from a machine. (Large area sources and major sources must be inspected weekly). Dry cleaning equipment includes hoses, pipes, fittings, couplings, valves, gaskets, seals, pumps, solvent tanks, and containers, water separators, muck cookers, stills, diverter valves and cartridge filters housing.
- Repair any leaks within 24 hours or, if parts must be ordered to complete the repair they must be ordered within 2 working days of detecting the leak. Repairs must be completed within 5 days of receiving the parts.
- Keep copies of design specifications and operating manuals for each dry cleaning machine.
- Manage all solvent wastes that are hazardous waste, including filters, still bottoms, wastewater, wastewater treatment unit filters, lint, and button trap clean out. These must be sent off-site for proper hazardous waste disposal. Or in the case of wastewaters, may be managed in a wastewater evaporator treatment unit.
- Keep all containers with perc wastes (including the wastewater bucket) closed at all times. The containers must be labeled with the words "Hazardous Waste" and the date you first put waste in the container.

Recordkeeping Instructions

January 2021

Perc Purchases Running Total
(in gallons)

Total from Last Month December 2020		55
Subtract Perc Purchased January 2020		- 10
Subtotal		45
Purchase Date	Purchase Amount	12 Month Running Total
	+	
	+	

Enter 12 month running total from last month (December 2020).

Enter the amount of perc you bought during this month last year (2020), from last year's records or calendar. **Subtract that amount**

This is your 12 month running total if you do not buy any perc this month. Subtract last year's perc purchases for this month. Example: January 2020, the perc purchased was 10 gallons, so 55-10=45.

This is your new 12 month running total if you bought perc this month. Record the bottom number in this column on next month's on the "Total from Last Month" Line. (February 2021).

Record the date you bought perc *this month*, if any.

If you bought perc this month (January 2021), record the amount and add it to the subtotal. This amount will also go on next year's calendar for this same month on the "Subtract Perc Purchased" line. If you bought none write in "0".

General

You may use this calendar to keep records required for air quality compliance. Keep these records at your facility for 5 years.

This calendar can be used to log the following required information:

- Perc purchases (gallons per month)
- Weekly refrigerated condenser outlet temperatures
- Weekly or biweekly leak inspections
- Leak repair activities
- Hazardous Waste generated.

The manufacturer's operation and maintenance manuals for all dry-cleaning equipment at your facility must also be kept on site.

Condenser Temperature Log

Check the outlet temperature of the refrigerated condenser every week. Record the temperature and date in the space provided. In the block marked "Temp less than or equal to 45°F?" Circle "Y" or "N" for "yes" or "no". If you checked "N", the machine must be repaired.

Washoe County Health District Air Permit Requirements:

- Permits are renewed annually. Submit the annual throughput at least six weeks before the expiration of your existing permit.
- For machines with refrigerated condensers: 1) The temperature on the outlet side of the condenser must be less than 45°F; 2) The temperature of the airstream measuring the difference between the entrance and exit of the condenser must be greater than or equal to 20°F.
- For machines with carbon absorbers: 1) A regular weekly desorption schedule must be implemented; 2) The concentration of perc in the exhaust of the carbon absorber must be measured once per week; and 3) The perc concentration must be less than 100 parts per million.
- Any records of operation which effect the potential of the source to emit air pollutants must be maintained for a period of at least 5 years and made available to the Control Officer upon request.
- **Inspections:** In Washoe County, dry cleaners must conduct leak detection inspections daily. On a weekly basis, the inspection results should be documented. Record the results of the inspections on the calendar. If leaks are found, they must be repaired within 24 hours. Indicate in the "Date Repaired" block when repairs are completed.

January 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Total from Last Month December 2020			
Subtract Perc Purchased January 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Weekly Refrigerated Condenser Temperature Log*

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

Monthly Hazardous Waste Generation Log

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY? (circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INPSECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE				REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED	
	N	Y	N	Y	N	Y					N
HOSES	N	Y	N	Y	N	Y	N	Y			
PIPE CONNECTIONS	N	Y	N	Y	N	Y	N	Y			
FITTINGS	N	Y	N	Y	N	Y	N	Y			
COUPLINGS	N	Y	N	Y	N	Y	N	Y			
VALVES	N	Y	N	Y	N	Y	N	Y			
DOOR GASKET	N	Y	N	Y	N	Y	N	Y			
DOOR SEATING	N	Y	N	Y	N	Y	N	Y			
PUMP	N	Y	N	Y	N	Y	N	Y			
SOLVENT TANK	N	Y	N	Y	N	Y	N	Y			
SOLVENT CONTAINER	N	Y	N	Y	N	Y	N	Y			
WATER SEPARATOR	N	Y	N	Y	N	Y	N	Y			
MUCK COOKER	N	Y	N	Y	N	Y	N	Y			
STILL	N	Y	N	Y	N	Y	N	Y			
EXHAUST DAMPER	N	Y	N	Y	N	Y	N	Y			
DIVERTER VALVE	N	Y	N	Y	N	Y	N	Y			
FILTER GASKET	N	Y	N	Y	N	Y	N	Y			
FILTER SEATING	N	Y	N	Y	N	Y	N	Y			
CARTRIDGE FILTER	N	Y	N	Y	N	Y	N	Y			
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	N	Y	LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division permit condition

January 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					<i>1 Happy New Year</i> <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	2
3	4	5	6	7	8 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	9
10	11	12	13	14	15 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	16
17	<i>18 Martin Luther King Jr. Day</i>	19	20	21	22 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	23
24	25	26	27	28	29 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	30
31						

February 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month January 2021			
Subtract Perc Purchased February 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY? (circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y	N	Y	N				
HOSES	N	Y	N	Y	N	Y	N	Y	
PIPE CONNECTIONS	N	Y	N	Y	N	Y	N	Y	
FITTINGS	N	Y	N	Y	N	Y	N	Y	
COUPLINGS	N	Y	N	Y	N	Y	N	Y	
VALVES	N	Y	N	Y	N	Y	N	Y	
DOOR GASKET	N	Y	N	Y	N	Y	N	Y	
DOOR SEATING	N	Y	N	Y	N	Y	N	Y	
PUMP	N	Y	N	Y	N	Y	N	Y	
SOLVENT TANK	N	Y	N	Y	N	Y	N	Y	
SOLVENT CONTAINER	N	Y	N	Y	N	Y	N	Y	
WATER SEPARATOR	N	Y	N	Y	N	Y	N	Y	
MUCK COOKER	N	Y	N	Y	N	Y	N	Y	
STILL	N	Y	N	Y	N	Y	N	Y	
EXHAUST DAMPER	N	Y	N	Y	N	Y	N	Y	
DIVERTER VALVE	N	Y	N	Y	N	Y	N	Y	
FILTER GASKET	N	Y	N	Y	N	Y	N	Y	
FILTER SEATING	N	Y	N	Y	N	Y	N	Y	
CARTRIDGE FILTER	N	Y	N	Y	N	Y	N	Y	
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	N	Y	
							LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

February 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2 <i>Groundhog Day</i>	3	4	5 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	6
7	8	9	10	11	12 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	13
14 <i>Valentine's Day</i>	15 <i>President's Day</i>	16	17	18	19 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	20
21	22	23	24	25	26 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	27
28						

March 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month February 2021			
Subtract Perc Purchased March 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY?(circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y	N	Y	N				
HOSES	N	Y	N	Y	N	Y	N	Y	
PIPE CONNECTIONS	N	Y	N	Y	N	Y	N	Y	
FITTINGS	N	Y	N	Y	N	Y	N	Y	
COUPLINGS	N	Y	N	Y	N	Y	N	Y	
VALVES	N	Y	N	Y	N	Y	N	Y	
DOOR GASKET	N	Y	N	Y	N	Y	N	Y	
DOOR SEATING	N	Y	N	Y	N	Y	N	Y	
PUMP	N	Y	N	Y	N	Y	N	Y	
SOLVENT TANK	N	Y	N	Y	N	Y	N	Y	
SOLVENT CONTAINER	N	Y	N	Y	N	Y	N	Y	
WATER SEPARATOR	N	Y	N	Y	N	Y	N	Y	
MUCK COOKER	N	Y	N	Y	N	Y	N	Y	
STILL	N	Y	N	Y	N	Y	N	Y	
EXHAUST DAMPER	N	Y	N	Y	N	Y	N	Y	
DIVERTER VALVE	N	Y	N	Y	N	Y	N	Y	
FILTER GASKET	N	Y	N	Y	N	Y	N	Y	
FILTER SEATING	N	Y	N	Y	N	Y	N	Y	
CARTRIDGE FILTER	N	Y	N	Y	N	Y	N	Y	
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	N	Y	
							LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

March 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	6
7	8	9	10	11	12 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	13
14 Daylight Saving Time Begins	15	16	17 St. Patrick's Day	18	19 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	20 Spring Begins
21	22	23	24	25	26 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	27
28	29	30	31			

April 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Total from Last Month March 2021			
Subtract Perc Purchased April 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Weekly Refrigerated Condenser Temperature Log*

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

Monthly Hazardous Waste Generation Log

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY? (circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y	N	Y	N				
HOSES	N	Y	N	Y	N	Y			
PIPE CONNECTIONS	N	Y	N	Y	N	Y			
FITTINGS	N	Y	N	Y	N	Y			
COUPLINGS	N	Y	N	Y	N	Y			
VALVES	N	Y	N	Y	N	Y			
DOOR GASKET	N	Y	N	Y	N	Y			
DOOR SEATING	N	Y	N	Y	N	Y			
PUMP	N	Y	N	Y	N	Y			
SOLVENT TANK	N	Y	N	Y	N	Y			
SOLVENT CONTAINER	N	Y	N	Y	N	Y			
WATER SEPARATOR	N	Y	N	Y	N	Y			
MUCK COOKER	N	Y	N	Y	N	Y			
STILL	N	Y	N	Y	N	Y			
EXHAUST DAMPER	N	Y	N	Y	N	Y			
DIVERTER VALVE	N	Y	N	Y	N	Y			
FILTER GASKET	N	Y	N	Y	N	Y			
FILTER SEATING	N	Y	N	Y	N	Y			
CARTRIDGE FILTER	N	Y	N	Y	N	Y			
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

April 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				<i>1 April Fool's Day</i>	2 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	3
<i>4 Easter Sunday</i>	5	6	7	8	9 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	10
11	12	13	14	<i>15 Tax Day</i>	16 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	17
18	19	20	21	<i>22 Earth day</i>	23 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	24
25	26	27	28	29	30	

May 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month April 2021			
Subtract Perc Purchased May 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY?(circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED			
	N	Y	N	Y	N					Y		
HOSES	N	Y	N	Y	N	Y	N	Y				
PIPE CONNECTIONS	N	Y	N	Y	N	Y	N	Y				
FITTINGS	N	Y	N	Y	N	Y	N	Y				
COUPLINGS	N	Y	N	Y	N	Y	N	Y				
VALVES	N	Y	N	Y	N	Y	N	Y				
DOOR GASKET	N	Y	N	Y	N	Y	N	Y				
DOOR SEATING	N	Y	N	Y	N	Y	N	Y				
PUMP	N	Y	N	Y	N	Y	N	Y				
SOLVENT TANK	N	Y	N	Y	N	Y	N	Y				
SOLVENT CONTAINER	N	Y	N	Y	N	Y	N	Y				
WATER SEPARATOR	N	Y	N	Y	N	Y	N	Y				
MUCK COOKER	N	Y	N	Y	N	Y	N	Y				
STILL	N	Y	N	Y	N	Y	N	Y				
EXHAUST DAMPER	N	Y	N	Y	N	Y	N	Y				
DIVERTER VALVE	N	Y	N	Y	N	Y	N	Y				
FILTER GASKET	N	Y	N	Y	N	Y	N	Y				
FILTER SEATING	N	Y	N	Y	N	Y	N	Y				
CARTRIDGE FILTER	N	Y	N	Y	N	Y	N	Y				
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	N	Y		LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

May 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	8
9 <i>Mother's Day</i>	10	11	12	13	14 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	15
16	17	18	19	20	21 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	22
23	24	25	26	27	28 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	29
30	31 <i>Memorial Day Observed</i>					

June 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month May 2021		
Subtotal		
Purchase Date	Purchase Amount	12 Month Running Total
	+	
	+	

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY?(circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y	N	Y	N				
HOSES	N	Y	N	Y	N	Y			
PIPE CONNECTIONS	N	Y	N	Y	N	Y			
FITTINGS	N	Y	N	Y	N	Y			
COUPLINGS	N	Y	N	Y	N	Y			
VALVES	N	Y	N	Y	N	Y			
DOOR GASKET	N	Y	N	Y	N	Y			
DOOR SEATING	N	Y	N	Y	N	Y			
PUMP	N	Y	N	Y	N	Y			
SOLVENT TANK	N	Y	N	Y	N	Y			
SOLVENT CONTAINER	N	Y	N	Y	N	Y			
WATER SEPARATOR	N	Y	N	Y	N	Y			
MUCK COOKER	N	Y	N	Y	N	Y			
STILL	N	Y	N	Y	N	Y			
EXHAUST DAMPER	N	Y	N	Y	N	Y			
DIVERTER VALVE	N	Y	N	Y	N	Y			
FILTER GASKET	N	Y	N	Y	N	Y			
FILTER SEATING	N	Y	N	Y	N	Y			
CARTRIDGE FILTER	N	Y	N	Y	N	Y			
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

June 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	5
6	7	8	9	10	11 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	12
13	14 <i>Flag Day</i>	15	16	17	18 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	19
20 <i>Father's Day</i> <i>Summer Begins</i>	21	22	23	24	25 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	26
27	28	29	30			

July 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month June 2021			
Subtract Perc Purchased July 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY? (circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

IDAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y	N	Y	N				
HOSES	N	Y	N	Y	N	Y			
PIPE CONNECTIONS	N	Y	N	Y	N	Y			
FITTINGS	N	Y	N	Y	N	Y			
COUPLINGS	N	Y	N	Y	N	Y			
VALVES	N	Y	N	Y	N	Y			
DOOR GASKET	N	Y	N	Y	N	Y			
DOOR SEATING	N	Y	N	Y	N	Y			
PUMP	N	Y	N	Y	N	Y			
SOLVENT TANK	N	Y	N	Y	N	Y			
SOLVENT CONTAINER	N	Y	N	Y	N	Y			
WATER SEPARATOR	N	Y	N	Y	N	Y			
MUCK COOKER	N	Y	N	Y	N	Y			
STILL	N	Y	N	Y	N	Y			
EXHAUST DAMPER	N	Y	N	Y	N	Y			
DIVERTER VALVE	N	Y	N	Y	N	Y			
FILTER GASKET	N	Y	N	Y	N	Y			
FILTER SEATING	N	Y	N	Y	N	Y			
CARTRIDGE FILTER	N	Y	N	Y	N	Y			
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

July 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	3
4 <i>Independence Day</i>	5	6	7	8	9 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	10
11	12	13	14	15	16 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	17
18	19	20	21	22	23 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	24
25	26	27	28	29	30 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	31

August 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Total from Last Month July 2021		
Subtotal		
Purchase Date	Purchase Amount	12 Month Running Total
	+	
	+	

Weekly Refrigerated Condenser Temperature Log*

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

Monthly Hazardous Waste Generation Log

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY? (circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y							
HOSES	N	Y	N	Y	N	Y	N	Y	
PIPE CONNECTIONS	N	Y	N	Y	N	Y	N	Y	
FITTINGS	N	Y	N	Y	N	Y	N	Y	
COUPLINGS	N	Y	N	Y	N	Y	N	Y	
VALVES	N	Y	N	Y	N	Y	N	Y	
DOOR GASKET	N	Y	N	Y	N	Y	N	Y	
DOOR SEATING	N	Y	N	Y	N	Y	N	Y	
PUMP	N	Y	N	Y	N	Y	N	Y	
SOLVENT TANK	N	Y	N	Y	N	Y	N	Y	
SOLVENT CONTAINER	N	Y	N	Y	N	Y	N	Y	
WATER SEPARATOR	N	Y	N	Y	N	Y	N	Y	
MUCK COOKER	N	Y	N	Y	N	Y	N	Y	
STILL	N	Y	N	Y	N	Y	N	Y	
EXHAUST DAMPER	N	Y	N	Y	N	Y	N	Y	
DIVERTER VALVE	N	Y	N	Y	N	Y	N	Y	
FILTER GASKET	N	Y	N	Y	N	Y	N	Y	
FILTER SEATING	N	Y	N	Y	N	Y	N	Y	
CARTRIDGE FILTER	N	Y	N	Y	N	Y	N	Y	
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	N	Y	
							LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

August 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	7
8	9	10	11	12	13 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	14
15	16	17	18	19	20 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	21
22	23	24	25	26	27 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	28
29	30	31				

September 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month August 2021			
Subtract Perc Purchased September 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY? (circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED			
	N	Y	N	Y	N					Y		
HOSES	N	Y	N	Y	N	Y	N	Y				
PIPE CONNECTIONS	N	Y	N	Y	N	Y	N	Y				
FITTINGS	N	Y	N	Y	N	Y	N	Y				
COUPLINGS	N	Y	N	Y	N	Y	N	Y				
VALVES	N	Y	N	Y	N	Y	N	Y				
DOOR GASKET	N	Y	N	Y	N	Y	N	Y				
DOOR SEATING	N	Y	N	Y	N	Y	N	Y				
PUMP	N	Y	N	Y	N	Y	N	Y				
SOLVENT TANK	N	Y	N	Y	N	Y	N	Y				
SOLVENT CONTAINER	N	Y	N	Y	N	Y	N	Y				
WATER SEPARATOR	N	Y	N	Y	N	Y	N	Y				
MUCK COOKER	N	Y	N	Y	N	Y	N	Y				
STILL	N	Y	N	Y	N	Y	N	Y				
EXHAUST DAMPER	N	Y	N	Y	N	Y	N	Y				
DIVERTER VALVE	N	Y	N	Y	N	Y	N	Y				
FILTER GASKET	N	Y	N	Y	N	Y	N	Y				
FILTER SEATING	N	Y	N	Y	N	Y	N	Y				
CARTRIDGE FILTER	N	Y	N	Y	N	Y	N	Y				
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	N	Y		LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

September 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	4
5	6 <i>Labor Day</i>	7	8	9	10 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	11
12	13	14	15	16	17 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	18
19	20	21	22 <i>Autumn Begins</i>	23	24 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	25
26	27	28	29	30		

October 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month September 2021			
Subtract Perc Purchased October 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY? (circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y	N	Y	N				
HOSES	N	Y	N	Y	N	Y			
PIPE CONNECTIONS	N	Y	N	Y	N	Y			
FITTINGS	N	Y	N	Y	N	Y			
COUPLINGS	N	Y	N	Y	N	Y			
VALVES	N	Y	N	Y	N	Y			
DOOR GASKET	N	Y	N	Y	N	Y			
DOOR SEATING	N	Y	N	Y	N	Y			
PUMP	N	Y	N	Y	N	Y			
SOLVENT TANK	N	Y	N	Y	N	Y			
SOLVENT CONTAINER	N	Y	N	Y	N	Y			
WATER SEPARATOR	N	Y	N	Y	N	Y			
MUCK COOKER	N	Y	N	Y	N	Y			
STILL	N	Y	N	Y	N	Y			
EXHAUST DAMPER	N	Y	N	Y	N	Y			
DIVERTER VALVE	N	Y	N	Y	N	Y			
FILTER GASKET	N	Y	N	Y	N	Y			
FILTER SEATING	N	Y	N	Y	N	Y			
CARTRIDGE FILTER	N	Y	N	Y	N	Y			
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

October 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	2
3	4	5	6	7	8 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	9
10	11 <i>Columbus Day Observed</i>	12	13	14	15 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	16
17	18	19	20	21	22 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	23
24	25	26	27	28	29 <i>Nevada Day</i> <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	30
31 <i>Halloween</i>						

November 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month October 2021			
Subtract Perc Purchased November 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY?(circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y	N	Y	N				
HOSES	N	Y	N	Y	N	Y			
PIPE CONNECTIONS	N	Y	N	Y	N	Y			
FITTINGS	N	Y	N	Y	N	Y			
COUPLINGS	N	Y	N	Y	N	Y			
VALVES	N	Y	N	Y	N	Y			
DOOR GASKET	N	Y	N	Y	N	Y			
DOOR SEATING	N	Y	N	Y	N	Y			
PUMP	N	Y	N	Y	N	Y			
SOLVENT TANK	N	Y	N	Y	N	Y			
SOLVENT CONTAINER	N	Y	N	Y	N	Y			
WATER SEPARATOR	N	Y	N	Y	N	Y			
MUCK COOKER	N	Y	N	Y	N	Y			
STILL	N	Y	N	Y	N	Y			
EXHAUST DAMPER	N	Y	N	Y	N	Y			
DIVERTER VALVE	N	Y	N	Y	N	Y			
FILTER GASKET	N	Y	N	Y	N	Y			
FILTER SEATING	N	Y	N	Y	N	Y			
CARTRIDGE FILTER	N	Y	N	Y	N	Y			
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

November 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	6
7 Daylight Saving Time Ends	8	9	10	11 Veterans Day Observed	12 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	13
14	15	16	17	18	19 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	20
21	22	23	24	25 Thanksgiving Day	26 Black Friday <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	27
28	29	30				

December 2021

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month November 2021			
Subtract Perc Purchased December 2020			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY?(circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INSPECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?		DATE			REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED
	N	Y	N	Y	N				
HOSES	N	Y	N	Y	N	Y			
PIPE CONNECTIONS	N	Y	N	Y	N	Y			
FITTINGS	N	Y	N	Y	N	Y			
COUPLINGS	N	Y	N	Y	N	Y			
VALVES	N	Y	N	Y	N	Y			
DOOR GASKET	N	Y	N	Y	N	Y			
DOOR SEATING	N	Y	N	Y	N	Y			
PUMP	N	Y	N	Y	N	Y			
SOLVENT TANK	N	Y	N	Y	N	Y			
SOLVENT CONTAINER	N	Y	N	Y	N	Y			
WATER SEPARATOR	N	Y	N	Y	N	Y			
MUCK COOKER	N	Y	N	Y	N	Y			
STILL	N	Y	N	Y	N	Y			
EXHAUST DAMPER	N	Y	N	Y	N	Y			
DIVERTER VALVE	N	Y	N	Y	N	Y			
FILTER GASKET	N	Y	N	Y	N	Y			
FILTER SEATING	N	Y	N	Y	N	Y			
CARTRIDGE FILTER	N	Y	N	Y	N	Y			
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

December 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	4
5	6	7 <i>Pearl Harbor day</i>	8	9	10 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	11
12	13	14	15	16	17 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	18
19	20	21 <i>Winter Begins</i>	22	23	24 <i>Christmas Eve</i> <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	25 <i>Christmas Day</i>
26	27	28	29	30	31 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	

January 2022

Dry Cleaner Name _____
 Dry Cleaner Address _____

Perc Purchases Running

Weekly Refrigerated Condenser Temperature Log*

Monthly Hazardous Waste Generation Log

Total from Last Month December 2021			
Subtract Perc Purchased January 2021			-
Subtotal			
Purchase Date	Purchase Amount	12 Month Running Total	
	+		
	+		

Date	Outlet Temp during cool down	Temp less than or equal to 45F?	If No, problems	Date repaired
		Y N		
		Y N		
		Y N		
		Y N		
		Y N		

	No.	lbs.
Machine filters changed out		
Still bottoms generated		lbs.
Lint, wastewater filters		lbs.
Wastewater evaporated		gal
Date evaporator/mister carbon filters changed		
Containment pan seal checked?	Y N	

Only count wastewater collected towards haz. waste generator status if it is accumulated or stored prior to treatment in a wastewater evaporator unit or shipped off-site. Make sure the container is closed, labeled and dated.

Signature of person conducting inspections: _____

DAILY INSPECTIONS CONDUCTED BY? (circle one) SIGHT SMELL FEEL MONITORING INSTRUMENT

DAILY INPSECTIONS* REQUIRE WEEKLY DOCUMENTATION	LEAKING?						REASON FOR LEAK	DATE PARTS ORDERED	DATE PARTS RECEIVED	DATE REPAIRED	
HOSES	N	Y	N	Y	N	Y	N	Y			
PIPE CONNECTIONS	N	Y	N	Y	N	Y	N	Y			
FITTINGS	N	Y	N	Y	N	Y	N	Y			
COUPLINGS	N	Y	N	Y	N	Y	N	Y			
VALVES	N	Y	N	Y	N	Y	N	Y			
DOOR GASKET	N	Y	N	Y	N	Y	N	Y			
DOOR SEATING	N	Y	N	Y	N	Y	N	Y			
PUMP	N	Y	N	Y	N	Y	N	Y			
SOLVENT TANK	N	Y	N	Y	N	Y	N	Y			
SOLVENT CONTAINER	N	Y	N	Y	N	Y	N	Y			
WATER SEPARATOR	N	Y	N	Y	N	Y	N	Y			
MUCK COOKER	N	Y	N	Y	N	Y	N	Y			
STILL	N	Y	N	Y	N	Y	N	Y			
EXHAUST DAMPER	N	Y	N	Y	N	Y	N	Y			
DIVERTER VALVE	N	Y	N	Y	N	Y	N	Y			
FILTER GASKET	N	Y	N	Y	N	Y	N	Y			
FILTER SEATING	N	Y	N	Y	N	Y	N	Y			
CARTRIDGE FILTER	N	Y	N	Y	N	Y	N	Y			
CLOSED WASTE CONTAINERS	N	Y	N	Y	N	Y	N	Y	LABELED? Y N	DATED? Y N	SHIPPED? Y N

*Note: Washoe County Health District Air Quality Management Division

January 2022

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						<i>1 Happy New Year</i>
2	3	4	5	6	7 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	8
9	10	11	12	13	14 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	15
16	<i>17 Martin Luther King Jr. Day</i>	18	19	20	21 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	22
23	24	25	26	27	28 <input type="checkbox"/> Temp Logged* <input type="checkbox"/> Inspection Logged*	29
30	31					



**Nevada
Business
Environmental
Program**

Assisting Nevada businesses since 1988

**(800) 882-3233
www.unrbep.org**

The Business Environmental Program (BEP) provides free environmental management assistance. The confidential third party assistance is delivered by experienced professionals that understand the challenges of operating a successful business. BEP services are designed to help businesses understand regulatory requirements, obtain permits, and develop cost-effective compliance strategies. The program provides information and advice about practical compliance approaches along with proven waste reducing technologies and techniques.



**(800) 240-7094
www.nevadasbdc.org**

The Nevada Small Business Development Center (SBDC) is a statewide resource for business assistance, providing a unique array of services, expertise and training in all areas including starting, growing, and sustaining a business. The Nevada SBDC guides and assists Nevadans looking to start and grow businesses, with objectives to increase business starts, create and retain jobs, and increase access to capital.