



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
AIR POLLUTION CONTROL PROGRAM  
COMPLIANCE CERTIFICATION AND MONITORING REPORT  
**INTERMEDIATE OPERATING PERMIT**

FIPS NO.		PLANT NO.	
INSTALLATION NAME			
INSTALLATION LOCATION (STREET ADDRESS AND CITY)			
OPERATING PERMIT NUMBER		DATE OPERATING PERMIT ISSUED	
TYPE OF REPORT <input type="checkbox"/> ANNUAL COMPLIANCE CERTIFICATION <input type="checkbox"/> EXCEEDANCE REPORT			
REPORTING PERIOD START DATE		REPORTING PERIOD END DATE	
	<b>RESPONSIBLE OFFICIAL</b>		<b>PERMIT CONTACT PERSON</b>
NAME			
TITLE			
MAILING ADDRESS			
TELEPHONE NUMBER WITH AREA CODE			
HAS THE ABOVE INFORMATION CHANGED SINCE THE ISSUANCE OF THE OPERATING PERMIT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
<b>SUMMARY</b>			
1. IS THE INSTALLATION IN COMPLIANCE WITH ALL OPERATING PERMIT CONDITIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO			
2. DID THE INSTALLATION DEVIATE FROM THE OPERATING PERMIT CONDITIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO			
3. IF THE RESPONSE TO #2 IS "YES," DID THE INSTALLATION NOTIFY THE DEPARTMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
4. IF THE RESPONSE TO #3 IS "YES," WHEN WAS THE DEPARTMENT NOTIFIED?			
5. IF THE RESPONSE TO #3 IS "NO," COMPLETE A DEVIATION REPORT USING PAGE 2 OF THIS FORM OR EQUIVALENT INFORMATION USING SOME OTHER REPORT FORMAT.			
<b>CERTIFICATION STATEMENT</b>			
I certify, based on information and belief formed after reasonable inquiry, the statements and information in this document are true, accurate and complete.*			
SIGNATURE OF RESPONSIBLE OFFICIAL			DATE SIGNED
PRINT NAME OF RESPONSIBLE OFFICIAL			
*This certification means that the signatory has verified compliance with all applicable regulations and operating permit conditions, and that the installation has complied with all monitoring, record keeping, reporting and testing conditions specified in the operating permit unless specified differently in a deviations report. For information concerning administrative and civil penalties, please consult Section 643.085 of the Revised Statutes of the State of Missouri (RSMo) and Section 643.151 RSMo, respectively.			



# Compliance Certification and Monitoring Report - Intermediate Operating Permit Application Instructions for Form 780-1810

- All installations that have received an Intermediate Operating Permit must submit compliance reports as required by 10 CSR 10-6.065(4)(I).
- The Annual Compliance Certification (ACC) is the minimum reporting requirement for the Intermediate Operating Permit.
- All installations are required to submit these reports after the installation has been issued an intermediate Operating Permit. The Operating Permit may also require the installation to submit additional reports (Exceedance Reports, MACT Reports, Performance Test Reports, Compliance Plan Updates, etc.).

## **When and where must the reports be submitted?**

- The Annual Compliance Certification for Intermediates must be submitted to the Missouri Department of Natural Resources and St. Louis County Health Department, if applicable, by April 1 of each year. The reports can be emailed or mailed to the Air Pollution Control Program. The email address is [AirComplianceReporting@dnr.mo.gov](mailto:AirComplianceReporting@dnr.mo.gov). The email address can also be located on the report form at the bottom of page 2.
- Other reports shall be submitted as specified in the permit conditions, MACT standards or compliance plans. Monitoring requirements that require reporting more frequently than semi-annually shall report no later than 30 days after the end of the calendar quarter in which the measurements were taken.

## **Mailing Addresses**

Missouri Department of Natural Resources  
Air Pollution Control Program  
Compliance and Enforcement Section Chief  
P.O. Box 176  
Jefferson City, MO 65102  
[AirComplianceReporting@dnr.mo.gov](mailto:AirComplianceReporting@dnr.mo.gov)

## **If you are located in St. Louis County**

St. Louis County  
Department of Health  
Air Pollution Control Section  
6121 North Hanley Road  
Berkeley, MO 63134

## What if I have questions?

If an installation has questions regarding the completion of this form, contact one of the following:

Missouri Department of Natural Resources	
Air Pollution Control Program – Enforcement Section	573-751-4817
St. Louis County Department of Health	314-615-8907

## Installation Information

All Intermediate installations are required to submit page 1 of the Compliance Certification and Monitoring Report Form. This information is required even if the installation has no monitoring deviations during the reporting period. If more space is needed to describe the information requested, attach additional pages. The required information includes:

**FIPs ID No.** - The unique three-digit number assigned to each county in the state. The FIPS ID No. is the first three numbers of the installation ID, usually located on the first page of the permit.

**Plant ID No.** - The unique four digit number assigned to each plant in each county of the state. If the installation is uncertain of the Plant ID No., contact the Air Pollution Control Program.

**Installation name** - Full, legal name of installation.

**Installation location (street address and city)** – Physical location of the plant.

**Operating Permit Number** – The unique number printed on the cover page of the operating permit.

**Date the Operating Permit was issued** – The effective date on the cover page of the operating permit.

**Type of Report** - Annual Compliance Certification or Exceedance Report.

**Reporting Period** - Indicate the 12-month reporting period the Annual Compliance Certification is being submitted for such as Jan. 1, 2013 through Dec. 31, 2013. If the installation is submitting its first report under these requirements, the reporting period extends from the date the permit was issued until the end date of the applicable reporting period.

**Responsible Official** – Name, title, mailing address and phone number.

**Permit Contact Person** – Name, title, mailing address and phone number.

**Information Changes** - Indicate in the appropriate check box whether any of the installation information (Name change, responsible official, permit contact person, etc.) has changed since the issuance of the Operating Permit.

## Summary

All Intermediate installations must complete this section of the Compliance Certification and Monitoring Report Form. A series of “Yes” or “No” check boxes allows the installation to provide a brief summary of the compliance status for the reporting period. If the installation indicates a deviation from its operating permit conditions, and had not yet notified the Missouri Department of Natural Resources at the time of reporting, it is requested to do so. Page one of the Compliance Certification and Monitoring Report Form indicates that deviations can be reported in a format other than that provided on page two of the form. However, the Air Pollution Control Program strongly recommends the use of page two of the form for the purpose of reporting deviations.

## Certification

The responsible official for the installation must sign and date the Compliance Certification or Monitoring Report, and include the Statement of Certification. This certification is located at the bottom of page one of the form.

## Deviations from Required Monitoring

A deviation is any failure to meet a permitted level, monitoring term or condition in the Operating Permit. For any monitoring deviations experienced during the reporting period, the Monitoring Report must include the following:

- FIPs ID No.
- Plant ID No.
- Installation Name
- Reporting Period
- Permit Condition (as indicated in the operating permit)
- Pollutant (as indicated in the operating permit) The most common pollutants are PM, CO, NOX, VOC, SOX, Lead and HAPs. The HAPs are regulated on a group and singular basis. If a specific HAP is regulated, list it as follows: HAP – Toluene.
- Monitored Level (as measured by the monitoring techniques) Examples of monitored levels are seven to 15 percent for opacity, 3.0 to 4.8 lbs/hr for particulate matter, 2.3 tons/year for HAPs, etc.
- Monitoring Method. The following Monitoring Method abbreviations can be used in the table:

Method	Abbreviations
Continuous Emission Monitoring System	CEMS
Continuous Opacity Monitoring System	COMS
No Visible Emissions (Method 22)	NVE
Opacity Observations (Method 9)	OO
Operation & Maintenance Plan	OMP
Record keeping Requirements	RR
Reporting Requirements	RPT
Source Testing	ST
Other Method to Determine Compliance	OTHER

If OTHER is used, explain in the monitoring comment field.

**Deviation Description** - A brief description of the type of deviation observed.

**Deviation Date** - The date on which the deviation occurred.

**Deviation Duration** - The amount of time for which the deviation occurred. Examples of deviation duration are six minutes, five hours, three days, etc.

**Cause of Deviation** - What circumstances led to the deviation. Examples of causes for deviation are: control device was not operational, bag broke on a baghouse, misfeed in the production line, etc.

**Corrective Action** - What was done by the installation to correct the deviation and to prevent the deviation from occurring again.

If more space is needed to describe the monitoring method, or if further monitoring conditions are applicable, attach additional pages.

## For More Information

Missouri Department of Natural Resources  
Air Pollution Control Program  
P.O. Box 176  
Jefferson City, MO 65102-0176  
800-361-4827 or 573-751-4817  
[dnr.mo.gov/env/apcp/index.html](http://dnr.mo.gov/env/apcp/index.html)