



Missouri Department of Natural Resources
Missouri Air Conservation Commission
Air Pollution Control Program

PERMIT BOOK

**PERMIT
TO
CONSTRUCT
PERMIT BY RULE**

Under the authority of RSMo 643 and the Federal Clean Air Act the applicant is authorized to construct and operate the air contaminant source(s) described below, in accordance with the laws, rules, and conditions set forth here in.

Construction **Permit Number:** **052010-010**
Project Number: 2010-05-001
Installation ID: 225-0044

Installation Name and Address

Best Friends Forever
591 Harvestore Road
Rogersville, MO 65742
Webster County

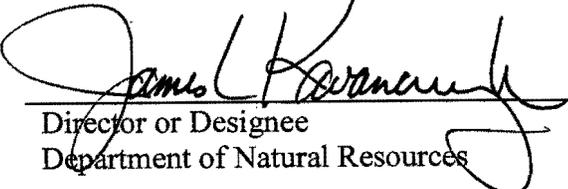
Parent Company's Name and Address

Ms. Amy Forgey
Best Friends Animal Hospital
903 W. South St.
Ozark, MO 65721
Webster County

Installation Description:
Cremation of Deceased Animals

MAY 13 2010

Effective Date


Director or Designee
Department of Natural Resources

PERMIT BOOK

STANDARD CONDITIONS:

Permission to construct may be revoked if you fail to begin construction or modification within two years from the effective date of this permit. Permittee should notify the Air Pollution Control Program if construction or modification is not started within two years after the effective date of this permit, or if construction or modification is suspended for one year or more.

You will be in violation of 10 CSR 10-6.060 and 10 CSR 10-6.062 if you fail to adhere to the specifications and conditions listed in your permit by rule application and this permit. Specifically, all air contaminant control devices shall be operated and maintained as specified in the application, associated plans and specifications.

You must notify the Department of Natural Resources Regional office responsible for the area within which the equipment is located within 15 days after the actual start up of this air contaminant source.

A copy of this permit and permit notification shall be kept at the installation address and shall be made available to Department of Natural Resources' personnel upon request.

You may appeal this permit or any of the listed special conditions as provided in RSMo 643.075. If you choose to appeal, the Air Pollution Control Program must receive your written declaration within 30 days of receipt of this permit.

If you choose not to appeal, this certificate, the project review, your application and associated correspondence constitutes your permit to construct. The permit allows you to construct and operate your air contaminant sources(s), but in no way relieves you of your obligation to comply with all applicable provisions of the Missouri Air Conservation Law, regulations of the Missouri Department of Natural Resources and other applicable federal, state and local laws and ordinances.

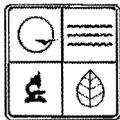
The Department of Natural Resources has established the Outreach and Assistance Center to help in completing future applications or fielding complaints about the permitting process. You are invited to contact them at 1-800-361-4827 or (573) 526-6627, or you can write to the Outreach and Assistance Center, P.O. Box 176, Jefferson City, Missouri 65102-0176.

The Air Pollution Control Program invites your questions regarding this air pollution permit. Please contact the Construction Permit Unit at (573) 751-4817. If you prefer to write, please address your correspondence to the Air Pollution Control Program, P.O. Box 176, Jefferson City, Missouri 65102-0176, attention: Construction Permit Unit.

2010-05-001

MO

MISSOURI DEPARTMENT OF NATURAL RESOURCES
AIR POLLUTION CONTROL PROGRAM
P.O. BOX 176, JEFFERSON CITY, MO 65102-0176



**APPLICATION FOR AUTHORITY TO CONSTRUCT
PERMIT BY RULE NOTIFICATION
CREMATORIES AND ANIMAL INCINERATORS**

APCP USE ONLY	
CHECK NO. 1468	CHECK RECEIVED (MM/DD/YY) 4.30.10
CHECK AMOUNT \$ 700. ⁰⁰	CHECK DATE (MM/DD/YY) 4.27.10
PROJECT NO. 2010-05-001	PERMIT NO.

SECTION A: GENERAL NOTIFICATION INFORMATION - ALL NOTIFICATIONS MUST BE ACCOMPANIED BY A \$700 FEE.

SECTION A-1: GENERAL INSTALLATION INFORMATION

1. INSTALLATION NAME Best Friends Forever	2. FIPS 225	3. PLANT NO. N/A
4. INSTALLATION STREET ADDRESS 591 Harvestore Rd Rogersville MO 65742		
5. INSTALLATION MAILING ADDRESS 903 W South St Ozark MO 65721		
6. CITY Rogersville	STATE MO	ZIP CODE 65742
7. COUNTY NAME Webster	8. THE N ¹ / ₂ OF THE NW 1/4, of the NW 1/4, of SECTION 29 TOWNSHIP 28 RANGE 19	
9. PARENT COMPANY Best Friends Animal Hospital		
10. PARENT COMPANY MAILING ADDRESS 903 W South St		
11. CITY Ozark	STATE MO	ZIP CODE 65721
12. INSTALLATION CONTACT PERSON Amy Forgey	13. CONTACT PERSON'S TITLE Manager	
14. CONTACT PERSON'S MAILING ADDRESS 903 W South St Ozark MO 65721		
15. INSTALLATION CONTACT TELEPHONE NO. (417) 890-7878	16. INSTALLATION CONTACT FAX NO. (417) 485-2154	
17. INSTALLATION CONTACT E-MAIL ADDRESS bestfriends@bestfriendsanimal.net		
18. PROJECTED DATE TO COMMENCE CONSTRUCTION 5/1/2010	19. PROJECT DATE OF OPERATION STARTUP 5/15/2010	

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AIR POLLUTION
CONTROL PG#4

SECTION A-2: INSTALLATION DESCRIPTION

20.
The unit will be used for the cremation of deceased animals. Animals will be picked up from local veterinarians and private owners.

SECTION A-3: CERTIFICATION STATEMENT

I certify that I have personally examined and am familiar with the information in this application and believe that the information submitted is accurate and complete. I am aware that making a false statement or misrepresentation in this application is grounds for denying or revoking this permit.

21. SIGNATURE OF RESPONSIBLE OFFICIAL <i>Amy Forgey</i>	22. DATE 4/15/2010
23. TYPE OR PRINT NAME OF RESPONSIBLE OFFICIAL Amy Forgey	24. RESPONSIBLE OFFICIAL'S TELEPHONE NUMBER (417) 890-7878
25. TITLE OF RESPONSIBLE OFFICIAL Manager	

SECTION B: SPECIAL CONDITIONS FOR CREMATORIES AND ANIMAL INCINERATORS

Construction and operation of this new air pollution source is subject to the special conditions listed below. These special conditions are based on the authority granted to the Missouri Air Pollution Control Program by the Missouri Air Conservation Law (specifically RSMo. 643.075) and by the Missouri Rules listed in Title 10, Division 10 of the Code of State Regulations (specifically 10 CSR 10-6.062 "Construction Permits by Rule").

Please indicate by marking the appropriate box as to whether or not the emission source complies with the rule listed in the applicable emission limit or standard. If any of the applicable emission source boxes are checked no, your source is not eligible for a crematories and animal incinerators permit by rule.

This Permit By Rule applies only to Crematories and Animal Incinerators constructed after October 31, 2003.

SPECIAL CONDITION	EMISSION SOURCE COMPLY?	APPLICABLE EMISSION LIMIT OR STANDARD	METHOD OF COMPLIANCE
10 CSR 10-6.062(3)(B)2.A.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	The materials to be disposed of shall be limited to noninfectious human materials removed during surgery, labor and delivery, autopsy, or biopsy including body parts, tissues and fetuses, organs, bulk blood and body fluids, blood or tissue laboratory specimens, and other noninfectious anatomical remains or animal carcasses in whole or in part. The owner or operator shall minimize the amount of packaging fed to the incinerator, particularly plastic containing chlorine. The incinerators shall not be used to dispose of other non-biological medical wastes including, but not limited to, sharps, rubber gloves, intravenous bags, tubing, and metal parts.	Proper work practice.
10 CSR 10-6.062(3)(B)2.B.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	The manufacturer's rated capacity (burn rate) shall be two hundred (200) pounds per hour or less.	Proper work practice.
10 CSR 10-6.062(3)(B)2.C.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	The incinerator shall be a dual-chamber design.	Proper work practice.
10 CSR 10-6.062(3)(B)2.D.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Burners shall be located in each chamber, sized to manufacturer's specifications, and operated as necessary to maintain the minimum temperature requirements of subparagraph 10 CSR 10-6.062(3)(B)2.E. at all times when the unit is burning waste.	Proper work practice.
10 CSR 10-6.062(3)(B)2.E.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Excluding crematories, the second chamber must be designed to maintain a temperature of one thousand six hundred degrees Fahrenheit (1,600°F) or more with a gas residence time of one-half (1/2) second or more. The temperature shall be monitored with equipment that is accurate to plus or minus two percent (±2%) and continuously recorded. The thermocouples or radiation pyrometers shall be fitted to the incinerator and wired into a manual reset noise alarm such that if the temperature of either of the two (2) chambers falls below the minimum temperature above, the alarm will sound at which time plant personnel shall take immediate measures to either correct the problem or cease operation of the incinerator until the problem is corrected	Proper work practice and maintenance of proper alarm records. These records shall be maintained for not less than five (5) years, and they shall be immediately available to any Missouri Department of Natural Resources personnel upon request.
10 CSR 10-6.062(3)(B)2.F.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	There shall be no obstruction to stack flow, such as by rain caps, unless such devices are designed to automatically open when the incinerator is operated. Properly installed and maintained spark arresters are not considered obstructions.	Proper work practice.

SECTION B: SPECIAL CONDITIONS FOR CREMATORIES AND ANIMAL INCINERATORS (CONTINUED)

SPECIAL CONDITION	EMISSION SOURCE COMPLY?	APPLICABLE EMISSION LIMIT OR STANDARD	METHOD OF COMPLIANCE
10 CSR 10-6.062(3)(B)2.G.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<p>Each incinerator operator shall be trained in the incinerator operating procedures as developed by the American Society of Mechanical Engineers (ASME), by the incinerator manufacturer, or by a trained individual with more than one (1) year experience in the operation of the incinerator that the trainee will be operating. Minimum training shall include basic combustion control parameters of the incinerator and all emergency procedures to be followed should the incinerator malfunction or exceed operating parameters. An operator who meets the training requirements of this condition shall be on duty and immediately accessible during all periods of operation. The manufacturer's operating instructions and guidelines shall be posted at the unit and the unit shall be operated in accordance with these instructions.</p>	<p>Proper work practice and maintenance of proper operator training records. These records shall be maintained for not less than five (5) years, and they shall be immediately available to any Missouri Department of Natural Resources personnel upon request.</p>
10 CSR 10-6.062(3)(B)2.H.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<p>The incinerator shall have an opacity of less than ten percent (10%) at all times.</p>	<p>Proper work practice such that no opacity violations are noted.</p>
10 CSR 10-6.062(3)(B)2.I.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<p>Heat shall be provided by the combustion of natural gas, liquid petroleum gas, or Number 2 fuel oil with less than three-tenths percent (0.3%) sulfur by weight, or by electric power.</p>	<p>Proper work practice.</p>
10 CSR 10-6.062(3)(B)2.J.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<p>The operator shall maintain a log of all alarm trips and the resulting action taken. A written certification of the appropriate training received by the operator, with the date of training, that includes a list of the instructor's qualifications or ASME certification school shall be maintained for each operator. The operator shall maintain an accurate record of the monthly amount and type of waste combusted.</p>	<p>Determined through proper alarm and operator training record keeping. These records shall be maintained for not less than five (5) years, and they shall be immediately available to any Missouri Department of Natural Resources personnel upon request.</p>

STATE OF MISSOURI
DEPARTMENT OF NATURAL RESOURCES

Jeremiah W. (Jay) Nixon, Governor • Mark N. Templeton, Director

www.dnr.mo.gov

MAY 13 2010

Ms. Amy Forgey
Manager
Best Friends Animal Hospital
903 W. South St.
Ozark, MO 65721

RE: New Source Review Permit, Permit by Rule - Project Number: 2010-05-001
Facility ID Number: 225-0044

Dear Ms. Forgey:

Enclosed with this letter is your permit to construct. Please review your permit carefully. You submitted a \$700.00 review (\$100 plus \$600) fee and a completed Permit By Rule Notification, received on April 30, 2010.

Also, we are returning a copy of the Permit By Rule Notification, as you completed and provided, which you must retain at the installation and make it immediately available to any inspector.

Section A and Section B of your permit application "General Notification Information for Authority to Construct" and "Special Conditions for Crematories and Animal Incinerators" are part of your permit. The entire permit must be retained in your files. The reverse side of your permit certificate has important information concerning standard permit conditions and your rights and obligations under the laws and regulations of the State of Missouri.

Operation in accordance with these conditions is necessary for continued compliance.

In order to streamline the permitting process, the initial on-site compliance inspection requirement (which is mandatory prior to issuance of a permit) has been waived. However, an on-site compliance inspection will be performed at a later date, to validate your statements and conditions claimed on the permit by rule notification. If you have any questions regarding this permit, please contact James Broadfoot, at the Departments' Air Pollution Control Program, P.O. Box 176, Jefferson City, MO 65102 or (573) 751-4817.

Sincerely,

AIR POLLUTION CONTROL PROGRAM



Kyra L. Moore
Permit Section Chief

KLM:jbl

Enclosures

c: Southwest City Regional Office
PAMS File 2010-05-001
Permit Number:

052010-010
Recycled Paper