Section II - Specific Air Contaminant Source Information

Facility ID: _____
Emissions Unit ID: _____
Company Equipment ID: _____

One copy of this section should be filled out for each air contaminant source (emissions unit) covered by this PTI/PTIO application identified in Section I, Question 5. See the application instructions for additional information.

1. **Air Contaminant Source Installation or Modification Schedule** – Check all that apply (must be completed regardless of date of installation or modification):

☐ New installation (for which construction has not yet begun, in accordance with OAC rule 3745-31-33). When will you begin to install the air contaminant source?

(month/year) _____ **OR** 9 after installation permit has been issued

☐ Initial application for an air contaminant source already installed or under construction. Identify installation date or the date construction began (month/year) _____ and the date operation began (month/year) _____

☐ Modification to an existing air contaminant source/facility (for which modification has not yet begun) - List previous PTI or PTIO number(s) for air contaminant sources included in this application, if applicable, and describe the requested modification (attach an additional sheet, if necessary):

_____

When will you begin to modify the air contaminant source? (month/year) _____ **OR** 9 after modification permit has been issued

☐ Modification application for an air contaminant source which has been or is currently being modified. List previous PTI or PTIO number(s) for air contaminant sources included in this application, if applicable, and describe the requested modification (attach an additional sheet, if necessary):

_____

Identify modification date or the date modification began (month/year) _____ and the date operation began (month/year) _____

☐ Reconstruction of an existing air contaminant source/facility. Please explain: _____

_____

☐ Renewal of an existing permit-to-operate (PTO) or PTIO

Identify the date operation began after installation or latest modification (month/year) _____

☐ General Permit General Permit Category_____ General Permit Type _____

Complete, sign and attach the appropriate Qualifying Criteria Document

☐ Other, please explain: _____

2. **SCC Codes** - List all Source Classification Code(s) (SCC) that describe the process(es) performed by this air contaminant source (e.g., 1-02-002-04).

_____ _____ _____ _____ _____

3. **Emissions Information** - The following table requests information needed to determine the applicable requirements and the compliance status of this air contaminant source with those requirements. Suggestions for how to estimate emissions may be found in the instructions to the Emissions Activity Category (EAC) forms required with this application. If you need further assistance, contact your District Office/Local Air Agency representative.
   - If total potential emissions of HAPs or any Toxic Air Contaminant (as identified in OAC rule 3745-114-01) are greater than 1 ton/yr, fill in the table for that (those) pollutant(s). For all other pollutants, if "Emissions before controls (max), lb/hr" multiplied by 24 hours/day is greater than 10 lbs/day, fill in the table for that pollutant.
   - Actual emissions are calculated including add-on control equipment. If you have no add-on control equipment, "Emissions before controls" will be the same as "Actual emissions".
   - Actual emissions and Requested Allowable should be based on operating 8760 hr/yr unless you are requesting federally enforceable operating restrictions to limit emissions. If so, calculate emissions based on requested operating restrictions and describe in your calculations.
   - If you use units other than lbs/hr or ton/yr, specify the units used (e.g., gr/dscf, lb/ton charged, lb/MMBtu, tons/12-months).
   - Requested Allowable (ton/yr) is often equivalent to Potential to Emit (PTE) as defined in OAC rule 3745-31-01 and OAC rule 3745-77-01.

Pollutant	Emissions before controls (max)* (lb/hr)	Actual emissions* (lb/hr)	Actual emissions* (ton/year)	Requested Allowable* (lb/hr)	Requested Allowable* (ton/year)
Particulate emissions (PE/PM) (formerly particulate matter, PM)					
PM # 10 microns in diameter (PE/PM_{10})					
PM # 2.5 microns in diameter ($PE/PM_{2.5}$)					
Sulfur dioxide (SO_2)					
Nitrogen oxides (NO_x)					
Carbon monoxide (CO)					
Organic compounds (OC)					
Volatile organic compounds (VOC)					
Lead (Pb)					
Total Hazardous Air Pollutants (HAPs)					
Highest single HAP:					
Toxic Air Contaminants (see instructions):					

* Provide your calculations as an attachment and explain how all process variables and emission factors were selected. Note the emission factor(s) employed and document origin. Example: AP-42, Table 4.4-3 (8/97); stack test, Method 5, 4/96; mass balance based on MSDS; etc.

4. **Best Available Technology (BAT)** - For each pollutant for which the Requested Allowable in the above table exceeds 10 tons per year, BAT, as defined in OAC 3745-31-01, is required. Describe what has been selected as BAT and the basis for the selection:

_____

5. **Control Equipment** - Does this air contaminant source employ emissions control equipment?

☐ Yes - fill out the applicable information below.
☐ No - proceed to Question 6.

Section II - Specific Air Contaminant Source Information

Facility ID: _____
Emissions Unit ID: _____
Company Equipment ID: _____

Select the type(s) of control equipment employed below (required data for selected control equipment in **bold**):

Pollutant abbreviations

PE/PM = Particulate emissions (formerly particulate matter)
$PE/PM_{2.5}$ = PM # 2.5 microns in diameter
VOC = Volatile organic compounds
NO_x = Nitrogen oxides
PE/PM_{10} = PM # 10 microns in diameter
OC = Organic compounds
SO_2 = Sulfur dioxide
CO = Carbon monoxide
Pb = Lead

☐ Adsorber
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC ☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
Type: ☐ **Fluidized Bed** ☐ **Fixed Bed** ☐ **Moving Bed** ☐ **Disposable** ☐ **Concentrator** ☐ **Other** _____
Adsorption Media: _____
For Fluidized Bed, Fixed Bed, Moving Bed and Disposable only:
Maximum design outlet organic compound concentration (ppmv): _____
Media replacement frequency or regeneration cycle time (specify units): _____
Maximum temperature of the media bed, after regeneration (including any cooling cycle): _____
For Concentrator Only:
Design regeneration cycle time (minutes): _____
Minimum desorption air stream temperature (°F): _____
Rotational rate (revolutions/hour): _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
Inlet gas temperature (°F): _____ Outlet gas temperature (°F): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Catalytic Converter
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC ☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Catalytic Incinerator
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC ☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
Combustion chamber residence time (seconds): _____
Minimum temperature difference (°F) across catalyst during air contaminant source operation: _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
Minimum inlet gas temperature (°F): _____ Outlet gas temperature (°F): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel

List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Condenser
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
Type: ☐ **Indirect contact** ☐ **Direct contact** ☐ **Freeboard refrigeration device** ☐ **Other:** _____
Maximum exhaust gas temperature (^oF) during air contaminant source operation: _____
Coolant type: _____
Design coolant temperature (^oF): Minimum _____ Maximum _____
Design coolant flow rate (gpm): _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
Inlet gas temperature (°F): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Cyclone/Multiclone
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
Type: ☐ **Simple** ☐ **Multiclone** ☐ **Rotoclone** ☐ **Other** _____
Operating pressure drop range (inches of water): Minimum: _____ Maximum: _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Dry Scrubber
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
Reagent(s) used: Type: _____ **Injection rate(s):** _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
Inlet gas temperature (°F): _____ Outlet gas temperature (°F): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Electrostatic Precipitator
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC

☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency:_____
Design control efficiency (%): _____ Basis for efficiency:_____
Operating control efficiency (%): _____ Basis for efficiency:_____
Type: ☐ **Dry** ☐ **Wet** ☐ **Other:** _____
Number of operating fields: _____
Secondary voltage (V) range (minimum – maximum): _____
Secondary current (milliamps) range (minimum – maximum): _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Fabric Filter/Baghouse
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency:_____
Design control efficiency (%): _____ Basis for efficiency:_____
Operating control efficiency (%): _____ Basis for efficiency:_____
Operating pressure drop range (inches of water): Minimum: _____ **Maximum:** _____
Pressure type: ☐ **Negative pressure** ☐ **Positive pressure**
Fabric cleaning mechanism: ☐ Reverse air ☐ Pulse jet ☐ Shaker ☐ Other _____
Bag leak detection system: ☐ Yes ☐ No Type: _____
☐ **Lime injection or fabric coating agent used: Type:** _____ **Feed rate:** _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
Inlet gas temperature (°F): _____ Outlet gas temperature (°F): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Flare
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency:_____
Design control efficiency (%): _____ Basis for efficiency:_____
Operating control efficiency (%): _____ Basis for efficiency:_____
Type: ☐ **Enclosed** ☐ **Elevated (open)**
If Elevated (open): ☐ **Air-assisted** ☐ **Steam-assisted** ☐ **Non-assisted**
Ignition device: ☐ **Electric arc** ☐ **Pilot flame**
Flame presence sensor: ☐ **Yes** ☐ **No**
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
Inlet gas temperature (°F): _____ Outlet gas temperature (°F): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Fugitive Dust Suppression
Suppressant Type: ☐ **Water** ☐ **Chemical** ☐ **Calcium chloride** ☐ **Asphaltic cement** ☐ **Other** _____
Method of application: _____
Application rate (specify units): _____
Application frequency: _____
List all egress point IDs (from Table 7-B) associated with this control strategy: _____

☐ NOx Reduction Technology
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
NOx Reduction Type: ☐ **Selective Catalytic** ☐ **Non-Selective Catalytic** ☐ **Selective Non-Catalytic**
Inlet temp.: _____ **Outlet temp.:** _____
Inlet gas flow rate (acfm): _____
For Selective types only:
Reagent type: _____
Reagent injection rate (specify units): _____
Reagent slip (acfm): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Passive Filter
Type: ☐ **Bin vent** ☐ **Paint booth filter** ☐ **Filter sock** ☐ **Other:** _____ **Your ID for filter** _____
Design control efficiency (%): _____ Basis for efficiency: _____
Change frequency: _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Settling Chamber
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
Length x Width x Height: _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Thermal Incinerator/Thermal Oxidizer
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency: _____
Design control efficiency (%): _____ Basis for efficiency: _____
Operating control efficiency (%): _____ Basis for efficiency: _____
Minimum operating temp. (°F) and sensor location: _____ (See application instructions)
Combustion chamber residence time (seconds): _____
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
Inlet gas temperature (°F): _____ Outlet gas temperature (°F): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Wet Scrubber
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency:_____
Design control efficiency (%): _____ Basis for efficiency:_____
Operating control efficiency (%): _____ Basis for efficiency:_____
Operating pressure drop range (inches of water): Minimum: _____ **Maximum:** _____
Type: ☐ **Impingement** ☐ **Packed bed** ☐ **Spray chamber** ☐ **Venturi** ☐ **Other:** _____
pH range for scrubbing liquid: Minimum: _____ Maximum: _____
Is scrubber liquid recirculated? ☐ Yes ☐ No
Scrubber liquid flow rate (gal/min): _____
Scrubber liquid supply pressure (psig): _____ NOTE: This item for spray chambers only.
Inlet gas flow rate (acfm): _____ Outlet gas flow rate (acfm) : _____
Inlet gas temperature (°F): _____ Outlet gas temperature (°F): _____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

☐ Other
Type: describe _____
Manufacturer: _____ Year installed: _____ **Your ID for control equipment** _____
Describe this control equipment: _____
Pollutant(s) controlled: ☐ PE/PM ☐ PE/PM_{10} ☐ $PE/PM_{2.5}$ ☐ OC ☐ VOC
☐ SO_2 ☐ NO_x ☐ CO ☐ Pb ☐ Other _____
Estimated capture efficiency (%): _____ Basis for efficiency:_____
Design control efficiency (%): _____ Basis for efficiency:_____
Operating control efficiency (%): _____ Basis for efficiency:_____
☐ **This is the only control equipment on this air contaminant source**
If not, this control equipment is: ☐ Primary ☐ Secondary ☐ Parallel
List all other air contaminant sources that are also vented to this control equipment: _____
List all egress point IDs (from Table 7-A) associated with this control equipment: _____

6. **Process Flow Diagram** - Attach a Process Flow Diagram to this application for this air contaminant source. See the application instructions for additional information.

7. **Modeling information: (Note: items in bold in Tables 7-A and/or 7-B, as applicable, are required even if the tables do not otherwise need to be completed. If applicable, all information is required.)** An air quality modeling analysis is required for PTIs and PTIOs for new installations or modifications, as defined in OAC rule 3745-31-01, where either the increase of toxic air contaminants from any air contaminant source or the increase of any other pollutant for all air contaminant sources combined exceed a threshold listed below. This analysis is to assure that the impact from the requested project will not exceed Ohio's Acceptable Incremental Impacts for criteria pollutants and/or Maximum Allowable Ground Level Concentrations (MAGLC) for toxic air contaminants. (See Ohio EPA, DAPC's Engineering Guide #69 for more information.) Permit requests that would have unacceptable impacts cannot be approved as proposed. See the line-by-line PTI/PTIO instructions for additional information.

Complete Tables 7-A and 7-C for stack emissions egress points and/or Table 7-B and 7-C for fugitive emissions egress points below if the requested allowable annual emission rate for this PTI or PTIO exceeds any of the following:

- Particulate Emissions (PE/PM_{10}): 10 tons per year
- Sulfur Dioxide (SO2): 25 tons per year
- Nitrogen Oxides (NOx): 25 tons per year
- Carbon Monoxide (CO): 100 tons per year
- Lead (Pb): 0.6 ton per year
- Toxic Air Contaminants: 1 ton per year. Toxic air contaminants are identified in OAC rule 3745-114-01.

Complete Table 7-A below for each stack emissions egress point. An egress point is a point at which emissions from an air contaminant source are released into the ambient (outside) air. List each individual egress point on a separate pair of lines. In each case, use the dimensions of the tallest nearby (or attached) building, building segment or structure.

Table 7-A, Stack Egress Point Information

❶ **Company ID for the Egress Point**	Type Code*	Dimensions or Diameter	Height from the Ground (ft)	Temp. at Max. Operation (F)	Flow Rate at Max. Operation (ACFM)	Minimum Distance to Fence Line (ft)
Company Description for the Egress Point	Shape: round, square, rectangular	Cross Sectional Area	Base Elevation (ft)	Building Height (ft)	Building Width (ft)	Building Length (ft)

❷ **Company ID for the Egress Point**	Type Code*	Dimensions or Diameter	Height from the Ground (ft)	Temp. at Max. Operation (F)	Flow Rate at Max. Operation (ACFM)	Minimum Distance to Fence Line (ft)
Company Description for the Egress Point	Shape: round, square, rectangular	Cross Sectional Area	Base Elevation (ft)	Building Height (ft)	Building Width (ft)	Building Length (ft)

❸ **Company ID for the Egress Point**	Type Code*	Dimensions or Diameter	Height from the Ground (ft)	Temp. at Max. Operation (F)	Flow Rate at Max. Operation (ACFM)	Minimum Distance to Fence Line (ft)
Company Description for the Egress Point	Shape: round, square, rectangular	Cross Sectional Area	Base Elevation (ft)	Building Height (ft)	Building Width (ft)	Building Length (ft)

❹ **Company ID for the Egress Point**	Type Code*	Dimensions or Diameter	Height from the Ground (ft)	Temp. at Max. Operation (F)	Flow Rate at Max. Operation (ACFM)	Minimum Distance to Fence Line (ft)
Company Description for the Egress Point	Shape: round, square, rectangular	Cross Sectional Area	Base Elevation (ft)	Building Height (ft)	Building Width (ft)	Building Length (ft)

*Type codes for stack egress points:

A. vertical stack (unobstructed): There are no obstructions to upward flow in or on the stack such as a rain cap.
B. vertical stack (obstructed): There are obstructions to the upward flow, such as a rain cap, which prevents or inhibits the air flow in a vertical direction.
C. non-vertical stack: The stack directs the air flow in a direction which is not directly upward.

Complete Table 7-B below for each fugitive emissions egress point. List each individual egress point on a separate line. Refer to the description of the fugitive egress point types below the table for use in completing the type column of the table. For an air contaminant source with multiple fugitive emissions egress points, include only the primary egress points.

Table 7-B, Fugitive Egress Point Information			
❶ **Company ID or Name for the Egress Point**	Type* (check one) ☐ Area ☐ Volume	Area Source Dimensions (Length x Width, in feet)	Volume Source Dimensions (Height x Width, in feet)
Company Description for the Egress Point	Release Height (ft)	Exit Gas Temp. (only if in excess of 100° F) (° F)	Minimum Distance to the Fence Line (ft)

❷ **Company ID or Name for the Egress Point**	Type* (check one) ☐ Area ☐ Volume	Area Source Dimensions (Length x Width, in feet)	Volume Source Dimensions (Height x Width, in feet)
Company Description for the Egress Point	Release Height (ft)	Exit Gas Temp. (only if in excess of 100° F) (° F)	Minimum Distance to the Fence Line (ft)

❸ **Company ID or Name for the Egress Point**	Type* (check one) ☐ Area ☐ Volume	Area Source Dimensions (Length x Width, in feet)	Volume Source Dimensions (Height x Width, in feet)
Company Description for the Egress Point	Release Height (ft)	Exit Gas Temp. (only if in excess of 100° F) (° F)	Minimum Distance to the Fence Line (ft)

*Types for fugitive egress point:

Area: an open fugitive source characterized as a horizontal area (L x W) with a release height. For irregular surfaces such as storage piles, enter dimensions of an average cross section; release height is entered as half of the maximum pile height. For process sources such as crushers, use the process opening (e.g., area of crusher hopper opening) and ignore material handling and storage emissions points.

Volume: an unpowered vertical opening, such as a window or roof monitor, characterized as a vertical area (W x H) with a release height, measured at the midpoint of the opening. Multiple openings in a building may be averaged, if necessary.

Use the same Company Name or ID for the Egress Point in Table 7-C that was used in Table 7-A or 7-B. See the line-by-line PTI/PTIO instructions for additional information.

Table 7-C, Egress Point Location						
Company Name or ID for the Egress Point (as identified above)	Egress Point Latitude			Egress Point Longitude		
	deg	min	sec	deg	min	sec
	deg	min	sec	deg	min	sec
	deg	min	sec	deg	min	sec
	deg	min	sec	deg	min	sec
	deg	min	sec	deg	min	sec

8. Request for Enforceable Restrictions - As part of this permit application, do you wish to propose voluntary restrictions to limit emissions in order to avoid specific requirements listed below, (i.e., are you requesting state-only enforceable limits or state and federally enforceable limits to obtain synthetic minor status)?

☐ yes
☐ no
☐ not sure - please contact me to discuss whether this affects the facility.

If yes, why are you requesting enforceable restrictions? Check all that apply.

☐ a. to avoid being a major Title V source (see OAC rule 3745-77-01 and OAC rule 3745-31)
☐ b. to avoid being a major MACT source (see OAC rule 3745-31-01)
☐ c. to avoid being a major stationary source (see OAC rule 3745-31-01)
☐ d. to avoid being a major modification (see OAC rule 3745-31-01)
☐ e. to avoid an air dispersion modeling requirement (see Engineering Guide # 69)
☐ f. to avoid BAT requirements (see OAC rule 3745-31-05(A)(3)(b))
☐ g. to avoid another requirement. Describe: _____

If you checked a., b. or c., please attach a facility-wide potential to emit (PTE) analysis (for each pollutant) and synthetic minor strategy to this application. (See application instructions for definition of PTE.) If you checked d., please attach a net emission change analysis to this application. If you checked e., f. or g., please attach a description of the restrictions proposed and how compliance with those restrictions will be verified.

9. Continuous Emissions Monitoring – Does this air contaminant source utilize any continuous emissions monitoring (CEM) equipment for indicating or demonstrating compliance? This does not include continuous parametric monitoring systems.

☐ yes ☐ no

If yes, complete the following information.

Company Name or ID for the Egress Point _____

CEM Description_____

This CEM monitors (check all that apply):

9 Opacity 9 Flow 9 CO 9 NOx 9 SO_2 9 THC 9 HCl 9 HF 9 H_2S 9 TRS 9 CO_2 9 O_2 9 PM

10. **EAC Forms** - The appropriate Emissions Activity Category (EAC) form(s) must be completed and attached for each air contaminant source unless a general permit is being requested. At least one complete EAC form must be submitted for each air contaminant source for the application to be considered complete. Refer to the list attached to the application instructions. Please indicate which EAC form corresponds to this air contaminant source.

_____