



**APPLICATION FOR AUTHORITY TO CONSTRUCT
AIR POLLUTION CONTROL PROGRAM**

INSTRUCTIONS

INSTRUCTIONS

APPLICATION FOR AUTHORITY TO CONSTRUCT

APPLICATION FOR AUTHORITY TO CONSTRUCT is required with all applications.

- 1.) **Installation Name:** Enter the name of the installation covered by this application.
- 2.) **Installation Street Address:** Enter the street address of the physical location of the installation.
- 3.) **Installation Mailing Address:** Enter the mailing address of the installation if different from the Street Address.
- 4.) **Installation City, Zip Code:** Enter the City and Zip Code of the physical location of the installation.
- 5.) **County:** Enter the county in which the installation is located.
- 6.) **Section, Township, Range:** Enter the appropriate information on the Section, Township and Range in which the installation is located. This information is available through your County Assessor.
- 7.) **Final Product/Principle Activity:** Enter the general product manufactured, the material handled by your installation or the principal activity that is performed at this installation.
- 8.) **SIC Code:** Enter the Standard Industrial Classification (SIC) Code for your installation. Refer to the [Glossary](#) for a more detailed description of SIC Codes.
- 9.) **Parent Company:** Complete this block if this installation is totally or partially owned by another company.
- 10.) **Parent Company Mailing Address:** Complete this block if this installation is totally or partially owned by another company.
- 11.) **Parent Company City, State, Zip Code:** Complete these blocks if this installation is totally or partially owned by another company.
- 12.) **Contact Person, Contact Person's Title:** Enter the name and title of the person who is most familiar with the operations of the plant and who can answer any questions regarding information about the installation.
- 13.) **Contact Person's Mailing Address:** Enter the mailing address for the Contact Person.
- 14.) **Contact Person's City, State, Zip Code:** Enter the City and Zip Code pertaining to the Contact Person's Mailing Address.
- 15.) **Contact Person's Telephone Number:** Enter the Contact Person's telephone number.

- 16.) **Contact Person's Fax Number:** Enter the Contact Person's fax number (if applicable).
- 17.) **Contact Person's Email Address:** Enter the Contact Person's email address (if applicable).
- 18.) **Unified Review:** Mark the appropriate box to indicate if you wish to have a Unified Review performed on this application.
- 19.) **This Application is For:** Mark the appropriate box describing the nature of this project. If this project is an amendment to an existing permit, mark the appropriate box and enter the appropriate permit number.
- 20.) **FIPS County ID Number:** Enter the FIPS County ID Number. See the [Glossary](#) for a more detailed description of the FIPS County ID Number.
- 21.) **Plant ID Number:** Enter the Plant ID number if this is an existing installation. If this is a new installation, leave this blank.
- 22.) **Projected Date to Commence Construction:** Enter the date you desire to begin construction of the equipment or processes listed in this application.
- 23.) **Projected Date of Operation Startup:** Enter the date you desire to begin operation of the equipment or processes listed in this application.
- 24.) **Signature of Responsible Official:** Enter the signature of the Responsible Official. For a more detailed description of a Responsible Official, refer to the [Glossary](#). This blank must be completed or your application will be considered incomplete.
- 25.) **Date:** Enter the date that the Signature of the Responsible Official was obtained for item 24.
- 26.) **Type or Print Name of Responsible Official:** Type or print the name of the Responsible Official signing in item 24.
- 27.) **Responsible Official's Telephone Number:** Enter the telephone number where the Responsible Official may be contacted who signed in item 24.
- 28.) **Official Title of Responsible Official:** Enter the official title of the Responsible Official from item 24.

ON BACK

- 29.) **Project Description and Narrative:** Enter a description and/or narrative of the project included with this application. Your description should give a clear understanding of the processes and equipment involved. Also, any production increases or limitations that are desired should be included in this description. The description/narrative should follow the processes listed on Form 1.1, Process Flow Diagram.

INSTRUCTIONS

FORM 1.1, Process Flow Diagram for Facility According to Proposed Application

Form 1.1 is required with all applications.

- (a) **Installation Name:** Enter the name of the installation covered by this application.
- (b) **FIPS County No.:** For an existing installation, enter the number from the EIQ. For a new installation, refer to the [Federal Information Procedure System Code table](#).
- (c) **Plant No.:** For an existing installation, enter the number from the EIQ. For a new installation, leave blank. APCP will assign a number.

For a new installation, show the entire installation.

For an addition to an existing installation, show only the new processes, new equipment, and/or new emission points. Begin the identification numbering where the existing EIQ emissions point numbers leave off.

If the application is for a modification or an addition to an existing emission point or unit, show the upstream and downstream point(s) or equipment that this modification will affect.

INSTRUCTIONS

FORM 1.2, Summary of Emission Points Affected by this Application

Form 1.2 is required with all applications.

Complete **(a) Installation Name**, **(b) FIPS County Number** and **(c) Plant Number**. See Form 1.1 for details on these entries.

- (d) **Point No.:** Enter a number to uniquely identify this emission point at this installation. Use the same number used on the flow diagram, Form 1.1.
- (e) **Point Description:** Enter a description to uniquely identify the process or equipment associated with this emission point.
- (f) **Reference Worksheet(s):** Enter additional worksheets (if any) used in addition to Form 2.0 for that emission point. [i.e. Form 2.3, 2.7, etc.]

INSTRUCTIONS

FORM 1.3, Plant Layout Diagram

Form 1.3 is required with all applications.

Complete **(a) Installation Name, (b) FIPS County Number** and **(c) Plant Number**. See Form 1.1 for details on these entries.

For small installations, a scale diagram may be done on Form 1.3 itself. A surveyor's or engineer's diagram can be substituted for Form 1.3. The diagram must be drawn to scale [for example, 1" = 100'] and the scale **must** be included on the diagram. Your County Assessor has maps of the county that you can use for your Form 1.3 substitute. Aerial photos may be used but do not photocopy well, so you will need two originals for your plant layout.

Your property lines must be clearly identified [a highlighter is good for this]. Be sure to highlight both copies submitted with the application.

All buildings must be correctly located on the diagram with length, width and height shown for each building. If there are stacks or vents with pollutant emissions, the locations and heights above the ground must be on the diagram. If you have any haul roads, paved and/or unpaved, draw them in. The length to show on the diagram is the length inside your property. Public roads on your property, even if unpaved, must be shown. Open storage piles must be shown. If a fence or fenceline is located on your property, show the fence on the diagram.

INSTRUCTIONS

Form 2.0 Emission Point Information

This form is **REQUIRED** for all installations.

This form must be completed for each emission point shown on Form 1.1 and Form 1.2. A separate Form 2.0 must be completed for each fuel type used at each process or emission point.

Complete **(a) Installation Name, (b) FIPS County Number** and **(c) Plant Number**. See Form 1.1 Instructions for details on these entries.

POINT IDENTIFICATION

- (d) **Point Number:** This identification number must match the emission point identification number listed on Forms 1.1 and 1.2. If this is an existing installation, begin the identification numbering where the existing EIQ emissions point numbers leave off.
- (e) **Point Description:** This description should uniquely identify the process associated with this emission point. It should be the same as used on Form 1.2.
- (f) **Source Classification Code (SCC):** The Source Classification Code is an eight-digit number associated with a unique process from which air pollutants are emitted. Specific SCCs can be found using AP-42 or FIRE. If you cannot locate an SCC specific to your process, use a SCC closely related to the process.
- (g) **Make:** Enter the make of the main equipment used at this point.
- (h) **Model:** Enter the manufacturer's model number of the main equipment to be used at this point.
- (i) **Year:** Enter the year of manufacture of the main equipment to be used at this point. For reconstructed equipment subject to federal New Source Performance Standards (NSPS) this is the date that the equipment was reconstructed.

STACK/VENT PARAMETERS

Leave this section blank for emission points that do not vent their emissions through a stack.

- (j) **Stack Number:** Enter an identification number for the stack that will uniquely identify this stack at your installation. If you have more than one stack, number them sequentially.
- (k) **Height (ft):** Enter the vertical distance, in feet, between ground level and the point of exhaust into the ambient air.

- (l) **Diameter (ft):** Enter the inside diameter, in feet, of the top of a circular stack. For non-circular stack exits, use an equivalent diameter calculated from the cross-sectional area. The equivalent diameter, d , equals the product of the square root of 1.128 and the cross-sectional area, A , denoted as follows: $d = (1.128 * A)^{1/2}$.
- (m) **Temperature (F):** Enter the exhaust temperature, in degrees Fahrenheit, for this stack. If the exhaust is discharged at ambient temperatures, enter 77 degrees F.
- (n) **Velocity (ft/min):** Enter the exit velocity, in feet per second, of the gas leaving the stack. This can be calculated by dividing the actual flow rate out the stack, usually in cubic feet per minute, by the cross-sectional area of the stack.
- (o) **Flow Rate (cubic ft/min):** Enter the exhaust gas volume from the stack in actual cubic feet per minute.

OPERATING RATE/SCHEDULE

- (p) **Expected Annual Throughput:** Estimate the amount of material that will be used, processed or produced in this process associated with this emission point during a calendar year.
- (q) **Units:** Enter the units associated with the Expected Annual Throughput (p). [for example, tons, MMCF, etc.]
- (r) **Maximum Hourly Design Rate:** Enter the maximum hourly operating rate possible for the equipment associated with this emission point. For combustion equipment, use Form 2.1. If the hourly throughput will be limited by upstream or downstream constraints (bottlenecks), you are allowed to reduce the rated capacity of the equipment/process to account for these constraints. **Use Form 3.0 to provide an explanation with your application for these bottlenecks.**
- (s) **Units/Hr:** Maximum hourly design rate units should be the same units as the annual throughput units (q) on a per hour basis. [for example, tons/hour, MMCF/hour, etc.]
- (t) **Hours/Day:** Enter the normal number of hours per day that the equipment or process associated with this emission point is in operation.

Days/Week: Enter the normal number of days per week that the equipment or process associated with this emission point is in operation.

Weeks/Year: Enter the normal number of weeks per year that the equipment or process associated with this emission point is in operation.

AIR POLLUTION CONTROL EQUIPMENT

If there are more than three control devices operating at an emission point, use Form 2.0C to describe the additional devices.

- (u) **Device Number:** Assign a number to uniquely identify the air pollution control device. The device number should be the same as shown on Form 1.1 for this equipment. Control devices must be numbered sequentially through the installation, as mentioned on the instructions for Form 1.1.
- (v) **Control Device Description:** Describe the control equipment used to reduce or remove air contaminants.
- (w) **Destruction/Removal Efficiency:** Enter the destruction/removal or suppression efficiency of the control device for the appropriate pollutants.
- (x) **Collection/Suppression System Description:** Describe how the pollutants are collected/suppressed and routed through the control device(s) for this process. [for example, hoods, vacuum systems, spray bars, etc.]
- (y) **OPTIONAL CALCULATION SECTION: This section is not required to be filled out.** This section is intended only for installations that wish to determine their potential emissions. To determine potential emissions, in the appropriate columns, enter: the applicable pollutants; emission factors; emission factor units [the emission factor units should be in pounds of pollutant per unit of material listed in the Unit blank, (s)]; and overall control efficiency as it applies to that pollutant. To determine a specific pollutant's pounds per hour emission rate, multiply the maximum hourly design rate [amount entered in blank (r.)] multiplied by the emission factor for that pollutant multiplied by the overall control efficiency, if applicable, noted as $[100 - \text{control efficiency}]/100$. To determine annual Potential Emissions, multiple the hourly emission rate you just calculated by 4.38 to get tons of a pollutant emitted per year. This will be the potential emission for this pollutant from this point after controls are taken into account. In lieu of completing this section, the applicant is also encouraged to submit calculations completed electronically (i.e. spreadsheets).

INSTRUCTIONS

Form 2.1 Fuel Combustion Worksheet

This form is required for on-site combustion equipment. The Maximum Hourly Design Rate (MHDR) of each unit, no matter what capacity, must be reported. A separate Form 2.0 and 2.1 should be completed for each type of fuel used with the combustion equipment at this emission point.

Complete **(a) Installation Name, (b) FIPS County Number** and **(c) Plant Number**. See Form 1.1 for details on these entries.

COMBUSTION EQUIPMENT IDENTIFICATION

- (d) **Point Number:** Enter the identification number listed on Form 2.0 for this point.
- (e) **SCC:** Enter the identification number listed on Form 2.0 for this point.
- (f) **Equipment Description (Make/Model):** Enter a description of the combustion equipment associated with this emission point. [for example, boiler, bake oven, annealing furnace, etc.]
- (g) **Year Put In Service:** Enter the year the combustion equipment was constructed, modified or remanufactured.
- (h) **Maximum Design Rate (MMBTU/hr):** Enter the maximum hourly heat input capacity for each piece of equipment. This must be in units of millions of BTU per hour.

FUEL INFORMATION

- (i) **Fuel Type:** Check only one box for the type of combustion equipment being used. If more than one fuel will be used for this piece of equipment, a separate Form 2.0 and Form 2.1 must be filled out for each different fuel type.
- (j) **Fuel:** Enter the fuel used with the combustion equipment for this emission point. Coal users must list each grade of coal used when different grades are burned.
- (k) **Annual Throughput:** Enter the amount of fuel to be combusted during a year using the combustion equipment at this emission point.
- (l) **Units:** Enter the same units listed under (q) on Form 2.0 for this emission point fuel type. [for example, MMCF natural gas, MGal fuel oil, etc.]

NOTE TO NATURAL GAS USERS: *MCF is thousand cubic feet, MMCF is million cubic feet..*

- (m) **% Sulfur by Weight:** This entry is required **ONLY** if there is a Sulfur Flag (S) accompanying the SCC used on this point. For example, there are no flags for natural gas; do not complete this entry for that fuel. However, since there are flags for propane and coal, complete this entry for those fuels.

Enter the percentage of sulfur by weight in the fuel when the facility **receives** it. The percentage of sulfur in coal, oil and LPG/propane can be obtained from your supplier(s). The default value for the sulfur content of propane is 0.00002%. You should request the average sulfur content when you contact your supplier(s).

- (n) **% Ash by Weight:** This entry is required **ONLY** if there is an Ash Flag (A) accompanying the SCC used on this point. For example, there are no flags for natural gas; do not complete this entry for that fuel. However, since there are flags for oil and coal, complete this entry for those fuels.

Enter the percentage of ash by weight in the fuel when the facility **receives** it. You should request the average sulfur content when you contact your supplier(s).

INSTRUCTIONS

Form 2.3 Uncontrolled VOC Emissions Worksheet

Form 2.0 and Form 2.3 is required must be completed for each emission point that emits VOCs from your installation [for example, degreasing, spray painting, etc.]. Each different VOC emitting process will have a separate SCC and therefore separate Form 2.3.

Include a Material Safety Data Sheet (MSDS) for each of the VOC containing materials used at your installation. Be sure to check the MSDS for hazardous air pollutants (HAPs) using the listings found in the back of the instructions. If the material that you are using contains HAPs, you must complete **Form 2.T Hazardous Air Pollutant Worksheet** for those points where the HAPs are being emitted.

Complete **(a) Installation Name, (b) FIPS County Number** and **(c) Plant Number**. See Form 1.1 for details on these entries.

TOTAL ANNUAL THROUGHPUT

- (d) **Point Number:** Enter the identification number listed on Form 2.0 for this point.
- (e) **SCC:** Enter the identification number listed on Form 2.0 for this point.
- (f) **Application Method:** Describe the application method of the operation or process that is producing VOC emissions for this emission point [for example, spray, roller, dip, etc.].
- (g) **Material Type:** Enter the material being used. Examples include primers, paints, inks, thinners, solvents, etc.
- (h) **Annual Throughput (SCC Units/yr):** Enter the estimated total amount of the specific material type to be used at this emission point in a calendar year.
- (i) **% By Weight of VOC in Material:** Enter the percentage of VOC, by weight, in the material. This can be found on the MSDS provided by your supplier(s) for this specific material.
- (j) **Density (lbs/gal):** Enter the material density as found on the MSDS provided by your supplier(s) for this specific material. If the specific gravity is given on the MSDS, multiply the specific gravity by 8.34 to obtain the density.
- (k) **Lbs. Of VOC per Unit:** Enter the pounds of VOC per unit of material as found on the MSDS provided by your supplier(s) for this specific material. If pounds of VOC per Unit are not known, they can be found by multiplying the percent VOC by weight in the material (i) by the density of that material (j).

- (l) **TOTAL Annual Throughput (SCC Units):** Enter the total of the Annual Throughputs entered in column (h.). This number should be entered in box (p) on Form 2.0 for Expected Annual Throughput. NOTE: This figure must be expressed in the same units as the SCC emission factor units used with the specific process for this emission point.

INSTRUCTIONS

Form 2.5 Organic Liquid Storage

This form is **required** if you have either a fixed roof or a floating roof organic liquid storage tank with a capacity greater than 500 gallons. If you are installing a tank with a capacity of less than 500 gallons, you are not required to fill out this form. This form is comprised of two different sections. **Section A.** is for Fixed Roof Tanks. **Section B.** is for Floating Roof tanks. Fill out the section that applies to you.

FOR BOTH FIXED ROOF AND FLOATING ROOF TANKS

Complete **(a) Installation Name, (b) FIPS County Number** and **(c) Plant Number.** See Form 1.1 for details on these entries.

Section A. Fixed Roof Tanks

Tank Information

- (d) **Point (Tank Identification) No.:** Enter a unique identification number for each organic liquid storage tank. This identification number must be the same as the one entered on Form 2.0.
- (e) **Capacity (in thousands of gallons):** Enter the tank capacity in thousands of gallons. [for example, 10,000 gallon tank is entered as 10]
- (f) **Diameter (ft):** Enter the diameter of the storage tank in feet.
- (g) **Height (ft):** Enter the height of a vertical or circular tank in feet. If you have a horizontal tank, leave this blank and proceed to (h).
- (h) **Length (ft):** Enter the length of a horizontal tank in feet. If you have a vertical or circular tank, leave this blank and fill in (g).
- (i) **Color (Shell):** Enter the color of the tank shell.
- (j) **Color (Roof):** Enter the color of the tank roof.
- (k) **Type of Roof:** Mark the appropriate box that best describes this specific tank.
- (l) **Year Placed In Service:** Enter the year the tank was constructed, reconstructed or modified.
- (m) **Average Liquid Height (ft):** Enter the average height of the liquid in feet inside this storage tank.
- (n) **Roof Height (ft):** Enter the height of the tank, in feet, that is above the top of the tank shell.

- (o) **Vent Pressure Setting:** Enter the breather vent pressure setting in terms of pounds per square inch gauge (psig). If specific information on this is not known, enter a default of 0.03 psig.
- (p) **Vent Vacuum Setting:** Enter the breather vent vacuum setting in terms of pounds per square inch gauge (psig). If specific information on this is not known, enter a default of -0.03 psig.
- (q) **Throughput (in thousands of gallons per year):** Enter the expected annual amount of liquid to be stored in this specific tank in thousands of gallons. This number should be the same as was entered in box (p) on Form 2.0 for this emission point.

Chemical Information

- (r) **Chemical:** Enter the name of the liquid to be stored in this specific tank. If more than one liquid will be stored in the tank, a separate Form 2.5 must be filled out for each liquid. If a mixture of liquids will be stored in the tank, documentation must be provided for the multiple component mixture.
- (s) **CAS Number:** Enter the Chemical Abstract Service (CAS) registry number for the chemical stored in this specific tank.
- (t) **Vapor Molecular Weight:** Enter the molecular weight of the liquid, in pounds per pound-mole, to be stored in this specific tank. If more than one liquid will be stored in the tank, a separate Form 2.5 must be filled out for each liquid. If a mixture of liquids will be stored in the tank, documentation must be provided for the multiple component mixture.
- (u) **Average Liquid Surface Temperature (F):** Enter the daily average surface temperature of the liquid stored in the tank in degrees Fahrenheit.
- (v) **Vapor Pressure at Average Liquid Surface Temperature (psia):** Enter the vapor pressure, in pounds per square inch absolute, of the liquid being stored in this specific storage tank.

Section B. Floating Roof Tanks

Tank Information

- (d) **Point (Tank Identification) No.:** Enter a unique identification number for each organic liquid storage tank. This identification number must be the same as the one entered on Form 2.0.
- (e) **Year Placed In Service:** Enter the year the tank was constructed, reconstructed or modified.
- (f) **Capacity (in thousands of gallons):** Enter the tank capacity in thousands of gallons. [for example, 10,000 gallon tank is entered as 10]
- (g) **Diameter (ft):** Enter the diameter of the storage tank in feet.
- (h) **Length of Seam (ft):** Enter the length of the seam, in feet, of this tank.
- (i) **Number of Columns:** Enter the number of columns for this tank.
- (j) **Effective Column Diameter (ft):** Enter the effective diameter, in feet, of the columns in the tank.
- (k) **Type of Construction:** Mark the appropriate box that best describes this specific tank.
- (l) **Type of Roof:** Mark the appropriate box that best describes this specific tank.
- (m) **Primary Seal:** Mark the appropriate box that best describes this specific tank.
- (n) **Secondary Seal:** Mark the appropriate box that best describes this specific tank.
- (o) **Area of Deck (sq ft):** Enter the area of the deck in square feet.
- (p) **Deck:** Mark the appropriate box that best describes this specific tank.
- (q) **Shell Condition:** Mark the appropriate box that best describes this specific tank.
- (r) **Throughput (in thousands of gallons per year):** Enter the expected annual amount of liquid to be stored in this specific tank in thousands of gallons. This number should be the same as was entered in box (p) on Form 2.0 for this emission point.

Chemical Information

- (s) **Chemical:** Enter the name of the liquid to be stored in this specific tank. If more than one liquid will be stored in the tank, a separate Form 2.5 must be filled out for each liquid. If a mixture of liquids will be stored in the tank, documentation must be provided for the multiple component mixture.
- (t) **CAS Number:** Enter the Chemical Abstract Service (CAS) registry number for the chemical stored in this specific tank.
- (u) **Vapor Molecular Weight:** Enter the molecular weight of the liquid, in pounds per pound-mole, to be stored in this specific tank. If more than one liquid will be stored in the tank, a separate Form 2.5 must be filled out for each liquid. If a mixture of liquids will be stored in the tank, documentation must be provided for the multiple component mixture.
- (v) **Liquid Density (lb/gal):** Enter the density of the liquid, in pounds per gallon, to be stored in this specific tank. If the specific gravity is given, multiply the specific gravity by 8.34 to obtain the density.
- (w) **Vapor Pressure at Storage Temperature (psia):** Enter the vapor pressure, in pounds per square inch absolute, of the liquid being stored in this specific storage tank.

INSTRUCTIONS

Form 2.7 Haul Road Fugitive Emission Worksheet

This form is **required** for any facility with a haul road, **paved or unpaved**.

Use a separate Form 2.7 for each haul road at your facility.

Complete **(a) Installation Name**, **(b) FIPS County Number** and **(c) Plant Number**.
See Form 1.1 for details on these entries.

Haul Road Information

- (d) **Point Number:** Enter the identification number listed on Form 2.0 for this point.
- (e) **SCC:** Enter the identification number listed on Form 2.0 for this point.
- (f) **Surface Material of Road:** Describe the road surface material. [i.e. crushed rock, dirt, concrete, etc.]
- (g) **Length of Road (miles):** Enter the length of the haul road, to the nearest one-tenth mile, that is within your property lines.
- (h) **Silt Content (%):** Enter the silt content of the road surface. If unknown, use a default value of 9.6%. Silt contents can be measured or found in AP-42, Section 13.2.1 and/or Section 13.2.2.
- (i) **Type of Dust Control/Control Efficiency:** Mark the appropriate box that best describes this specific tank. Enter the dust control method and appropriate efficiency, if applicable, in the corresponding boxes on Form 2.0 for this emission point.

Haul Truck Information

- (j) **Unloaded Truck Weight (tons):** Enter the empty weight, in tons, of the primary type of truck to be used on this specific haul road.
- (k) **Average Weight of Material per Load (tons):** Enter the average weight, in tons, of the amount of material to be hauled by this type of truck on this specific haul road.
- (l) **Average Loaded Truck Weight (tons):** Enter the empty weight of the primary type of truck (j) plus the average weight of the amount of material to be hauled by this type of truck (k) on this specific haul road.
- (m) **Number of Wheels:** Enter the number of wheels on the primary type of truck to be used on this specific haul road.
- (w) **Average Truck Speed (mph):** Enter the average speed, in miles per hour, of the primary type of truck to be used on this specific haul road.

- (x) **Type of Material(s) Hauled:** Enter the type of material that will normally be hauled on this specific haul road. [i.e. limestone, gravel, concrete, etc.]
- (y) **Annual Amount Hauled (tons):** Enter the expected annual amount of material to be hauled, in tons, on this specific haul road. This number should be the same as was entered in box (p) on Form 2.0 for this emission point.
- (z) **Maximum Hourly Amount Hauled (tons):** Enter the maximum theoretical amount of material, in tons, that the primary truck could haul per hour on this specific haul road.

INSTRUCTIONS

Form 2.8 Storage Pile Worksheet

This form is **required** for any facility with any open storage piles that are included in this application.

Use a separate Form 2.8 for each storage pile at your facility. You may group and report separate storage piles as one emission point if they store the same type of material.

Complete **(a) Installation Name, (b) FIPS County Number** and **(c) Plant Number**. See Form 1.1 for details on these entries.

Storage Pile Information

- (d) **Point Number:** Enter the identification number listed on Form 2.0 for this point.
- (e) **SCC:** Enter the identification number listed on Form 2.0 for this point.
- (f) **Type of Material Stored:** Describe the type of material stored in this specific storage pile. [i.e. crushed rock, gravel, sand, etc.]
- (g) **Moisture Content (%):** Enter the moisture content of the storage pile. If unknown, use a default value of 0.7%. Moisture contents can be measured or found in AP-42, Section 13.2.4.
- (h) **Area of Storage Pile (acres):** Enter the area, in acres, that this specific storage pile will cover.
- (i) **Storage Duration (days):** Enter the average number of days that the material will remain in this specific storage pile. If unknown, use a default value of 76 days.
- (j) **Silt Content (%):** Enter the silt content of the storage pile. If unknown, use a default value of 1.6%. Silt contents can be measured or found in AP-42, Section 13.2.4.
- (k) **Annual Amount Stored (tons):** Enter the expected annual amount of material to be stored, in tons, in this specific storage pile. This number should be the same as was entered in box (p) on Form 2.0 for this emission point.
- (l) **Maximum Hourly Amount Stored (tons):** Enter the maximum theoretical amount of material, in tons, that this specific storage pile could accept per hour.
- (m) **Raw Material Loading Method:** Mark the appropriate box that best describes the loading in of material for this specific storage pile.

- (n) **Raw Material Unloading Method:** Mark the appropriate box that best describes the loading out of material for this specific storage pile.

INSTRUCTIONS

Form 2.T Hazardous Air Pollutant Worksheet

This form should be completed to report the emission of any Hazardous Air Pollutant (HAP) regulated under Section 112(b) of the 1990 Clean Air Act Amendments. Use this form to list specific HAPs being emitted from a single emission point. Please refer to the HAP listings in the [Table of Hazardous Air Pollutants and Screening Model Action Levels](#) to determine if you are emitting any HAPs from your facility.

The list of HAPs in the [Table of Hazardous Air Pollutants and Screening Model Action Levels](#) also provides the CAS numbers for each HAP and an indication of whether the chemical is considered a VOC or PM₁₀ for reporting purposes. If you have a question about a particular material and whether or not it is a HAP, call the APCA at (573) 751-4817.

Each row in Form 2.T should be used to enter the information about a single HAP at one specific emission point. In lieu of completing this section, the applicant is also encouraged to submit calculations completed electronically (i.e. spreadsheets), if available.

Complete **(a) Installation Name, (b) FIPS County Number** and **(c) Plant Number**. See Form 1.1 for details on these entries.

- (d) **Point Number:** Enter the identification number listed on Form 2.0 for this point.
- (e) **SCC:** Enter the identification number listed on Form 2.0 for this point.
- (f) **HAP Chemical:** Enter the most common chemical name for a specific HAP being emitted.
- (g) **CAS Number:** Enter the Chemical Abstract Service (CAS) registry number for the specific HAP being emitted. CAS numbers for HAPs can be found in the Appendix.
- (h) **Amount Used or Handled:** Enter the amount of the HAP that is being used at this emission point. Calculate this amount by doing a mass balance on the total amount of material containing HAPs used at this point and the HAP content as reported on the MSDS for that material.
- (i) **Units:** Enter the units associated with the Amount Used or Handled of the HAP (h). [for example, pounds, gallons, etc.]

INSTRUCTIONS

Form 3.0 Comment Sheet

Use this sheet if you have any comments that you would like to add about a specific emission point, process or other aspect of your permit application.

Complete **(a) Installation Name**, **(b) FIPS County Number** and **(c) Plant Number**. See Form 1.1 for details on these entries.

- (d) **Emission Point No.:** This identification number must match the emission point identification number listed on Forms 1.1 and 1.2.