Moats, Nikki B <nikki.b.moats@wv.gov>

Pre-DRAFT Version of the Title V Permit for Specialty Products US, LLC, Institute Plant

2 messages

McCumbers, Carrie <carrie.mccumbers@wv.gov> Thu, Nov 30, 2023 at 12:25 PM
To: "Supplee, Gwendolyn" <supplee.gwendolyn@epa.gov>
Cc: Nikki B Moats <Nikki.B.Moats@wv.gov>

Hi Gwen,

Attached is the pre-DRAFT version of the Title V Permit for Specialty Products US, LLC, Institute Plant, R30-03900682-2024. I have also attached a pre-DRAFT Fact Sheet. I would like for you to review these pre-DRAFT documents and provide comments and suggestions prior to DAQ sending the Draft Title V Permit out for public comment.

Thanks,
Carrie

2 attachments

Pre-DRAFT Permit R30-03900682-2024 to EPA.docx
316K

Pre-DRAFT FactSheet R30-03900682-2024 to EPA.doc
128K

Supplee, Gwendolyn <Supplee.Gwendolyn@epa.gov> Tue, Dec 12, 2023 at 3:04 PM
To: "McCumbers, Carrie" <carrie.mccumbers@wv.gov>
Cc: Nikki B Moats <Nikki.B.Moats@wv.gov>

Hi Carrie –

Sorry this has taken me a while to get back to you. Thanks for sharing this pre-draft permit with me for purposes of engagement. I don't have any questions that I would like to discuss with WVDEP. Please send EPA a copy of the draft permit when it is out for public comment.

Please feel free to give me a call if you need to discuss anything prior to the public comment period.

Many thanks,

-gwen

Gwendolyn K. Supplee (She, her, hers)

Senior Permit Specialist/Life Scientist

U.S. Environmental Protection Agency, Region 3

Permits Branch (3AD10)

Air & Radiation Division

Phone 215-814-2763

Email supplee.gwendolyn@epa.gov

From: McCumbers, Carrie <carrie.mccumbers@wv.gov>
Sent: Thursday, November 30, 2023 12:26 PM
To: Supplee, Gwendolyn <Supplee.Gwendolyn@epa.gov>
Cc: Nikki B Moats <Nikki.B.Moats@wv.gov>
Subject: Pre-DRAFT Version of the Title V Permit for Specialty Products US, LLC, Institute Plant

[Quoted text hidden]

Moats, Nikki B <nikki.b.moats@wv.gov>

Specialty Products US, LLC Title V Application Update

Michael Fisher <MichaelRay.Fisher@iff.com> Fri, Nov 17, 2023 at 9:52 AM
To: "DEPAirQualityPermitting@wv.gov" <DEPAirQualityPermitting@wv.gov>
Cc: Nikki B Moats <nikki.b.moats@wv.gov>, "michael.egnor@wv.gov" <michael.egnor@wv.gov>, Rick Thomas <Richard.B.Thomas@iff.com>, Wesley Mullins <Wesley.D.Mullins@iff.com>, Thomas Webster <Thomas.S.Webster-Iii@iff.com>

Internal

Please see attached for the requested update to the Title V PTE table.

Feel free to reach out with any questions.

MIKE FISHER
EHS Manager

michaelray.fisher@iff.com

T 304.451.7617

iff.com

PO Box 1006

Institute, WV 25112

LinkedIn | Twitter | Facebook | YouTube | Instagram

Internal

Specialty Products US, LLC Title V Renewal Section 3 Update.pdf
174K

Specialty Products US, LLC
PO Box 1006
Institute, WV 25112

November 17, 2023

Email Delivered

Laura M. Crowder
Director
WV Department of Environmental Protection
Division of Air Quality
601 57th Street SE
Charleston, WV 23504

Re: Title V Renewal Application R30-03900682-2017

Director Crowder,

Enclosed is the updated Section 3 of the Title V Renewal General Permit Application for Specialty Products US, LLC's Title V operations permit R30-03900682-2017 as requested. Specialty Products US, LLC is submitting this updated Section 3 to include requested Quality Control Lab emissions that are reported as part of the facility's annual emissions. This is intended to replace Section 3 in the renewal application submitted June 8, 2022.

If you should have any questions, or need additional information please contact Mike Fisher at (304) 451-7617 or by email at michaelray.fisher@iff.com.

Sincerely,

Rick Thomas
Plant Manager
Specialty Products US, LLC

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year]	
Criteria Pollutants	Potential Emissions (2021 Actual)
Carbon Monoxide (CO)	8.94 (5.46)
Nitrogen Oxides (NO_X)	1.64 (1.12)
Lead (Pb)	0 (0)
Particulate Matter ($PM_{2.5}$)[1]	0.15 (0.048)
Particulate Matter (PM_{10})[1]	0.15 (0.048)
Total Particulate Matter (TSP)	0.15 (0.048)
Sulfur Dioxide (SO_2)	1.05 (0.001)
Volatile Organic Compounds (VOC)	620 (74.61)
Hazardous Air Pollutants[2]	Potential Emissions
Acetonitrile	0.1 (0.014)
Ethylene Oxide	0.7 (0.495)
Propylene Oxide	0.2 (0.079)
Hexanes	0.0202 (0.00002)
Methanol	0.0017 (0.0001)
Regulated Pollutants other than Criteria and HAP	Potential Emissions

[1]$PM_{2.5}$ and PM_{10} are components of TSP.
[2]For HAPs that are also considered PM or VOCs, emissions should be included in both the HAPs section and the Criteria Pollutants section.

Moats, Nikki B <nikki.b.moats@wv.gov>

Information for R30-03900682-2023

4 messages

Moats, Nikki B <nikki.b.moats@wv.gov> Tue, Oct 10, 2023 at 1:54 PM
To: Michael Fisher <michaelray.fisher@iff.com>

Hello Mike,

The facility is now reporting Methanol and Hexane emissions on SLEIS, so I need a PTE of those to go into the permit application. Updating application section 3.0 with new PTEs and sending it to me as a pdf is the ideal way to do this, since I can then just send it over to our secretary to add to the file.

Sincerely,
Nikki B. Moats
Title V Permit Writer
304-926-0499 ext 41282 or 304-414-1282

Michael Fisher <MichaelRay.Fisher@iff.com> Tue, Oct 10, 2023 at 11:39 PM
To: "Moats, Nikki B" <nikki.b.moats@wv.gov>
Cc: Wesley Mullins <Wesley.D.Mullins@iff.com>

Internal

Niki,

The bulk of the Methanol emissions came from the Glutaraldehyde process that was sold to Lanxess midway through 2022. Upon sale the Glutaraldehyde air permits were transferred to Lanxess. Our emissions were reported to SLIES together while they were a part of Specialty Products US, LLC. Once apart of Lanxess the Glutaraldehyde emissions were reported to SLEIS separate.

For POLYOX ™ Methanol and Hexanes are used in the QC lab but not in the manufacturing process. These were reported to give a full picture of emissions at the site. Do you still need us to have a PTE for these chemicals?

MIKE FISHER
EHS Manager

michaelray.fisher@iff.com

T 304.451.7617

iff.com

PO Box 1006

Institute, WV 25112

LinkedIn | Twitter | Facebook | YouTube | Instagram

Internal

From: Moats, Nikki B <nikki.b.moats@wv.gov>
Sent: Tuesday, October 10, 2023 1:55 PM
To: Michael Fisher <MichaelRay.Fisher@IFF.com>
Subject: Information for R30-03900682-2023

External Warning: This email is from nikki.b.moats@wv.gov - if this email address is unfamiliar, do not click links and do report via the Suspicious Email button in Outlook.

[Quoted text hidden]

Moats, Nikki B <nikki.b.moats@wv.gov> Wed, Oct 11, 2023 at 7:23 AM
To: Michael Fisher <MichaelRay.Fisher@iff.com>

Mike,

I would recommend updating the application with their PTEs so that the Fact Sheet and application convey a complete picture of what was given in the 2022 report.

Even if the PTE is just simply something like 0.01 or <0.01. We need to have all HAPs that appear in the SLEIS reports in the application so that there is consistency between the two.

Thanks,
Nikki
[Quoted text hidden]

Moats, Nikki B <nikki.b.moats@wv.gov> Mon, Nov 13, 2023 at 1:54 PM
To: Michael Fisher <MichaelRay.Fisher@iff.com>

Mike,

I just got news from Mike Egnor about the situation that's currently going on, you can disregard my phone call until all of that gets sorted.

Thanks,
Nikki
[Quoted text hidden]

Division of Air Quality Permit Application Submittal

Please find attached a permit application for : Specialty Products US LLC - Institute - POLYOX™
[Company Name; Facility Location]

- DAQ Facility ID (for existing facilities only): 039-00682
- Current 45CSR13 and 45CSR30 (Title V) permits associated with this process (for existing facilities only): R13-3404; R30-03900005-2017

- Type of NSR Application (check all that apply):
  - ☐ Construction
  - ☐ Modification
  - ☐ Class I Administrative Update
  - ☐ Class II Administrative Update
  - ☐ Relocation
  - ☐ Temporary
  - ☐ Permit Determination

- Type of 45CSR30 (TITLE V) Application:
  - ☐ Title V Initial
  - ☑ Title V Renewal
  - ☐ Administrative Amendment**
  - ☐ Minor Modification**
  - ☐ Significant Modification**
  - ☐ Off Permit Change

If **the box above is checked, include the Title V revision information **as** ATTACHMENT S **to the combined** NSR/Title V **application.**

- Payment Type:
  - ☑ Credit Card (Instructions to pay by credit card will be sent in the Application Status email.)
  - ☐ Check (Make checks payable to: WVDEP – Division of Air Quality)
    Mail checks to:
    WVDEP – DAQ – Permitting
    Attn: NSR Permitting Secretary
    601 57th Street, SE
    Charleston, WV 25304

Please wait until DAQ emails you the Facility ID Number and Permit Application Number. Please add these identifiers to your check or cover letter with your check.

- If the permit writer has any questions, please contact (all that apply):
  - ☐ Responsible Official/Authorized Representative
    - Name:
    - Email:
    - Phone Number:
  - ☑ Company Contact
    - Name: Mike Fisher
    - Email: michaelray.fisher@iff.com
    - Phone Number: (304) 451-7617
  - ☐ Consultant
    - Name:
    - Email:
    - Phone Number:

Specialty Products US, LLC
PO Box 1006
Institute, WV 25112

June 8, 2022

Email Delivered

Laura M. Crowder
Director
WV Department of Environmental Protection
Division of Air Quality
601 57th Street SE
Charleston, WV 23504

Re: Title V Renewal Application R30-03900682-2017

Director Crowder,

Enclosed is the renewal application for Specialty Products US, LLC's Title V operations permit R30-03900682-2017. Specialty Products US, LLC is submitting this renewal application within the deadline specified by WVDEP's application instructions.

Specialty Products US, LLC's operating permit R30-03900682-2017 expires on December 19, 2022, requiring a permit renewal application on June 19, 2022.

This renewal application consists of the following:

- The renewal application containing redacted information emailed on June 8, 2022.
- The renewal application containing CBI was mailed on June 8, 2022.

If you should have any questions, or need additional information please contact Mike Fisher at (304) 451-7617 or by email at michaelray.fisher@iff.com.

Sincerely,

Rick Thomas
Plant Manager
Specialty Products US, LLC

TITLE V PERMIT APPLICATION CHECKLIST
FOR ADMINISTRATIVE COMPLETENESS

A complete application is demonstrated when all of the information required below is properly prepared, completed and attached. The items listed below are required information which must be submitted with a Title V permit application. Any submittal will be considered incomplete if the required information is not included.*

☑	A signed copy of the application ("Certification" page must be signed and dated by a Responsible Official as defined in 45CSR30)
☑	*Table of Contents (needs to be included but not for administrative completeness)
☑	Facility information
☑	Description of process and products, including NAICS and SIC codes, and including alternative operating scenarios
☑	Area map showing plant location
☑	Plot plan showing buildings and process areas
☑	Process flow diagram(s), showing all emission units, control equipment, emission points, and their relationships
☐	Identification of all applicable requirements with a description of the compliance status, the methods used for demonstrating compliance, and a Schedule of Compliance Form (ATTACHMENT F) for all requirements for which the source is not in compliance
☑	Listing of all active permits and consent orders (if applicable)
☑	Facility-wide emissions summary
☑	Identification of Insignificant Activities
☑	ATTACHMENT D – Title V Equipment Table completed for all emission units at the facility except those designated as insignificant activities
☑	ATTACHMENT E – Emission Unit Form completed for each emission unit listed in the Title V Equipment Table (ATTACHMENT D) and a Schedule of Compliance Form (ATTACHMENT F) for all requirements for which the emission unit is not in compliance
☑	ATTACHMENT G – Air Pollution Control Device Form completed for each control device listed in the Title V Equipment Table (ATTACHMENT D)
☐	ATTACHMENT H – Compliance Assurance Monitoring (CAM) Plan Form completed for each control device for which the "Is the device subject to CAM?" question is answered "Yes" on the Air Pollution Control Device Form (ATTACHMENT G)
☑	General Application Forms signed by a Responsible Official
☑	Confidential Information submitted in accordance with 45CSR31

Specialty Products US, LLC

Route 25
Institute, WV 25112

Title V Air Permit Renewal

Submitted to

West Virginia Division of Air Quality

June 2022

WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION

DIVISION OF AIR QUALITY

601 57th Street SE

Charleston, WV 25304

Phone: (304) 926-0475

www.dep.wv.gov/daq

INITIAL/RENEWAL TITLE V PERMIT APPLICATION - GENERAL FORMS

Section 1: General Information

1. **Name of Applicant (As registered with the WV Secretary of State's Office):**
Specialty Products US, LLC

2. Facility Name or Location:
Institute Facility - POLYOX™ Plant

3. DAQ Plant ID No.:
039-00682

4. Federal Employer ID No. (FEIN):
83-1195675

5. **Permit Application Type:**

☐ Initial Permit — When did operations commence?

☑ Permit Renewal — What is the expiration date of the existing permit? 12/19/22

☐ Update to Initial/Renewal Permit Application

6. Type of Business Entity:

☐ Corporation ☐ Governmental Agency ☑ LLC
☐ Partnership ☐ Limited Partnership

7. Is the Applicant the:

☐ Owner ☐ Operator ☑ Both

If the Applicant is not both the owner and operator, please provide the name and address of the other party.

8. Number of onsite employees:
Approximately 60

9. Governmental Code:

☑ Privately owned and operated; 0
☐ Federally owned and operated; 1
☐ State government owned and operated; 2
☐ County government owned and operated; 3
☐ Municipality government owned and operated; 4
☐ District government owned and operated; 5

10. Business Confidentiality Claims

Does this application include confidential information (per 45CSR31)? ☑ Yes ☐ No

If yes, identify each segment of information on each page that is submitted as confidential, and provide justification for each segment claimed confidential, including the criteria under 45CSR§31-4.1, and in accordance with the DAQ's *"PRECAUTIONARY NOTICE-CLAIMS OF CONFIDENTIALITY"* guidance.

11. Mailing Address		
Street or P.O. Box: P.O. Box 1006		
City: Institute	**State:** WV	**Zip:** 25112
Telephone Number: 304-451-7575	**Fax Number:** N/A	

12. Facility Location (Physical Address)		
Street: Route 25	**City:** Institute	**County:** Kanawha
UTM Easting: 432.189 km	**UTM Northing:** 4248.754 km	**Zone:** ☑ 17 or ☐ 18
Directions: From Charleston take I-64 west toward Huntington. Turn right at Institute Exit. Proceed west approximately 0.5 miles on Route 25. The facility is located on the left		
Portable Source? ☐ Yes ☑ No		
Is facility located within a nonattainment area? ☐ Yes ☑ No		**If yes, for what air pollutants?**
Is facility located within 50 miles of another state? ☑ Yes ☐ No		**If yes, name the affected state(s).** Ohio and Kentucky
Is facility located within 100 km of a Class I Area[1]? ☐ Yes ☑ No **If no, do emissions impact a Class I Area[1]?** ☐ Yes ☑ No		**If yes, name the area(s).**

[1] *Class I areas include Dolly Sods and Otter Creek Wilderness Areas in West Virginia, and Shenandoah National Park and James River Face Wilderness Area in Virginia.*

13. Contact Information		
Responsible Official: Richard Thomas		**Title:** Site Manager
Street or P.O. Box: P.O. Box 1006		
City: Institute	**State:** WV	**Zip:** 25112
Telephone Number: 304-451-7575	**Cell Number:** 304-542-7169	
E-mail address: richard.b.thomas@iff.com		
Environmental Contact: Mike Fisher		**Title:** EHS Manager
Street or P.O. Box: P.O. Box 1006		
City: Institute	**State:** WV	**Zip:** 25112
Telephone Number: 304-451-7617	**Cell Number:**	
E-mail address: michaelray.fisher@iff.com		
Application Preparer: Mary Ann Henderson		**Title:** Consultant
Company: Johnston EHS		
Street or P.O. Box: 37435 State Route 7		
City: Sardis	**State:** Ohio	**Zip:** 43946
Telephone Number: 304-266-6640	**Cell Number:**	
E-mail address: ma.henderson@comcast.net		

14. Facility Description

List all processes, products, NAICS and SIC codes for normal operation, in order of priority. Also list any process, products, NAICS and SIC codes associated with any alternative operating scenarios if different from those listed for normal operation.

Process	Products	NAICS	SIC
POLYOX™ Plant	Water-soluble polymer used in pharmaceuticals,	325199	2869
	personal care products, adhesives and other markets		

Provide a general description of operations.

POLYOX™ is a water-soluble polymer used in pharmaceuticals, personal care products, adhesive, and flocculation markets. The POLYOX™ unit manufactures polyethylene oxide (PEO) by polymerizing ethylene oxide. It is manufactured by reacting various chemicals to form a solid in the presence of a diluent. The POLYOX™ solids are packaged for worldwide distribution. The POLYOX™ Plant uses a flare, a vent scrubber, and a baghouses to control emissions

Changes that have occurred since the last Title V permit issuance:
V412 E/W was replaced in October 2017 and renamed V411E/413W.
Emission Point 230HH is no longer venting to the air and is now routed to Flare A221
Updated replacement dates for L6DB Packaging System, D-320A Hopper #1, and Tank 4930. These dates were prior to last Title V renewal.

15. Provide an **Area Map** showing plant location as **ATTACHMENT A**.

16. Provide a **Plot Plan(s)**, e.g. scaled map(s) and/or sketch(es) showing the location of the property on which the stationary source(s) is located as **ATTACHMENT B**. For instructions, refer to "Plot Plan - Guidelines."

17. Provide a detailed **Process Flow Diagram(s)** showing each process or emissions unit as **ATTACHMENT C**. Process Flow Diagrams should show all emission units, control equipment, emission points, and their relationships.

Section 2: Applicable Requirements

18. Applicable Requirements Summary	
Instructions: Mark all applicable requirements.	
☑ SIP	☐ FIP
☑ Minor source NSR (45CSR13)	☐ PSD (45CSR14)
☑ NESHAP (45CSR34)	☐ Nonattainment NSR (45CSR19)
☐ Section 111 NSPS	☐ Section 112(d) MACT standards
☐ Section 112(g) Case-by-case MACT	☑ 112(r) RMP
☐ Section 112(i) Early reduction of HAP	☐ Consumer/commercial prod. reqts., section 183(e)
☐ Section 129 Standards/Reqts.	☐ Stratospheric ozone (Title VI)
☐ Tank vessel reqt., section 183(f)	☐ Emissions cap 45CSR§30-2.6.1
☐ NAAQS, increments or visibility (temp. sources)	☑ 45CSR27 State enforceable only rule
☑ 45CSR4 State enforceable only rule	☐ Acid Rain (Title IV, 45CSR33)
☐ Emissions Trading and Banking (45CSR28)	☐ **C**ompliance **A**ssurance **M**onitoring (40CFR64)
☐ Cross-State Air Pollution Rule (45CSR43)	

19. Non Applicability Determinations
List all requirements which the source has determined not applicable and for which a permit shield is requested. The listing shall also include the rule citation and the reason why the shield applies.
The non-applicable requirements are listed on the following page
☑ Permit Shield

Specialty Chemicals – Institute
POLYOX™ Plant

SECTION 19: Non Applicability Determinations

From Current Title V Permit:

3.7.2. The following requirements specifically identified are not applicable to the source based on the determinations set forth below. The permit shield shall apply to the following requirements provided the conditions of the determinations are met.

a. 40 C.F.R. 63, Subpart EEEE – National Emission Standards for Hazardous Air Pollutants: Organic Liquid Distribution (Non-Gasoline)." The POLYOX™ plant is not subject to the requirements of 40 C.F.R. 63 Subpart EEEE because the equipment in the affected source is already subject to another 40 CFR 63 national emission standard for hazardous air pollutants (NESHAP) --40 CFR Part 63 Subpart PPP).

b. 40 C.F.R. 60, Subpart Kb – "Standards of Performance for Volatile Organic Liquid Storage Vessels (Including Petroleum Liquid Storage Vessels) for Which Construction, Reconstruction, or Modification Commenced After July 23, 1984. All tanks in the Polyox WSR plant are not subject to Kb because they were built before July 23, 1984 and/or have a capacity less than 75 m3

19. Non Applicability Determinations *(Continued)* - *Attach additional pages as necessary.*

List all requirements which the source has determined not applicable and for which a permit shield is requested. The listing shall also include the rule citation and the reason why the shield applies.

☑ Permit Shield

20. Facility-Wide Applicable Requirements

List all facility-wide applicable requirements. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*).

See next pages for list of applicable requirements taken from the current Title V Permit

☑ Permit Shield

For all facility-wide applicable requirements listed above, provide monitoring/testing / recordkeeping / reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number and/or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

See next pages for list of applicable requirements taken from the current Title V Permit

Are you in compliance with all facility-wide applicable requirements? ☑ Yes ☐ No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

20. Facility-Wide Applicable Requirements *(Continued)* - *Attach additional pages as necessary.*

List all facility-wide applicable requirements. For each applicable requirement, include the rule citation and/or permit with the condition number.

☑ Permit Shield

For all facility-wide applicable requirements listed above, provide monitoring/testing/recordkeeping/ reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number and/or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all facility-wide applicable requirements? ☑ Yes ☐ No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

Specialty Chemicals – Institute
POLYOX™ Plant

SECTION 20: Applicable Requirements

From Current Title V Permit:

3.1.1 Open burning. The open burning of refuse by any person is prohibited except as noted in 45CSR§6-3.1. [45CSR§6-3.1.]

3.1.2. **Open burning exemptions.** The exemptions listed in 45CSR§6-3.1 are subject to the following stipulation: Upon notification by the Secretary, no person shall cause or allow any form of open burning during existing or predicted periods of atmospheric stagnation. Notification shall be made by such means as the Secretary may deem necessary and feasible. **[45CSR§6-3.2.]**

3.1.3. **Asbestos.** The permittee is responsible for thoroughly inspecting the facility, or part of the facility, prior to commencement of demolition or renovation for the presence of asbestos and complying with 40 C.F.R. § 61.145, 40 C.F.R. § 61.148, and 40 C.F.R. § 61.150. The permittee, owner, or operator must notify the Secretary at least ten (10) working days prior to the commencement of any asbestos removal on the forms prescribed by the Secretary if the permittee is subject to the notification requirements of 40 C.F.R. § 61.145(b)(3)(i). The USEPA, the Division of Waste Management and the Bureau for Public Health - Environmental Health require a copy of this notice to be sent to them. **[40 C.F.R. §61.145(b) and 45CSR34]**

3.1.4 Odor. No person shall cause, suffer, allow or permit the discharge of air pollutants which cause or contribute to an objectionable odor at any location occupied by the public.
[45CSR§4-3.1 State-Enforceable only.]

3.1.5. Standby plan for reducing emissions. When requested by the Secretary, the permittee shall prepare standby plans for reducing the emissions of air pollutants in accordance with the objectives set forth in Tables I, II, and III of 45CSR11.
[45CSR§11-5.2]

3.1.6 Emission inventory. The permittee is responsible for submitting, on an annual basis, an emission inventory in accordance with the submittal requirements of the Division of Air Quality.
[W.Va. Code § 22-5-4(a)(14)]

3.1.7 Ozone-depleting substances. For those facilities performing maintenance, service, repair or disposal of appliances, the permittee shall comply with the standards for recycling and emissions reduction pursuant to 40 C.F.R. Part 82, Subpart F, except as provided for Motor Vehicle Air Conditioners (MVACs) in Subpart B:

a. Persons opening appliances for maintenance, service, repair, or disposal must comply with the prohibitions and required practices pursuant to 40 C.F.R. §§ 82.154 and 82.156.

b. Equipment used during the maintenance, service, repair, or disposal of appliances must comply with the standards for recycling and recovery equipment pursuant to 40 C.F.R. § 82.158.

c. Persons performing maintenance, service, repair, or disposal of appliances must be certified by an approved technician certification program pursuant to 40 C.F.R. § 82.161. **[40 C.F.R. 82, Subpart F –** *POLYOX™ Plant Industrial Refrigeration Equipment used R134A that is not covered by Subpart F provisions***]**

3.1.8. Risk Management Plan. This stationary source, as defined in 40 C.F.R. § 68.3, is subject to Part 68. This stationary source shall submit a risk management plan (RMP) by the date specified in 40 C.F.R. Part 68.10. This stationary source shall certify compliance with the requirements of Part 68 as part of the annual compliance certification as required by 40 C.F.R. Part 70 or 71. **[40 C.F.R. 68]**

3.1.9. The owner or operator of a plant shall maintain particulate matter control of the plant premises, and plants owned, leased or controlled access roads, by paving, application of asphalt, chemical dust suppressants or other suitable dust control measures. Good operating practices shall be implemented and when necessary particulate matter suppressants shall be applied in relation to stockpiling and general material handling to minimize particulate matter generation and atmospheric entrainment **[45CSR 7-5.2]**

Specialty Chemicals – Institute
POLYOX™ Plant

SECTION 20: Applicable Requirements - Monitoring

From Current Title V Permit:

There are no applicable monitoring requirements listed

Specialty Chemicals – Institute
POLYOX™ Plant

SECTION 20: Applicable Requirements - Testing

From Current Title V Permit:

3.3.1. **Stack testing.** As per provisions set forth in this permit or as otherwise required by the Secretary, in accordance with the West Virginia Code, underlying regulations, permits and orders, the permittee shall conduct test(s) to determine compliance with the emission limitations set forth in this permit and/or established or set forth in underlying documents. The Secretary, or his duly authorized representative, may at his option witness or conduct such test(s). Should the Secretary exercise his option to conduct such test(s), the operator shall provide all necessary sampling connections and sampling ports to be located in such manner as the Secretary may require, power for test equipment and the required safety equipment, such as scaffolding, railings and ladders, to comply with generally accepted good safety practices. Such tests shall be conducted in accordance with the methods and procedures set forth in this permit or as otherwise approved or specified by the Secretary in accordance with the following:

a. The Secretary may on a source-specific basis approve or specify additional testing or alternative testing to the test methods specified in the permit for demonstrating compliance with 40 C.F.R. Parts 60, 61, and 63, if applicable, in accordance with the Secretary's delegated authority and any established equivalency determination methods which are applicable.
b. The Secretary may on a source-specific basis approve or specify additional testing or alternative testing to the test methods specified in the permit for demonstrating compliance with applicable requirements which do not involve federal delegation. In specifying or approving such alternative testing to the test methods, the Secretary, to the extent possible, shall utilize the same equivalency criteria as would be used in approving such changes under Section 3.3.1.a. of this permit.
c. All periodic tests to determine mass emission limits from or air pollutant concentrations in discharge stacks and such other tests as specified in this permit shall be conducted in accordance with an approved test protocol. Unless previously approved, such protocols shall be submitted to the Secretary in writing at least thirty (30) days prior to any testing and shall contain the information set forth by the Secretary. In addition, the permittee shall notify the Secretary at least fifteen (15) days prior to any testing so the Secretary may have the opportunity to observe such tests. This notification shall include the actual date and time during which the test will be conducted and, if appropriate, verification on that the tests will fully conform to a referenced protocol previously approved by the Secretary
d. The permittee shall submit a report of the results of the stack test within 60 days of

completion of the test. The test report shall provide the information necessary to document the objectives of the test and to determine whether proper procedures were used to accomplish these objectives. The report shall include the following: the certification described in paragraph 3.5.1; a statement of compliance status, also signed by a responsible official; and, a summary of conditions which form the basis for the compliance status evaluation. The summary of conditions shall include the following:

1. The permit or rule evaluated, with the citation number and language.
2. The result of the test for each permit or rule condition.
3. A statement of compliance or non-compliance with each permit or rule condition

[WV Code §§ 22-5-4(a)(14-15) and 45CSR13]

Specialty Chemicals – Institute
POLYOX™ Plant

SECTION 20: Applicable Requirements - Recordkeeping

From Current Title V Permit:

3.4.1. Monitoring information. The permittee shall keep records of monitoring information that include the following:

a. The date, place as defined in this permit and time of sampling or measurements;
b. The date(s) analyses were performed;
c. The company or entity that performed the analyses;
d. The analytical techniques or methods used;
e. The results of the analyses; and
f. The operating conditions existing at the time of sampling or measurement.

[45CSR§30-5.1.c.2.A.; 45CSR13, R13-3404]

3.4.2. Retention of records. The permittee shall retain records of all required monitoring data and support information for a period of at least five (5) years from the date of monitoring sample, measurement, report, application, or record creation date. Support information includes all calibration and maintenance records and all original strip-chart recordings for continuous monitoring instrumentation, and copies of all reports required by the permit. Where appropriate, records may be maintained in computerized form in lieu of the above records. **[45CSR§30-5.1.c.2.B.]**

3.4.3. **Odors.** For the purposes of 45CSR4, the permittee shall maintain a record of all odor complaints received, any investigation performed in response to such a complaint, and any responsive action(s) taken. **[45CSR§30-5.1.c. State-Enforceable only.]**

Specialty Chemicals – Institute
POLYOX™ Plant

SECTION 20: Applicable Requirements - Reporting

From Current Title V Permit:

3.5.1. Responsible official. Any application form, report, or compliance certification required by this permit to be submitted to the DAQ and/or USEPA shall contain a certification by the responsible official that states that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate and complete. **[45CSR§§30-4.4. *and* 5.1.c.3.D.]**

3.5.2. A permittee may request confidential treatment for the submission of reporting required under 45CSR§30- 5.1.c.3. pursuant to the limitations and procedures of W.Va. Code § 22-5-10 and 45CSR31. **[45CSR§30-5.1.c.3.E.]**

3.5.3. Except for the electronic submittal of the annual compliance certification and semi-annual monitoring reports to the DAQ and USEPA as required in 3.5.5 and 3.5.6 below, all notices, requests, demands, submissions and other communications required or permitted to be made to the Secretary of DEP and/or USEPA shall be made in writing and shall be deemed to have been duly given when delivered by hand, or mailed first class or by private carrier with postage prepaid to the address(es), or submitted in electronic format by e-mail as set forth below or to such other person or address as the Secretary of the Department of Environmental Protection may designate:

DAQ
Director
WVDEP
Division of Air Quality
601 57th St. SE
Charleston, WV. 25304

US EPA
Section Chief
U.S. Environmental Protection Agency, Region III
Enforcement and Compliance Assurance
Division Air Section (3ED21)
1650 Arch St.
Philadelphia, PA. 19103-2029

DAQ Compliance and Enforcement [1]:
DEPAirQualityReports@wv.gov

[1] For all self-monitoring reports (MACT, GACT, NSPS, etc.), stack tests and protocols, Notice of Compliance Status reports, Initial Notifications, etc.

3.5.4. **Certified emissions statement.** The permittee shall submit a certified emissions statement and pay fees on an annual basis in accordance with the submittal requirements of the Division of Air Quality. **[45CSR§30-8.]**

3.5.5. Compliance certification. The permittee shall certify compliance with the conditions of this permit on the forms provided by the DAQ. In addition to the annual compliance certification, the permittee may be required to submit certifications more frequently under an applicable requirement of this permit. The annual certification shall be submitted to the DAQ and USEPA on or before March 15 of each year, and shall certify compliance for the period ending December 31. The permittee shall maintain a copy of the certification on site for five (5) years from submittal of the certification. The annual certification shall be submitted in electronic format by e-mail to the following addresses:

DAQ
DEPAirQualityReports@wv.gov

US EPA
R3_APD_Permits@epa.gov

[45CSR§30-5.3.e.]

3.5.6. Semi-annual monitoring reports. The permittee shall submit reports of any required monitoring on or before September 15 for the reporting period January 1 to June 30 and on or before March 15 for the reporting period July 1 to December 31. All instances of deviation from permit requirements must be clearly identified in such reports. All required reports must be certified by a responsible official consistent with 45CSR§30- 4.4. The semi-annual monitoring reports shall be submitted in electronic format by e-mail to the following address:

DAQ
DEPAirQualityReports@wv.gov

[45CSR§30-5.1.c.3.A.]

3.5.7. Emergencies
See Section 2.17 of the current permit

3.5.8. Deviations.
a. In addition to monitoring reports required by this permit, the permittee shall promptly submit supplemental reports and notices in accordance with the following:

1. Any deviation resulting from an emergency or upset condition, as defined in 45CSR§30-5.7., shall be
reported by telephone or telefax within one (1) working day of the date on which the permittee becomes aware of the deviation, if the permittee desires to assert the affirmative defense in accordance with 45CSR§30-5.7. A written report of such deviation, which shall include the probable cause of such deviations, and any corrective actions or preventative measures taken, shall be submitted and certified by a

responsible official within ten (10) days of the deviation

2. Any deviation that poses an imminent and substantial danger to public health, safety, or the environment shall be reported to the Secretary immediately by telephone or telefax. A written report of such deviation, which shall include the probable cause of such deviation, and any corrective actions or preventative measures taken, shall be submitted by the responsible official within ten (10) days of the deviation.

3. Deviations for which more frequent reporting is required under this permit shall be reported on the more frequent basis.

4. All reports of deviations shall identify the probable cause of the deviation and any corrective actions or preventative measures taken. [**45CSR§30-5.1.c.3.C.]**

b. The permittee shall, in the reporting of deviations from permit requirements, including those attributable to upset conditions as defined in this permit, report the probable cause of such deviations and any corrective actions or preventive measures taken in accordance with any rules of the Secretary. **[45CSR§30-5.1.c.3.B.]**

3.5.9. New applicable requirements. If any applicable requirement is promulgated during the term of this permit, the permittee will meet such requirements on a timely basis, or in accordance with a more detailed schedule if required by the applicable requirement. **[45CSR§30-4.3.h.1.B.]**

3.5.10 Reports of excess emissions. Except as provided in 3.5.11, the owner or operator of any facility containing sources subject to 45CSR§21-5. shall, for each occurrence of excess emissions expected to last more than 7 days, within 1 business day of becoming aware of such occurrence, supply the Director by letter with the following information: [**45CSR13, R13-3404, 4.5.1]**

a. The name and location of the facility;

b. The subject sources that caused the excess emissions;

c. The time and date of first observation of the excess emissions; and

d. The cause and expected duration of the excess emissions.

e. For sources subject to numerical emission limitations, the estimated rate of emissions (expressed in the units of the applicable emission limitation) and the operating data and calculations used in determining the magnitude of the excess emissions; and

f. The proposed corrective actions and schedule to correct the conditions causing the excess emissions.

3.5.11. Variance. If the provisions of 45CSR21 cannot be satisfied due to repairs made as the result of routine maintenance or in response to the unavoidable malfunction of equipment, the Director may permit the owner or operator of a source subject to 45CSR21 to continue to operate said source for periods not to exceed 10 days upon specific application to the Director. Such application shall be made prior to the making of repairs and, in the case of equipment malfunction, within 24 hours of the equipment malfunction. Where repairs will take in excess of

10 days to complete, additional time periods may be granted by the Director. In cases of major equipment failure, additional time periods may be granted by the Director provided a corrective program has been submitted by the owner or operator and approved by the Director. During such time periods, the owner or operator shall take all reasonable and practicable steps to minimize VOC emissions. **[45CSR13, R13-3404, 4.1.5)]**

21. Active Permits/Consent Orders		
Permit or Consent Order Number	Date of Issuance MM/DD/YYYY	List any Permit Determinations that Affect the Permit *(if any)*
R13-3404	9/28/2018	

22. Inactive Permits/Obsolete Permit Conditions		
Permit Number	Date of Issuance MM/DD/YYYY	Permit Condition Number
CO-R21-97-41 (Facility wide)		
CO-R27-99-14A		
R13-0171E		

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year]	
Criteria Pollutants	Potential Emissions (2021 Actual)
Carbon Monoxide (CO)	8.94 (5.46)
Nitrogen Oxides (NO_X)	1.64 (1.12)
Lead (Pb)	0 (0)
Particulate Matter ($PM_{2.5}$)[1]	0.15 (0.048)
Particulate Matter (PM_{10})[1]	0.15 (0.048)
Total Particulate Matter (TSP)	0.15 (0.048)
Sulfur Dioxide (SO_2)	1.05 (0.001)
Volatile Organic Compounds (VOC)	620 (74.61)
Hazardous Air Pollutants[2]	Potential Emissions
Acetonitrile	0.1 (0.014)
Ethylene Oxide	0.7 (0.495)
Propylene Oxide	0.2 (0.079)
Regulated Pollutants other than Criteria and HAP	Potential Emissions

[1]$PM_{2.5}$ and PM_{10} are components of TSP.
[2]For HAPs that are also considered PM or VOCs, emissions should be included in both the HAPs section and the Criteria Pollutants section.

Section 4: Insignificant Activities

24. Insignificant Activities (Check all that apply)		
☑	1.	Air compressors and pneumatically operated equipment, including hand tools.
☐	2.	Air contaminant detectors or recorders, combustion controllers or shutoffs.
☑	3.	Any consumer product used in the same manner as in normal consumer use, provided the use results in a duration and frequency of exposure which are not greater than those experienced by consumer, and which may include, but not be limited to, personal use items; janitorial cleaning supplies, office supplies and supplies to maintain copying equipment.
☑	4.	Bathroom/toilet vent emissions.
☑	5.	Batteries and battery charging stations, except at battery manufacturing plants.
☑	6.	Bench-scale laboratory equipment used for physical or chemical analysis, but not lab fume hoods or vents. Many lab fume hoods or vents might qualify for treatment as insignificant (depending on the applicable SIP) or be grouped together for purposes of description.
☐	7.	Blacksmith forges.
☐	8.	Boiler water treatment operations, not including cooling towers.
☑	9.	Brazing, soldering or welding equipment used as an auxiliary to the principal equipment at the source.
☐	10.	CO_2 lasers, used only on metals and other materials which do not emit HAP in the process.
☑	11.	Combustion emissions from propulsion of mobile sources, except for vessel emissions from Outer Continental Shelf sources.
☑	12.	Combustion units designed and used exclusively for comfort heating that use liquid petroleum gas or natural gas as fuel.
☑	13.	Comfort air conditioning or ventilation systems not used to remove air contaminants generated by or released from specific units of equipment.
☐	14.	Demineralized water tanks and demineralizer vents.
☐	15.	Drop hammers or hydraulic presses for forging or metalworking.
☐	16.	Electric or steam-heated drying ovens and autoclaves, but not the emissions from the articles or substances being processed in the ovens or autoclaves or the boilers delivering the steam.
☐	17.	Emergency (backup) electrical generators at residential locations.
☐	18.	Emergency road flares.
☐	19.	Emission units which do not have any applicable requirements and which emit criteria pollutants (CO, NO_x, SO_2, VOC and PM) into the atmosphere at a rate of less than 1 pound per hour and less than 10,000 pounds per year aggregate total for each criteria pollutant from all emission units. Please specify all emission units for which this exemption applies along with the quantity of criteria pollutants emitted on an hourly and annual basis:

24. Insignificant Activities (Check all that apply)		
☐	20.	Emission units which do not have any applicable requirements and which emit hazardous air pollutants into the atmosphere at a rate of less than 0.1 pounds per hour and less than 1,000 pounds per year aggregate total for all HAPs from all emission sources. This limitation cannot be used for any source which emits dioxin/furans nor for toxic air pollutants as per 45CSR27. Please specify all emission units for which this exemption applies along with the quantity of hazardous air pollutants emitted on an hourly and annual basis:
☐	21.	Environmental chambers not using hazardous air pollutant (HAP) gases.
☐	22.	Equipment on the premises of industrial and manufacturing operations used solely for the purpose of preparing food for human consumption.
☐	23.	Equipment used exclusively to slaughter animals, but not including other equipment at slaughterhouses, such as rendering cookers, boilers, heating plants, incinerators, and electrical power generating equipment.
☑	24.	Equipment used for quality control/assurance or inspection purposes, including sampling equipment used to withdraw materials for analysis.
☐	25.	Equipment used for surface coating, painting, dipping or spray operations, except those that will emit VOC or HAP.
☐	26.	Fire suppression systems.
☐	27.	Firefighting equipment and the equipment used to train firefighters.
☐	28.	Flares used solely to indicate danger to the public.
☑	29.	Fugitive emission related to movement of passenger vehicle provided the emissions are not counted for applicability purposes and any required fugitive dust control plan or its equivalent is submitted.
☐	30.	Hand-held applicator equipment for hot melt adhesives with no VOC in the adhesive formulation.
☑	31.	Hand-held equipment for buffing, polishing, cutting, drilling, sawing, grinding, turning or machining wood, metal or plastic.
☐	32.	Humidity chambers.
☐	33.	Hydraulic and hydrostatic testing equipment.
☐	34.	Indoor or outdoor kerosene heaters.
☑	35.	Internal combustion engines used for landscaping purposes.
☐	36.	Laser trimmers using dust collection to prevent fugitive emissions.
☐	37.	Laundry activities, except for dry-cleaning and steam boilers.
☑	38.	Natural gas pressure regulator vents, excluding venting at oil and gas production facilities.
☐	39.	Oxygen scavenging (de-aeration) of water.
☐	40.	Ozone generators.

24. Insignificant Activities (Check all that apply)		
☑	41.	Plant maintenance and upkeep activities (e.g., grounds-keeping, general repairs, cleaning, painting, welding, plumbing, re-tarring roofs, installing insulation, and paving parking lots) provided these activities are not conducted as part of a manufacturing process, are not related to the source's primary business activity, and not otherwise triggering a permit modification. (Cleaning and painting activities qualify if they are not subject to VOC or HAP control requirements. Asphalt batch plant owners/operators must still get a permit if otherwise requested.)
☑	42.	Portable electrical generators that can be moved by hand from one location to another. "Moved by Hand" means that it can be moved without the assistance of any motorized or non-motorized vehicle, conveyance, or device.
☐	43.	Process water filtration systems and demineralizers.
☑	44.	Repair or maintenance shop activities not related to the source's primary business activity, not including emissions from surface coating or de-greasing (solvent metal cleaning) activities, and not otherwise triggering a permit modification.
☐	45.	Repairs or maintenance where no structural repairs are made and where no new air pollutant emitting facilities are installed or modified.
☑	46.	Routing calibration and maintenance of laboratory equipment or other analytical instruments.
☐	47.	Salt baths using nonvolatile salts that do not result in emissions of any regulated air pollutants. Shock chambers.
☐	48.	Shock chambers.
☐	49.	Solar simulators.
☑	50.	Space heaters operating by direct heat transfer.
☑	51.	Steam cleaning operations.
☑	52.	Steam leaks.
☐	53.	Steam sterilizers.
☑	54.	Steam vents and safety relief valves.
☐	55.	Storage tanks, reservoirs, and pumping and handling equipment of any size containing soaps, vegetable oil, grease, animal fat, and nonvolatile aqueous salt solutions, provided appropriate lids and covers are utilized.
☑	56.	Storage tanks, vessels, and containers holding or storing liquid substances that will not emit any VOC or HAP. Exemptions for storage tanks containing petroleum liquids or other volatile organic liquids should be based on size limits such as storage tank capacity and vapor pressure of liquids stored and are not appropriate for this list.
☐	57.	Such other sources or activities as the Director may determine.
☐	58.	Tobacco smoking rooms and areas.
☐	59.	Vents from continuous emissions monitors and other analyzers.

Section 5: Emission Units, Control Devices, and Emission Points

25. Equipment Table

Fill out the **Title V Equipment Table** and provide it as **ATTACHMENT D**.

26. Emission Units

For each emission unit listed in the **Title V Equipment Table**, fill out and provide an **Emission Unit Form** as **ATTACHMENT E**.

For each emission unit not in compliance with an applicable requirement, fill out a **Schedule of Compliance Form** as **ATTACHMENT F**.

27. Control Devices

For each control device listed in the **Title V Equipment Table**, fill out and provide an **Air Pollution Control Device Form** as **ATTACHMENT G**.

For any control device that is required on an emission unit in order to meet a standard or limitation for which the potential pre-control device emissions of an applicable regulated air pollutant is greater than or equal to the Title V Major Source Threshold Level, refer to the **Compliance Assurance Monitoring (CAM) Form(s)** for CAM applicability. Fill out and provide these forms, if applicable, for each Pollutant Specific Emission Unit (PSEU) as **ATTACHMENT H**.

Section 6: Certification of Information

28. Certification of Truth, Accuracy and Completeness and Certification of Compliance

Note: This Certification must be signed by a responsible official as defined in 45CSR§30-2.38.

a. Certification of Truth, Accuracy and Completeness

I certify that I am a responsible official (as defined at 45CSR§30-2.38) and am accordingly authorized to make this submission on behalf of the owners or operators of the source described in this document and its attachments. I certify under penalty of law that I have personally examined and am familiar with the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine and/or imprisonment.

b. Compliance Certification

Except for requirements identified in the Title V Application for which compliance is not achieved, I, the undersigned hereby certify that, based on information and belief formed after reasonable inquiry, all air contaminant sources identified in this application are in compliance with all applicable requirements.

Responsible official (type or print)

Name:	Title:
RIchard Thomas	Site Manager

Responsible official's signature:

Signature: _____ Signature Date: 6/8/2022

(Must be signed and dated in blue ink or have a valid electronic signature)

Note: Please check all applicable attachments included with this permit application:

☑	ATTACHMENT A: Area Map
☑	ATTACHMENT B: Plot Plan(s)
☑	ATTACHMENT C: Process Flow Diagram(s)
☑	ATTACHMENT D: Equipment Table
☑	ATTACHMENT E: Emission Unit Form(s)
☐	ATTACHMENT F: Schedule of Compliance Form(s)
☑	ATTACHMENT G: Air Pollution Control Device Form(s)
☐	ATTACHMENT H: Compliance Assurance Monitoring (CAM) Form(s)

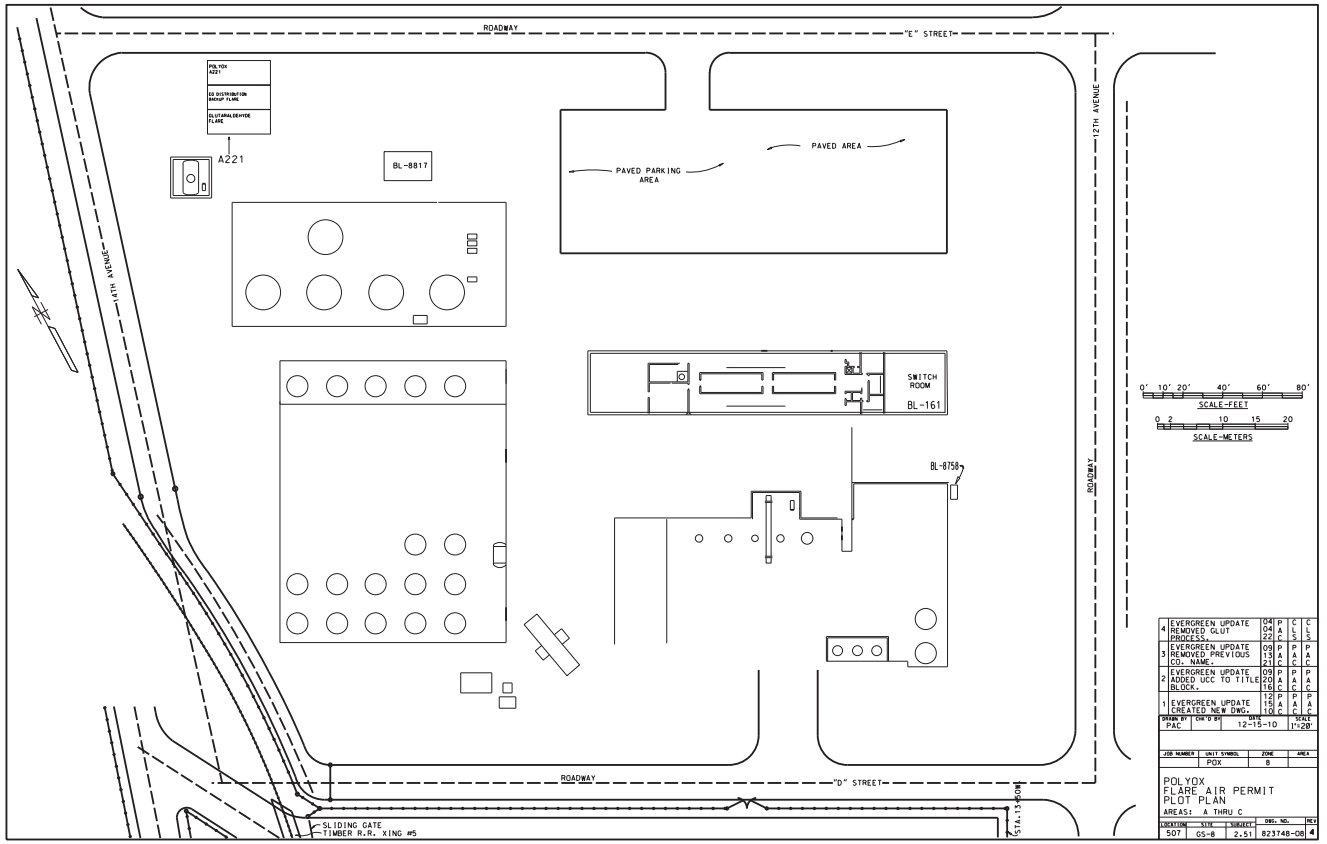
All of the required forms and additional information can be found and downloaded from, the DEP website at www.dep.wv.gov/daq, requested by phone (304) 926-0475, and/or obtained through the mail.

TABLE OF CONTENTS

ATTACHMENT A
AREA MAP

SITE LOCATION MAP – INSTITUTE WV

ATTACHMENT B
PLOT PLANS



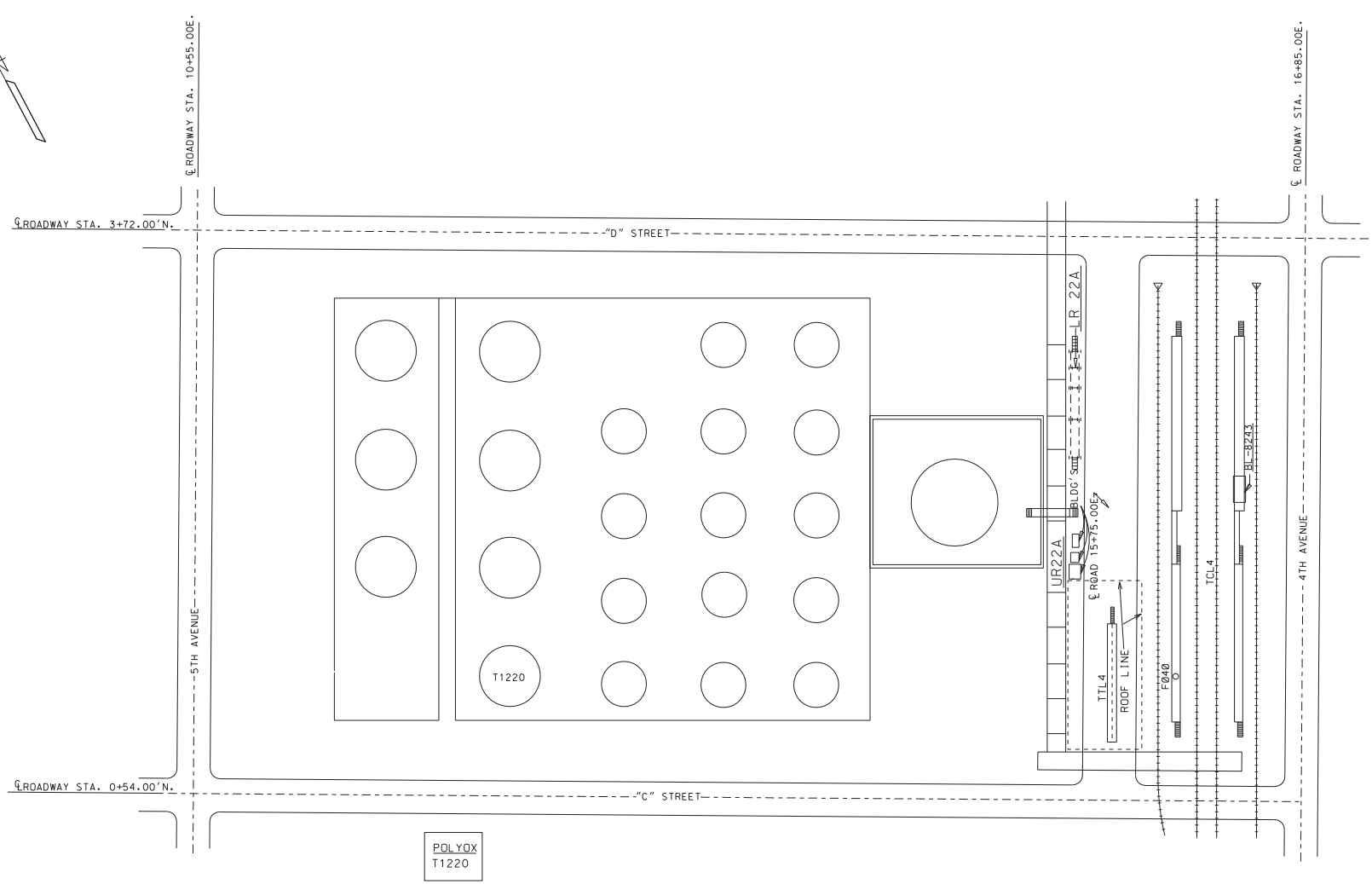
4	EVERGREEN UPDATE REMOVED GLUT PROCESS.	04 04 22	P A C	C L S	C L S
3	EVERGREEN UPDATE REMOVED PREVIOUS CO. NAME.	09 13 21	P A C	P A C	P A C
2	EVERGREEN UPDATE ADDED UCC TO TITLE BLOCK.	09 20 16	P A C	P A C	P A C
1	EVERGREEN UPDATE CREATED NEW DWG.	12 15 10	P A C	P A C	P A C

DRAWN BY	CHK'D BY	DATE	SCALE
PAC		12-15-10	1"=20'

JOB NUMBER	UNIT SYMBOL	ZONE	AREA
	POX	8	

POLYOX
FLARE AIR PERMIT
PLOT PLAN
AREAS: A THRU C

LOCATION	SITE	SUBJECT	DRG. NO.	REV
507	GS-8	2.51	823748-08	4



0' 10' 40' 80' 120' 160'

SCALE-FEET

0 2 10 20 30 40 50

SCALE-METERS

3	EVERGREEN UPDATE REMOVED PREVIOUS CO. NAME.	09 13 21	P A C	C L S
2	EVERGREEN UPDATE REMOVED TANK 1230.	05 23 11	P A C	C L S
1	EVERGREEN UPDATE CREATED NEW DWG.	01 20 11	P A C	C L S

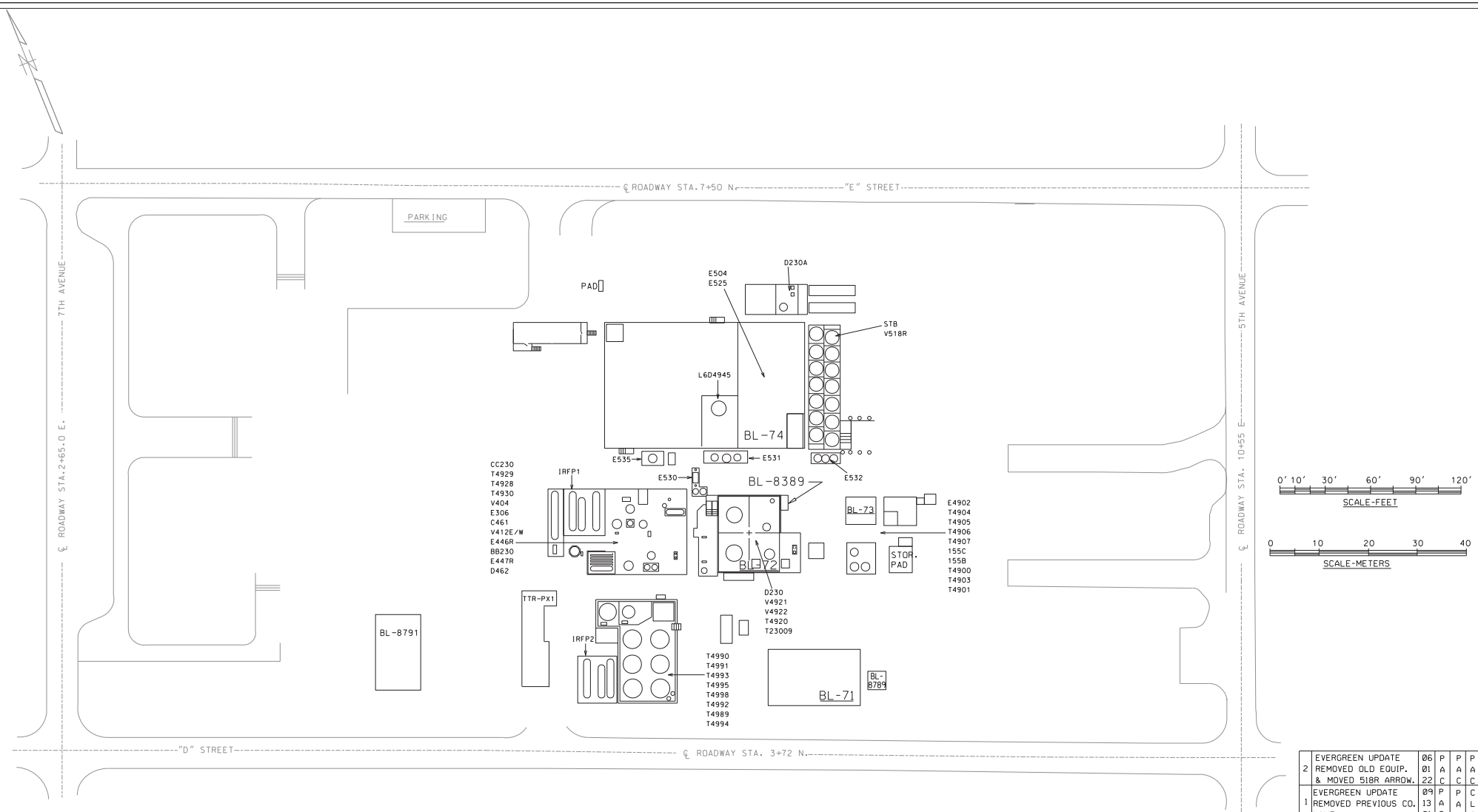
DRAWN BY	CHK'D BY	DATE	SCALE
PAC		12-06-10	1"= 50'

JOB NUMBER	UNIT SYMBOL	ZONE	AREA
	POLYOX	22	

POLYOX AIR PREMIT
PLOT PLAN

AREA: A

LOCATION	SITE	SUBJECT	DWG. NO.	REV
507	GS-22	2.51	823748-22	3



2	EVERGREEN UPDATE REMOVED OLD EQUIP. & MOVED 518R ARROW.	06/01/22	PAC	PAC	PAC
1	EVERGREEN UPDATE REMOVED PREVIOUS CO. NAME.	09/13/21	PAC	PAC	CLS

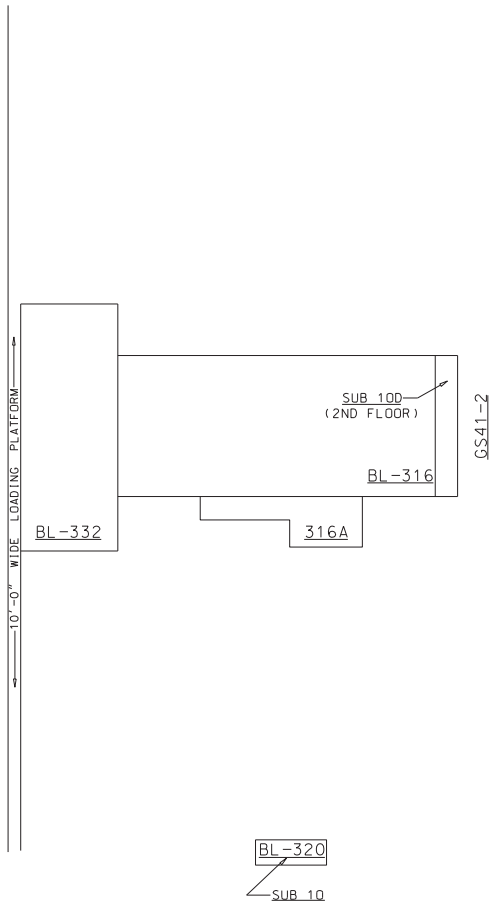
DRAWN BY	CHK'D BY	ENGINEER	DATE	SCALE
PAC			05-18-11	1"=30'

JOB NUMBER	UNIT SYMBOL	ZONE	AREA
	POX	24	

POLYOX UNIT AIR PERMIT
PLOT PLAN

INDEX NUMBER			DWG. NO.	REV
LOCATION	SITE	SUBJECT		
507	GS-24	2.51	823748-24	2

p:\paul cain\823748-24.dgn Jun. 01, 2022 13:48:57



DRAWN BY	CHK'D BY	ENGINEER	DATE	SCALE
SPECIALTY PRODUCTS US, LLC				
JOB NUMBER	UNIT SYMBOL	ZONE	AREA	
	POX	41		

POLYOX UNIT AIR PERMIT
PLOT PLAN

AREAS: A&B

LOCATION	SITE	SUBJECT	DWG. NO.	REV
507	GS-41	2.51	823748-41	

...\823748-41.dgn Oct. 13, 2021 09:55:48

ATTACHMENT C
PROCESS FLOW DIAGRAMS

REDACTED COPY – CLAIM OF CONFIDENTIALITY

POLYOX
Attachment C
Process Flow Diagram

POLYOX
PROCESS NO. 230
EMISSION SOURCE ID
INSTITUTE PLANT
DRAWING NO. 1500894-230

ATTACHMENT D
EQUIPMENT TABLE

ATTACHMENT D - Title V Equipment Table

(in ... ignated as
ins ... l Forms)

Redacted Copy – Claim of Confidentiality

Emission Unit ID[1]	Emission Point ID[1]	Emission Unit Description	Year Installed/ Modified	Design Capacity	Control Device[1]
T4904	230B	Tank 4904	Oct-16	[redacted]	B230
T4905	235K/221A	Tank 4905	Dec-67	[redacted]	None/A221
T4906	235K/221A	Tank 4906	Dec-67	[redacted]	None/A221
T4907	235K/221A	Tank 4907	Dec-67	[redacted]	None/A221
T4920	235J	Tank 4920	Aug-67	[redacted]	
T4928	230Q / 221A	Tank 4928	Aug-67	[redacted]	None / A221
T4929	235E	Tank 4929	Oct-67	[redacted]	
T4930	230AA	Tank 4930	Aug-67 Replaced 2014	[redacted]	
T4989	221A	Tank 4989	Aug-67	[redacted]	A221
T4990	221A	Tank 4990	Aug-67	[redacted]	A221
T4991	221A	Tank 4991	Aug-67	[redacted]	A221
T4992	235H	Tank 4992 (Idle)	Oct-67	[redacted]	
T4993	235N	Tank 4993	Aug-67	[redacted]	
T4994	235F	Tank 4994	Aug-67	[redacted]	
T4995	No Vent	Tank 4995	Dec-95	[redacted]	
T4998	221A	Tank 4998	Nov-67	[redacted]	A221
T23009	235A	Tank 23009	May-87	[redacted]	
T4901	230S	Tank 4901 (aka V4901 and T4901)	Dec-67	[redacted]	
TCR871	230E	Rack TCR871	Prior to 1970	[redacted]	
E306	221A	Vessel 306	Jan-68	[redacted]	A221
V404	221A	Vessel 404	May-67	[redacted]	A221
V411E/V413W	211A	Vessel 411 E/413W	Jul-67 Replaced Oct-17	[redacted]	A221
C461	No Vent	Vessel 461 PEPO Reactor (aka V461)	Jun-02	[redacted]	
V518R		Vessel 518R (Idle)	Jan-68	[redacted]	
V4921	221A	Vessel 4921	Jan-68	[redacted]	A221
V4922	221A	Vessel 4922	Jan-68	[redacted]	A221
T4903	230B	Vessel T4903 (aka V4903)	Dec-67	[redacted]	B230
T4900	230G	Vessel T4900	Dec-67	[redacted]	
E530	230K	No. 1 Conveyor	Dec-67	[redacted]	

Redacted Copy – Claim of Confidentiality

Emission Unit ID[1]	Emission Point ID[1]	Emission Unit Description	Year Installed/ Modified	Design Capacity	Control Device[1]
E531	230L	No. 2 Conveyor	Dec-67	[redacted]	
E532	230M	No. 3 Conveyor	Dec-67	[redacted]	
E504	230L	Blending	Aug-67	[redacted]	
STB	No Vents	Storage Bins	Dec-67	[redacted]	
L6DA	230R	Packaging Bin L6DA	Sep-68	[redacted]	
E707	230J	E-707 Baghouse (packaging vent collection system)	Sep-68	Not Applicable	
L6DB	230J	Packaging System	Sep-68 Replaced 2012	[redacted]	E-707
E535	230V	Vac System	Feb-85	Not applicable (housekeeping)	
D230A	No Vents	Hopper 1 (No vent to air)	Apr-96 Replaced 2014	[redacted]	
E221A	230GG	E221A Baghouse	Nov-75	Not Applicable	
D230B	230GG / 230U	Hopper 2	Nov-75	[redacted]	E221
E4902	230B	Equipment 4902 (aka T4902)	Dec-67	[redacted]	B230
155C	230H	Equipment 155C	Not applicable	Not applicable	
155B	230I	Equipment 155B	Not applicable	Not applicable	
E446R	221A	A/B – Vessel E446R A/B	May-97	[redacted]	A221
E447R	221A	Equipment E447R	May-97	[redacted]	A221
D462	230JJ	Vessel D462	Jun-02	[redacted]	
A221	221A	Flare	Oct-94	[redacted]	
B230	230B	Packed Bed Scrubber B230	1967 / Replaced 1999	Not applicable	
T1220	235O	Tank 1220	1942	[redacted]	
V302	230O / 221A`	Vessel 302	1967	Not applicable	A221
IRFP1	None	Industrial Refrigeration Unit #1	Not applicable	Not applicable	
IRFP2	None	Industrial Refrigeration Unit #2	Not applicable	Not applicable	
TTR-PX1	Vent Gas Returned to Process	Tank Truck Loading	2012		

[1]For 45CSR13 permitted sources, the numbering system used for the emission points, control devices, and emission units should be consistent with the numbering system used in the 45CSR13 permit. For grandfathered sources, the numbering system should be consistent with registrations or emissions inventory previously submitted to DAQ. For emission points, control devices, and emissions units which have not been previously labeled, use the following 45CSR13 numbering system: 1S, 2S, 3S,... or other appropriate description for emission units; 1C, 2C, 3C,... or other appropriate designation for control devices; 1E, 2E, 3E, ... or other appropriate designation for emission points.

ATTACHMENT E
EMISSION UNITS

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4904	Tank 4904	Scrubber (B230)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
October 2016 (replacement)	October 2016	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4905	Tank 4905	None/Flare A221

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4906	Tank 4906	None/Flare A221

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4907	Tank 4907	None/Flare A221

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4920	Tank 4920	-

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4928	Tank 4928	None/A221

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4929	Tank 4929	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
October 1967	October 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4930	Tank 4930	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967 Replaced 2014	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4989	Tank 4989	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4990	Tank 4990	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4991	Tank 4991	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4992(currently idle)	Tank 4992 (currently idle)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
October 1967	October 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4993	Tank 4993	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4994	Tank 4994	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4995	Tank 4995	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1995	December 1995	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4998	Tank 4998	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
November 1967	November 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T23009	Tank 23009	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
May 1987	May 1987	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4901	Tank 4901	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
TCR871	Rack TCR871 (Unloading rack)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
Prior to 1970	Prior to 1970	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E306	Vessel 306	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
January 1968	January 1968	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
V404	Vessel 404	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
May 1967	May 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
V411E/413W	Vessel 411E/413W	Flare A221

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
July 1967	July 1967	October 2017

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
C461	Vessel 461 (PEPO Reactor)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
June 2002	June 2002	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
V518R	Vessel 518R (currently idle)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
January 1968	January 1968	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
V4921	Vessel 4921	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
January 1968	January 1968	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
V4922	Vessel 4922	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
January 1968	January 1968	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4903	Vessel T4903 (aka V4903)	Scrubber (B230)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T4900	Vessel T4900	

Provide a description of the emission unit (type, method of operation, design parameters, etc.; for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines - hp):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E530	No. 1 Conveyor (230K)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E531	No. 2 Conveyor (230L)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E532	No. 3 Conveyor (230M)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E504	Blending	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
August 1967	August 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
STB	Storage Bins (multiple)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**
Construction date: December 1967	**Installation date:** December 1967	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:** 24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
L6DA	Packaging System (L6DA)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
September 1968	September 1968	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
L6DB	Packaging System (L6DB)	Baghouse (E707)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
September 1968	September 1968 Replaced 2012	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E535	Vac System (Housekeeping)	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
February 1985	February 1985	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
D230A	C-230 Hopper #1	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
April 1996	April 1996 Replaced 2014	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day; 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
D230B	C-221 Hopper #2	E221

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
November 1975	November 1975	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day; 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E4902	Equipment 4902 (aka T4902)	Scrubber B230

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
December 1967	December 1967	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day; 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E446R	Vessel E446R A/B	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
Mary 1997	May 1997	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day; 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
E447R	Vessel E447R	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
Mary 1997	May 1997	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day; 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
D462	Vessel 462	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
June 2002	June 2002	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day; 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
T1220	Tank 1220	

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
1942	1942	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit:**
V302	Vessel 302	Flare (A221)

Provide a description of the emission unit (type, method of operation, design parameters, etc.: for engines, please indicate compression or spark ignition, lean or rich, four or two stroke, non-emergency or emergency, certified or not certified, as applicable)

Manufacturer:	**Model number:**	**Serial number:**

Construction date:	**Installation date:**	**Modification date(s):**
January 1968	January 1968	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks – gallons, boilers – MMBtu/hr, engines – hp)):

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
		24 hrs/day, 365 days/yr

Fuel Usage Data **(fill out all applicable fields)**

Does this emission unit combust fuel? ☐ Yes ☒ No	**If yes, is it?** ☐ Indirect Fired ☐ Direct Fired
Maximum design heat input and/or maximum horsepower rating:	**Type and Btu/hr rating of burners:**

List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.

Describe each fuel expected to be used during the term of the permit.

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).

Applicable Requirements

List all applicable requirements for this emission unit. For each applicable requirement, include the underlying rule/regulation citation and/or construction permit with the condition number. (*Note: Title V permit condition numbers alone are not the underlying applicable requirements*). If an emission limit is calculated based on the type of source and design capacity or if a standard is based on a design parameter, this information should also be included.

[X] Permit Shield

For all applicable requirements listed above, provide monitoring/testing/recordkeeping/reporting which shall be used to demonstrate compliance. If the method is based on a permit or rule, include the condition number or citation. (Note: Each requirement listed above must have an associated method of demonstrating compliance. If there is not already a required method in place, then a method must be proposed.)

Are you in compliance with all applicable requirements for this emission unit? [X] Yes [ ] No

If no, complete the **Schedule of Compliance Form** as **ATTACHMENT F**.

ATTACHMENT G
CONTROL DEVICES

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 221A	**List all emission units associated with this control device.** T4905, T4906, T4907, T4989, T4990, T4991, E306, V404, V4921, V4922, E446R, E447R, V302, T4928, T4998, V411E/V413W	
Manufacturer: John ZInk	**Model number:** EEF-U-10	**Installation date:** 10/1994

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter	___ Venturi Scrubber	___ Multiclone
___ Carbon Bed Adsorber	___ Packed Tower Scrubber	___ Single Cyclone
___ Carbon Drum(s)	___ Other Wet Scrubber	___ Cyclone Bank
___ Catalytic Incinerator	___ Condenser	___ Settling Chamber
___ Thermal Incinerator	_X_ Flare	___ Other (describe) _____
___ Wet Plate Electrostatic Precipitator		___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
Volatile Organic Compounds		at least 98%
Hazardous Air Pollutants		at least 98%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

Non-assisted flare. Natural gas flow rate to flare pilot flame per pilot light approximately 55 scf/hr. Pilot flame equipped with thermocouple.

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X__ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.** The process specific equipment unit has potential pre-control device emissions of the applicable regulated air pollutant that are less than the Title V Major Source Threshold Levels.

Describe the parameters monitored and/or methods used to indicate performance of this control device.

See existing Title V permit condition.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: B230	**List all emission units associated with this control device.** T4903, T4904, E4902	
Manufacturer: McJunkin Corp.	**Model number:** POX2-1104R	**Installation date:** 1967/Replaced by like kind 1999

Type of Air Pollution Control Device:

__X__ Baghouse/Fabric Filter	___ Venturi Scrubber	___ Multiclone
___ Carbon Bed Adsorber	___ Packed Tower Scrubber	___ Single Cyclone
___ Carbon Drum(s)	__X_ Other Wet Scrubber	___ Cyclone Bank
___ Catalytic Incinerator	___ Condenser	___ Settling Chamber
___ Thermal Incinerator	___ Flare	___ Other (describe) _____
___ Wet Plate Electrostatic Precipitator		___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
Volatile Organic Compounds		at least 98%
Hazardous Air Pollutants		at least 98%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

See existing Title V permit provisions.

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X__ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.** The process specific equipment unit has potential pre-control device emissions of the applicable regulated air pollutant that are less than the Title V Major Source Threshold Levels.

Describe the parameters monitored and/or methods used to indicate performance of this control device.

Covered by existing Title V permit conditions.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: E221A	**List all emission units associated with this control device.** D230B	
Manufacturer: Vac-U-Max	**Model number:** 105025	**Installation date:** Replaced July 2008

Type of Air Pollution Control Device:

__X__ Baghouse/Fabric Filter
___ Multiclone

___ Carbon Bed Adsorber
___ Single Cyclone

___ Carbon Drum(s)
___ Cyclone Bank

___ Catalytic Incinerator
___ Settling Chamber

___ Thermal Incinerator

___ Wet Plate Electrostatic Precipitator

___ Venturi Scrubber

___ Packed Tower Scrubber

___ Other Wet Scrubber

___ Condenser

___ Flare
Other (describe) _____

___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
Particulate Matter		greater than 99%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

7 filters – Cloth area = ~3.2 square feet

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes __X__ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.** The process specific emission unit has potential pre-control device emissions of the applicable regulated air pollutant that are less than the Title V Major Source Threshold Levels. Potential to emit is less than 50 tons/yr of particulate matter emissions.

Describe the parameters monitored and/or methods used to indicate performance of this control device.
See conditions in current Title V permit

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: E707	**List all emission units associated with this control device.** Packaging System L6DB	
Manufacturer: Metals Disintegrating Co.	**Model number:** 20-6	**Installation date:** MM/DD/YYYY

Type of Air Pollution Control Device:

_X_ Baghouse/Fabric Filter	___ Venturi Scrubber	___ Multiclone
___ Carbon Bed Adsorber	___ Packed Tower Scrubber	___ Single Cyclone
___ Carbon Drum(s)	___ Other Wet Scrubber	___ Cyclone Bank
___ Catalytic Incinerator	___ Condenser	___ Settling Chamber
___ Thermal Incinerator	___ Flare	___ Other (describe) _____
___ Wet Plate Electrostatic Precipitator		___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
Particulate Matter		at least 99%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

20 filters – Cloth area = ~64 square feet

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.** The process specific emission unit has potential pre-control device emissions of the applicable regulated air pollutant that are less than the Title V Major Source Threshold Levels**.** Potential to emit is less than 30 tons/yr of particulate matter emissions.

Describe the parameters monitored and/or methods used to indicate performance of this control device.

See conditions in current Title V permit

ATTACHMENT K
JUSTIFICATION OF CBI

JUSTIFICATION OF CONFIDENTIALITY CLAIM

Information filed with WVDEP Division of Air Quality

Expiration Date of Confidentiality Claim: • Permanent

File Name or Description of Document: Regulation 30 Permit Renewal Application provided by cover letter dated June 8, 2022 from Mr. R. Thomas, Specialty Products US, LLC Site Manager, to Mrs. Laura Crowder, Director, WVDAQ

Company Name: Specialty Products US, LLC

Plant Location: Institute Facility – POLYOX™ Plant

Designee Regarding Claim: Mike Fisher

Department: EH&S

Address of Designee: P. O. Box 1006
Institute, WV 25112

Phone Number of Designee: (304) 451-7617 Fax Number: N/A

REASON FOR CLAIM OF CONFIDENTIALITY:

TRADE SECRET – See below for detailed information.

Identification of confidential document/segments:

Permit Determination Form Page(s)	Segment Identification	Rationale for Confidential Claim
Attachment C Process Flow Diagram	Entire schematic	Detailed process information could be used by competitors to reduce competitive advantage.
Attachment D Equipment Table	Equipment Design Capacity	Detailed process information could be used by competitors to reduce competitive advantage.

*See attached for additional information.

JUSTIFICATION OF CONFIDENTIALITY CLAIM
EXPLANATORY INFORMATION

File Name or Description of Document: Regulation 30 Permit Renewal Application provided by cover letter dated June 8, 2022 from Mr. R. Thomas, Specialty Products US, LLC Site Manager, to Mrs. Laura Crowder, Director, WVDAQ

Specialty Products US, LLC, A subsidiary of International Flavors & Fragrances requests that information contained in the permit application that has been designated as "Claimed Confidential" not be disclosed to the public. Each of the four specific business confidential criteria is detailed below.

Specialty Products US, LLC claims confidentiality protection for the identified parts of this application since the information marked as business confidential would allow reasonably competent chemical engineers to determine the manner in which Specialty Products US, LLC produces the product of this process. Since the equipment and raw materials are available to a number of competitors or potential competitors, disclosure of this information would allow these competitors to produce this product without either paying for the technology or conducting the research and development necessary to obtain the technology themselves. This would allow competitors to produce the products at a potentially lower cost, devaluing the investment that Specialty Products US, LLC has made in this technology and lessening the competitor's appreciation for the safety considerations necessary for operating this process.

Specialty Products US, LLC continues to claim confidentiality protection for this business. The claim has not expired by its term, or been waived or withdrawn.

Information in the permit application is not reasonably obtainable by persons other than Specialty Products US, LLC employees, persons who Specialty Products US, LLC determines need to know (e.g. Specialty Products US, LLC, contractors and licensees), and personnel in the Division of Air Quality. There are no plans to relax strict maintenance of confidentiality for this information.

Specialty Products US, LLC provides access to confidential information to its employees, contractors, licensees and other personnel on a need-to-know basis. Its confidentiality policy aids in prevention of inadvertent dissemination of information. Specialty Products US, LLC employees, contractors, and licensees have obligations of confidentiality to Specialty Products US, LLC.

Person Making Confidential Claim: Richard Thomas

Title/Position: Specialty Products US, LLC Site Manager

Date: 6/8/2022