

# CITY OF PHILADELPHIA DEPARTMENT OF PUBLIC HEALTH PUBLIC HEALTH SERVICES AIR MANAGEMENT SERVICES

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Title V	OP Number:	
Date:		

#### TITLE V OPERATING PERMIT APPLICATION

Section 1 - General Information							
1.1 Application Type							
Type of permit for which application is made: (Check one)							
☐ Initial							
Renewal Operating Permit No.							
☐ Application Revision - provide date of original Title V Applica	ation or OP No.:						
1.2 Plant Information							
Federal Tax Firm Name: ID/Plant ID:							
SIC Code: Plant Name:							
Description of SIC:							
UTM Zone: UTM North:	UTM East:						
Method of Obtaining UTM:							
1.3 Contact Information							
Name:	Title:						
Address:							
Telephone Number:							
Email:							
1.4 Certification of Truth, Accuracy and Completeness							
Note: This certification must be signed by a responsible official. Applications without a signed certification will be returned as 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.							
(Signed)	Date:						
Name (Typed):	Title:						

Section 2 - Applicable Requirements for the Entire Site							
Describe and cite all applicable requirements pertaining to the entire site.  Note: A Method of Compliance Worksheet (Addendum 1) must be completed for each requirement listed.							
For renewals, only list site Title V Operating Permit. right.	e level requirements not included in the current lf there are no changes, check the box to	ent					
Citation No.	Citation Limitation	Limitation Used					

#### **Section 3 - Site Inventory List**

Give a complete listing of all air pollution sources, control equipment, emission points and fuel material locations within this site.

For renewals, only list sources not included in current Title V Operating Permit, sources that need to be corrected in the current Title V operating permit or sources which are now subject to Compliance Assurance Monitoring (CAM) requirements of 40 CFR Part 64. Note: one (1) of the following sections (5, 6 or 7) of the application must be completed for each new source listed here.

Unit ID	Company Designation	Unit Type	CAM (✓)

Sec	tion 4 - Sou	rce Gro	oup (optional)				
4.1	.1 Source Group Definition						
	This section	applies	to new Title V Operating P	ermit applications only.			
	Define group group.	ps of sou	urce(s) that are subject to c	one or more applicable requiremen	ts that apply to all source(s) in the		
	Group No.	1		Unit ID (for source(s) in this g	roup)		
4.2	Applicable	Require	ements for Source Groups	s			
	For renewals, only list group level requirements not included in the current Title V Operating Permit. If there are no changes, check the box to the right.  No changes from current Title V Operating Permit.  Operating Permit.						
				ertaining to all source groups.			
G	Note: A Method of Compliance Worksheet (Addendum 1) must be completed for each requirement listed.  Group No. Citation No. Citation Limitation Limitation Used				each requirement listed.  Limitation Used		
	Toup No.		Citation No.	Citation Limitation	Lillitation osed		

Section 5 - Co	mbustion Oper	ational Inven	tory			
(Complete this s	ection for each co	mbustion sourc	e in this site. Dup	licate this section	as needed).	
For renewals, co	omplete this section	n if a new comb	oustion source is I	isted in Section 3	of this application	
5.1 General S	Source Information	n				
a. Unit ID:		b.	Company Desig	nation:		
	c. Plan Approval/Installation Permit or Operating Permit No.:					
d. Manufacture	er:		e. Model No.:			
f. Source Des	cription:					
g. Rated Heat	Input/Thruput:		h.	Installation Date	<b>)</b> :	
i. Exhaust Temperatur	i. Exhaust Temperature Units		. Exhaust % Moisture	k.Exhaust Flow Volume: AC		ACFM
<ul> <li>CAM Information</li> <li>Yes No</li> <li> Emissions unit uses a control device to achieve compliance.</li> <li> Potential precontrol emissions of applicable pollutant are at least 100 percent of the major source amount.</li> </ul>						
•	ust be completed					
	System Componer by the exhaust cor		onfigured:			
From Unit ID	Unit Description	To Unit ID	Unit Description	Percent Flow	Begin Date	End Date

5.4 Source Classification Code (SCC) Listing for Standard Operation							
Fuel/Mat	erial	Assoc	iated SC	C Ma	x Throughput Rat	e Firing	Sequence
5.5 Maximum	Fuel Physical C	:haracteri	istics				
	_						
_	nitations on Fuel	Physical (	Jharacter	ristics, see instr	uctions.		
SCC/Fuel E	Burned	FML	9	% Sulfur	% Ash	BTU	Content (Units)
*FML = Fuel Mate	rial Location					<u> </u>	
T WE = T del Wate	nai Location						
5.6 Limitation	s on Source Op	eration					
					rational hours and .3 of the application		ion on the
Maximum	amount of hours	of source	operation	n per year:			
Fuel/SCC	Hours/Day	Days/	Week	Days/Year	Hours/Year	Max Thruput	Units/Time
throughpu Maximum	t rate equal to or amount of hours	of source	n that stat	ted in Section 5	.3 of the application	n.	

5.7	Source Applic	able Requirements						
	Describe and cite all applicable requirements pertaining to this source.							
	Note: A Method of Compliance Worksheet (Addendum 1) must be completed for each requirement listed.							
	For renewals, only list source level requirements not included in the current Title V Operating Permit. If there are no changes, check the box to the right.  No changes from current Title V Operating Permit.							
	Fuel/SCC	Citation No.	Citation Limitation	Limitation Used				

Se	Section 6 - Incinerator Operational Inventory						
(Co	mplete this s	ection for each inc	cinerator at the sit	e. Duplicate this	section as needed	d).	
For	renewals, co	omplete this section	n if a new inciner	ator source is liste	ed in Section 3 of t	his application.	
6.1	General S	ource Information	on				
a.	Unit ID:		b.	Company Design	nation:		
c.	Plan Approv	al or Operating Pe	ermit No.:				
d.	Manufacture	er:		e. Model No.:			
f.	Source Des	cription:					
g.	Rated Heat	Input/Thruput:		h.	Installation Date	e:	
i.	Exhaust Temperature	e Uni		Exhaust 6 Moisture	k. Exhaust Flow Volume:		ACFM
l.	Incin. Capac	city:	Lbs/Hr m	. Primary Burn	er Heat Input:	Units	
n.	Exhaust % (	CO <sub>2</sub> :	0.	Secondary B	urner Heat Input:	Units	
p.	Incinerator (	Class:					
q.	Waste Type	:		r.	Waste BTU/Lb:		
6.2	CAM Info	rmation					
Yes	s No						
				•		ions limitations or 100 percent of the	
		amount					
(Ac	(Addendum 3 must be completed if both boxes are checked "Yes")						
6.3	6.3 Exhaust System Components  Explain how the exhaust components are configured:						
		Unit		Unit			
Fr	om Unit ID	Description	To Unit ID	Description	Percent Flow	Begin Date	End Date

.4 Source Classification				
Fuel	Associa	ted SCC	Max Throughput Rate	Firing Sequence
.5 Maximum Fuel Physi	ical Characterist	ics		
If taking limitations on	Fuel Physical Ch	aracteristics, see in	structions.	
Maximum amount of h				
			2/ 4 4	
SCC/Fuel Burned	FML	% Sulfur	% Ash	BTU Content (Unit
	1			

<sup>\*</sup>FML = Fuel Material Location

#### 6.6 Limitations on Source Operation

Complete this section if you are requesting a limitation on operational hours and/or a permit limitation on the throughput rate equal to or lower than that stated in Section 6.3 of this application.

Fuel/Waste	Hours/Day	Days/Week	Days/Year	Hours/Year	Max Thruput	Units/Time

6.7	Source Applic	able Requirements						
	Describe and cite all applicable requirements pertaining to this source.							
	Note: A Method of Compliance Worksheet (Addendum 1) must be completed for each requirement listed.							
	For renewals, only list source level requirements not included in the current Title V Operating Permit. If there are no changes, check the box to the right.  No changes from current Title V Operating Permit.							
ı	Fuel/Waste	Citation No.	Citation Limitation	Limitation Used				

Section	Section 7 - Process Operational Inventory								
(Complet	(Complete this section for each process at this site. Duplicate this section as needed).								
For renev	For renewals, complete this section if a new process is listed in Section 3 of this application.								
7.1 Ge	7.1 General Source Information								
a. Unit l	D:	b.	Company Desig	nation:					
c. Plan	Approval or Operating	Permit No.:							
d. Manı	facturer:		e. Model No.:						
f. Sour	ce Description:								
g. Rate	d Heat Input/Thruput:		h.	Installation Date	e:				
i. Exha Temp			Exhaust % Moisture	k. Exhaust Flow Volume:		ACFM			
Yes No									
	naust System Compo		ifigured:						
From U	Unit Description	To Unit ID	Unit Description	Percent Flow	Begin Date	End Date			

7.4 Source Cla	7.4 Source Classification Code (SCC) Listing for Standard Operation								
Fuel/Mate	rial	Associated SCC	Max Throughput Rate	Firing Sequence					
			•						

#### 7.5 Maximum Fuel Physical Characteristics

If taking limitations on Fuel Physical Characteristics, see instructions.

SCC/Fuel Burned	FML	% Sulfur	% Ash	BTU Content (Units)

<sup>\*</sup>FML = Fuel Material Location

#### 7.6 Limitations on Source Operation

Complete this section if you are requesting a limitation on operational hours and/or a permit limitation on the throughput rate equal to or lower than that stated in Section 7.3 of this application.

Fuel	Hours/Day	Days/Week	Days/Year	Hours/Year	Max Thruput	Units/Time

7.7	Source Applic	able Requirements							
	Describe and cite all applicable requirements pertaining to this source.								
	Note: A Method of Compliance Worksheet (Addendum 1) must be completed for each requirement listed.								
	For renewals, only list source level requirements not included in the current Title V Operating Permit. If there are no changes, check the box to the right.								
F	uel/Product	Citation No.	Citation Limitation	Limitation Used					

7.8	Raw Mate	erials	
	List all of regulate e		extent that this information is needed to determine or
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7.9	Processi	ng Steps	
	To the ext	tent that this information is needed to determine or rials for each step utilized to complete the materia	r regulate emissions, list all of the processing steps and l or product.
	Step	Description	Raw Materials
7.10	Request	for Confidentiality	
		quest that the information on this page be conside	ared kept confidential?
	Do you re		red kept confidential?
	If yes, inc	lude a justification for confidentiality that meets the	requirements of 25 Pa. Code§ 127.411(d).
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	-			ncluded i	in the current litt	e V Operating Permit.	
8.1	General Control	Device In	nformation				
a.	Unit ID:			b. Co	mpany Designati	on:	
C.	Used by Source(s):						
d.	Туре:						
e.	Pressure Drop in H	<sub>2</sub> 0:		f.	Capture Efficie	ency:	
g.	Scrubber Flow Rate	e (GPM):					
h.	Manufacturer:			i.	Model No.:		
j.	Installation Date:						
k.	Control Device Effic	ciency Est	imates for this	control c	levice:		
	Pollutant or CAS	No.	Estimate	ed Cont	rol Efficiency	Basis for E	fficiency Estimate
8.2	Control Device E	Efficiencie	es for Hazardo	ous Air F	Pollutants	1	
	Unit ID No.	Pollu	tant Name		CAS No.	Estimate Control Efficiency	Basis for Estimate

Section 8 - Control Device Information (duplicate this section as needed)

### Section 9 - Stack/Flue Information (duplicate this section as needed) For renewals, list new stack/flue information not specified in the current Title V Operating Permit. 9.1 General Stack/Vent Information b. Company Designation: a. Unit ID: Discharge Type: Diameter (ft): Height (ft): Base Elevation (ft): d. Exhaust Velocity (ft/sec): Exhaust Temperature: Exhaust % Moisture: Exhaust Volume: ACFM Exhaust Volume: SCFM Distance to Nearest Property Line (ft): h. Weather Cap?: □ No Used by Sources: i. UTM Zone: UTM North: UTM East: k. Method of Obtaining UTM: a. Unit ID: b. Company Designation: c. Discharge Type: Diameter (ft): Base Elevation (ft): e. Exhaust Temperature: Exhaust % Moisture: Exhaust Velocity (ft/sec): Exhaust Volume: ACFM Exhaust Volume: SCFM Distance to Nearest Property Line (ft): h. Weather Cap?: □ No Used by Sources: i. UTM East: UTM Zone: UTM North: k. Method of Obtaining UTM:

## Section 10 - Fuel Material Location (FML) Information (optional) For renewals, list new fuel material location information not specified in the current Title V Operating Permit. 10.1 Fuel Material Location Information b. Name: \_\_\_ a. FML ID No.: c. Capacity: Units: d. Fuel: e. Maximum Fuel Characteristics: If fuel is coal, what is the moisture content? % Sulfur: BTU Content: Used by Source(s): b. Name: a. FML ID No.: c. Capacity: \_\_\_\_\_ Units: \_\_\_\_ d. Fuel: e. Maximum Fuel Characteristics: If fuel is coal, what is the moisture content? % Sulfur: BTU Content: Units: % Ash Used by Source(s): b. Name: a. FML ID No.: \_\_\_\_\_Units: d. Fuel: e. Maximum Fuel Characteristics: If fuel is coal, what is the moisture content? Units: % Ash % Sulfur: BTU Content: f. Used by Source(s):

Section	on 11 - Compliance Plan for the Facility			
			Yes	No
11.1	Will your facility be in compliance with all applicable time of permit issuance and continue to comply with during the permit duration?			
11.2	Will your facility be in compliance with all applic presently scheduled to take effect during the term of the			
11.3	Will these requirements be met by the regulatory requi	red dates?		
	If you checked "No" in Part 11.1, 11.2 or 11.3, answer	the following question	s:	
11.4	Identify applicable requirement(s) for which compliance	e is not or will not be a	chieved:	
	Source ID No.		Citation No.	
11.4.2	Briefly describe how compliance with this/these applica	able requirement(s) wi	Il be achieved:	
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_				
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	Date	Action/Milestone	
4. Indicate the s	submittal frequency I for the progress re	eport (s):	
5. Starting date	for the submittal of the progress repor	t(s):	
-			

Section 12 - Compliance Certification
12.1 Schedule for Compliance Certification Submission
a. Frequency of Submittal:
b. Schedule specified in current Title V Operating Permit or proposed starting date:
12.2 Monitoring Compliance
Is the site identified in this application in compliance with all applicable requirements and compliance certification requirements:
☐ Yes ☐ No
If "No", describe which requirements are not being met:
12.3 Certification of Compliance
Subject to the penalties of Title 18 Pa. C.S. Section 4904 and 35 P.S. Section 4009(b)(2), I certify that I have the authority to submit this Permit Application on behalf of the applicant herein and that based on information and belief formed after reasonable inquiry, the statements and information contained in this application is correct to the best of my knowledge.
(Signed) Date
Name (Typed)
Title: