

AIR QUALITY CHAPTER 6, SECTION 3
OPERATING PERMIT APPLICATION FORM
WYOMING DEPARTMENT OF ENVIRONMENTAL QUALITY
Air Quality Division

Section A: General Application Information

Complete one Section A form for the entire facility. Completion of this section is mandatory for all applicants, although certain information requirements may not apply to all sources.

1. Company Name: _____
2. Company Mailing Address: _____
City: _____ State: _____ Zip: _____
3. Facility Name: _____
4. Facility Location (mileage and direction from nearest town): _____
Section: _____ Township: _____ Range: _____ County: _____
WGS84 location (longitude/latitude): _____
Facility Mailing Address: _____
City: _____ State: _____ Zip: _____
5. Name of Owner: _____ Phone: _____
6. Responsible Official: _____
Name Title Phone
7. Plant Manager/Site Contact: _____
Name Title Phone
8. Send Operating Permit-Related Information to (Name): _____
Title: _____ Phone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
e-mail: _____
9. (a) Brief Description of Processes and Products (indicate SIC **AND** NAICS Codes below): _____

(b) SIC Code(s): _____ NAICS Code(s): _____
10. Is this facility located within 50 miles of another state or tribal lands? Yes _____ No _____
If yes, please identify the state(s) and/or tribal lands: _____

11. Attach a complete process flow diagram for the facility. Include a short narrative if this would be helpful (see instructions). Identify sources by the identification number used in question 24 of this Section, and Section B.
12. Attach an up-to-date site plot plan. (see instructions)
13. RESERVED
14. Is this facility subject to 40 CFR 68 Accidental Release Prevention Requirements? Yes ____ No ____
If so, when was the Risk Management Plan submitted? _____
15. Does your facility have any flares? Yes _____ No _____
If so, you must complete a Section B form for each flare and include them in the list for question 24.
16. Is your facility required to conduct ambient monitoring? Yes _____ No _____
Cite the basis for this requirement: _____
What pollutant(s) are monitored? _____
What meteorological parameters are monitored? _____
What is the date of your most recent Quality Assurance Plan or plan revision? _____
17. Is your facility a major source of Hazardous Air Pollutants? (**See instructions**) Yes ____ No ____
18. Is your facility subject to Acid Rain requirements? Yes _____ No _____ If yes, please attach the appropriate acid rain application forms.
19. For oil and gas facilities, attach a description of how emissions resulting from depressurization of pipelines, engines, or other equipment may occur, and your procedures to minimize and control such emissions.
20. List any facility-wide permit conditions, applicable requirements, or other limitations on facility operations that affect emissions of regulated air pollutants, which are not for a specific emission unit(s). For each, describe the method(s) used to determine compliance. Extend the table below or include attachments as needed.

Applicable Requirement/Condition	Method(s) for Determining Compliance

21. Give an explanation of any proposed exemptions from otherwise applicable requirements.

Section B: Source Information

Complete one Section B form for each point, area, and fugitive source associated with the facility named in Section A of the Operating Permit Application Form.

1. Source Identification Number: _____ Serial number (for boilers and engines): _____
Source Description: _____

2. If the source is a reciprocating internal combustion engine, please indicate which type:
4 stroke rich burn _____ 4 stroke lean burn _____
2 stroke lean burn _____ compression ignition _____

- 3.(a) Are emissions routed through air pollution control device(s) prior to release to the atmosphere? Yes ___ No ___
(b) If yes, describe the control device(s): _____
(c) If yes, does the device control emissions from more than one source? Yes _____ No _____
(d) If yes to (c), provide a description of the sources. Attach a drawing or explanation if needed. _____

4. Complete the following for each unit, as applicable. If the emission point is an emission control device that controls multiple emission units, the date information below will be needed for **each** emission unit controlled by the device (as described above in 3(d)) to determine applicable requirements. Attach further information as needed.
(a) Date initial construction commenced (month/year): _____
(b) Date last modification commenced, if applicable (month/year): _____
If modified, please describe modification: _____

(c) Date last reconstruction commenced, if applicable (month/day/year): _____
If reconstructed, please describe reconstruction: _____

(d) For engines, 40 CFR 63 Subpart ZZZZ requirements apply. Provide the following information and indicate if 40 CFR 60 Subparts IIII or JJJJ also apply:
(i) Date engine was ordered: _____
(ii) Date engine was manufactured: _____
(iii) Date engine was installed: _____
Subpart IIII applies: Yes _____ No _____ Subpart JJJJ applies: Yes _____ No _____
(e) For process heaters, WAQSR Ch 5, Sec 3, Subpart DDDDD requirements may apply. Provide the following information and indicate if Ch 5, Sec 3, Subpart DDDDD applies:
(i) Indicate whether the heater is direct or indirect fired. Direct fired: _____ Indirect fired: _____
(ii) What is being heated? _____
WAQSR Ch 5, Sec 3, Subpart DDDDD applies: Yes _____ No _____
(f) For other sources that may be subject to a 40 CFR Part 60 NSPS or Part 63 NESHAP:
Indicate any subparts that apply to this source: _____

Source ID: _____

5. Design Capacity of this source (throughput, flowrate, firing rate, or horsepower): _____

Site-Rated Capacity (if applicable): _____

Current Operating Capacity (if different from design or site-rated capacity): _____

Reason for difference between operating capacity and site-rated or design capacity: _____

6. Fill out this section if the source is subject to regulation based on materials used or produced. See instruction sheet. Indicate "N/A" if not applicable.

a. Materials used (including solid fuels, but excluding liquids or gases used solely as fuels)

Materials Used	Process Weight Average (lb/hr)	Process Weight Maximum (lb/hr)	Maximum Quantity/Year

b. Products

Products	Maximum Quantity/Unit Time

7. Fuels Analysis (if applicable)

Fuel	Amount	Heat Content	Sulfur	Ash
Coal	Ton/yr	Btu/lb	%	%
Fuel Oil	Gal/yr	Btu/gal	%	%
Natural Gas	MMSCF/yr	Btu/ft ³	%	%
			%	%

8. Describe any limitations on operations, other than control equipment described in #3, or any work practice standard which affect emissions of any regulated pollutant (see instructions): _____

9. Describe any other applicable requirement that applies to this source, or any additional information needed to determine compliance with an applicable requirement (see instructions): _____

Source ID: _____

10. List all applicable requirements and emission controls for this source. For pollutants with control equipment **attach an explanation, or description of the calculations used to determine the uncontrolled PTE.**

Pollutant	Emission Limits			Uncont PTE * (TPY)	Control Equipment Description	% Effic. **	Applicable Requirement(s) with Regulatory Citation(s)	Notes
	(lb/hr)	(TPY)	Other					

* Uncont. PTE = Uncontrolled potential to emit (see instructions) **MUST BE INCLUDED FOR POLLUTANTS WITH CONTROL EQUIPMENT.**

** % Effic. = Control Efficiency (in percent) of the control device

11. **List all proposed periodic monitoring methods for each pollutant with an applicable requirement.** This item should describe all compliance monitoring devices and activities for all pollutants with requirements that are not addressed in a Compliance Assurance Monitoring (CAM) plan for this source.

Pollutant	CAM		IF NO CAM, provide description of proposed periodic monitoring method for that pollutant. Please include description and location of any monitoring device, proposed frequency of monitoring/testing, test methods, and the data recorded and/or reported.
	Yes*	No **	
		If no →	
		If no →	
		If no →	
		If no →	
		If no →	
		If no →	
		If no →	

* IF YES, CAM applies, for that pollutant only, skip the proposed periodic monitoring method and go to item 12.

** IF NO, CAM does not apply, provide description of proposed periodic monitoring for that pollutant.

12. As applicable, submit pollutant-specific CAM plan(s) for the source. **Attach a separate, stand-alone CAM plan* that will be included as an attachment to your operating permit.** The CAM plan may apply to multiple sources if appropriate. The CAM plan **must** include an indicator, acceptable range, frequency of monitoring, and how an excursion is defined and detected.

**Please see the Division's "Guidance for Developing Compliance Assurance Monitoring Plans" for information on how to prepare a CAM plan.*

Pollutant(s) and Emission Limit(s) subject to CAM: _____

Control/capture system bypass possible? Yes _____ No _____

New/modified monitoring equipment (needs to be verified)? Yes _____ No _____

Section C: Small sources. List small sources not included on a Section B form that may have applicable requirements. **(Complete a section B form if the source has emission limits or requirements set by a Chapter 6, Section 2 permit/waiver.)** Extend the table as needed, or attach an additional sheet, and calculations if appropriate.

1. Fuel Burning Equipment (Emissions limited by Chapter 3, Section 3)

Description	Fuel(s) Fired	Size	Installation/Modification Date	Estimated NO _x Emissions	Applicable Requirements	Method of Determining Compliance

2. Liquid Storage Tanks

Description	Size	Contents and Vapor Pressure	Installation/Modification Date	Estimated Emissions (indicate pollutant)	Applicable Requirements	Method of Determining Compliance

3. Other

Description	Size	Installation/Modification Date	Estimated Emissions (indicate pollutant)	Applicable Requirements	Method of Determining Compliance

Section D: Compliance Plan

Complete one Section D form for the entire facility.

1. Compliance status with respect to all applicable requirements effective at time of permit issuance:
Will your facility be in compliance with all applicable requirements at the time of permit issuance and continue to comply with these requirements? Yes ___ No ___

(If yes, go to #2; if no, complete a-d below for each requirement for which compliance is not achieved.)

- a. Applicable requirement(s) for which compliance is not achieved:

- b. Description of how compliance with the applicable requirement(s) will be achieved:

- c. Detailed schedule leading to compliance:

Milestone	Date

- d. Frequency for submittal of progress reports (at least semiannually): _____

2. Compliance status with respect to all applicable requirements effective after permit issuance (Future-Effective Requirements):

Will your facility be in compliance with all applicable requirements expected to take effect during the term of the permit and meet such requirements on a timely basis? Yes ____ No ____

(If yes, go to Section E; if no, complete a-d below for each requirement for which compliance is not expected.)

a. Applicable requirement(s) you expect will not be complied with:

b. Description of how compliance with the applicable requirement(s) will be achieved:

c. Detailed schedule leading to compliance:

Milestone	Date

d. Frequency for submittal of progress reports (at least semiannually): _____

Section E: Compliance Certification

Complete one Section E form for the entire facility with respect to applicable requirements at the facility.

1. Schedule for the submission of compliance certifications during the term of the permit:

Frequency of submittal (annually at minimum): _____

2. Are the air contaminant sources identified in this application in compliance with applicable enhanced monitoring (Compliance Assurance Monitoring) and compliance certification requirements of the Act?

Yes ___ No ___

If no, describe which requirements are not being met: _____

3. Certification of Compliance with All Applicable Requirements:

<p style="text-align: center;">Certification of Compliance</p> <p>Note: This certification must be signed by a <u>responsible official</u> (as defined in Chapter 6, Section 3 of Wyoming Air Quality Standards and Regulations). Applications without a signed certification are incomplete.</p> <p>Except for requirements identified in Section D-1 for which compliance is not achieved, I hereby certify that, based on information and belief formed after reasonable inquiry, the air contaminant sources identified in this application are in compliance with all applicable requirements.</p> <p>Name (printed or typed): _____</p> <p>Name (signed): _____</p> <p>Date: _____</p>

Section F: Alternative Operating Scenario

Complete one Section F form for each approved Alternative Operating Scenario.

1. Source identification numbers affected by this scenario: _____

2. Description of the alternative operating scenario, including reference to any Chapter 6, Section 2 permits authorizing the scenario: _____

3. Description of processes and products by SIC Code: _____

4. Complete a Section B form (as necessary) for each point and/or area source affected by this alternative operating scenario. Attach the alternative operating scenario Section B forms to this Section F form.

Section H

Certification of Truth, Accuracy and Completeness

Note: This certification must be signed by a responsible official (as defined in Chapter 6, Section 3 of the Wyoming Air Quality Standards and Regulations). Applications without a signed certification will be deemed incomplete.

I certify under penalty of law that, based on information and belief formed after reasonable inquiry, the statements and information contained in this application are true, accurate and complete.

Name (printed or typed): _____

Title: _____

Name (signed): _____ Date: _____