



# NOTICE OF VIOLATION

DATE OF VIOLATION		
Month:	Day:	Year:
12	7	16

Facility Name: <b>Anaplex Corp</b>		Facility ID#: <b>16951</b>	Sector: <b>CP</b>
Location Address: <b>15547 Garfield Ave</b>		City: <b>Paramount</b>	Zip: <b>90723</b>
Mailing Address: <b>15547 Garfield Ave</b>		City: <b>Paramount</b>	Zip: <b>90723</b>

YOU ARE HEREBY NOTIFIED THAT YOU HAVE BEEN CITED FOR ONE OR MORE VIOLATIONS OF THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (SCAQMD) RULES, STATE LAW OR FEDERAL LAW. IF PROVEN, SUCH VIOLATION(S) MAY RESULT IN THE IMPOSITION OF CIVIL OR CRIMINAL PENALTIES.

EACH DAY A VIOLATION OCCURS MAY BE HANDLED AS A SEPARATE OFFENSE REGARDLESS OF WHETHER OR NOT ADDITIONAL NOTICES OF VIOLATION ARE ISSUED.

### DESCRIPTION OF VIOLATIONS

#	Authority*	Code Section or Rule No.	SCAQMD Permit to Operate or CARB Registration No.	Condition No. (If Applicable)	Description of Violation
1	<input checked="" type="checkbox"/> SCAQMD <input type="checkbox"/> CH&SC <input type="checkbox"/> CCR <input type="checkbox"/> CFR	R203(b)	G41700	9,14	Failure to retain at Anaplex for 24 months & to make available to SCAQMD upon request spray logs or other usage records of spray booth #1 for calendar year 2015.
2	<input checked="" type="checkbox"/> SCAQMD <input type="checkbox"/> CH&SC <input type="checkbox"/> CCR <input type="checkbox"/> CFR	R203(b)	G41701	10,14	Failure to retain at Anaplex for 24 months & to make available to SCAQMD upon request spray logs or other usage records of spray booth #2 for calendar year 2015.
3	<input checked="" type="checkbox"/> SCAQMD <input type="checkbox"/> CH&SC <input type="checkbox"/> CCR <input type="checkbox"/> CFR	R203(b)	G41704	10,15	Failure to retain at Anaplex for 24 months & to make available to SCAQMD upon request spray logs or other usage records of spray booth #3 for calendar year 2015.
4	<input checked="" type="checkbox"/> SCAQMD <input type="checkbox"/> CH&SC <input type="checkbox"/> CCR <input type="checkbox"/> CFR	R203(b)	G41705	9,14	Failure to retain at Anaplex for 24 months & to make available to SCAQMD upon request spray logs or other usage records of spray booth #4 for calendar year 2015.
5	<input checked="" type="checkbox"/> SCAQMD <input type="checkbox"/> CH&SC <input type="checkbox"/> CCR <input type="checkbox"/> CFR	R109 (c)(1)	—	—	Failure to retain on the premises daily records of operations of coating materials & to make available to SCAQMD upon request, specifically all spray logs for year 2015.

Served To: <b>Amber Alvarez</b>	Phone: <b>562-634-5700</b>	Served By: <b>Areza S. Hani</b>	Date Notice Served: <b>12/9/16</b>
Title: <b>Office Manager</b>	Email: <b>anaplex@sbcglobal.net</b>	Phone No: <input checked="" type="checkbox"/> 909-396-3318 <del>310-233-</del>	Email: <b>areza.hani @ aqmd.gov</b>

\*Key to Authority Abbreviations:

SCAQMD – South Coast Air Quality Management District  
CCR – California Code of Regulations

CH&SC – California Health and Safety Code  
CFR – Code of Federal Regulations

Method of Service:

In Person       Certified Mail