west virginia department of environmental protection

Division of Air Quality
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G35-D GENERAL PERMIT REGISTRATION APPLICATION

PREVENTION AND CONTROL OF AIR POLLUTION IN REGARD TO THE CONSTRUCTION, MODIFICATION, RELOCATION, ADMINISTRATIVE UPDATE AND OPERATION OF NATURAL GAS COMPRESSOR AND/OR DEHYDRATION FACILITIES

☐CONSTRUCTION
☐MODIFICATION
☐RELOCATION
☐CLASS I ADMINISTRATIVE UPDATE
☐CLASS II ADMINISTRATIVE UPDATE

SECTION 1. GENERAL INFORMATION

Name of Applicant (as registered with the WV Secretary of State's Office):

Federal Employer ID No. (FEIN):

Applicant's Mailing Address:

City:	State:	ZIP Code:

Facility Name:

Operating Site Physical Address:
If none available, list road, city or town and zip of facility.

City:	Zip Code:	County:

Latitude & Longitude Coordinates (NAD83, Decimal Degrees to 5 digits):
Latitude:
Longitude:

SIC Code: NAICS Code:	DAQ Facility ID No. (For existing facilities)

CERTIFICATION OF INFORMATION

This G35-D General Permit Registration Application shall be signed below by a Responsible Official. A Responsible Official is a President, Vice President, Secretary, Treasurer, General Partner, General Manager, a member of the Board of Directors, or Owner, depending on business structure. A business may certify an Authorized Representative who shall have authority to bind the Corporation, Partnership, Limited Liability Company, Association, Joint Venture or Sole Proprietorship. Required records of daily throughput, hours of operation and maintenance, general correspondence, compliance certifications and all required notifications must be signed by a Responsible Official or an Authorized Representative. If a business wishes to certify an Authorized Representative, the official agreement below shall be checked off and the appropriate names and signatures entered. **Any administratively incomplete or improperly signed or unsigned G35-D Registration Application will be returned to the applicant. Furthermore, if the G35-D forms are not utilized, the application will be returned to the applicant. No substitution of forms is allowed.**

I hereby certify that is an Authorized Representative and in that capacity shall represent the interest of the business (e.g., Corporation, Partnership, Limited Liability Company, Association Joint Venture or Sole Proprietorship) and may obligate and legally bind the business. If the business changes its Authorized Representative, a Responsible Official shall notify the Director of the Division of Air Quality immediately.

I hereby certify that all information contained in this G35-D General Permit Registration Application and any supporting documents appended hereto is, to the best of my knowledge, true, accurate and complete, and that all reasonable efforts have been made to provide the most comprehensive information possible.

Responsible Official Signature:_____
Name and Title: Phone: Fax:
Email: Date:

If applicable:
Authorized Representative Signature:_____
Name and Title: Phone: Fax:
Email: Date:

If applicable:
Environmental Contact
Name and Title: Phone: Fax:
Email: Date:

OPERATING SITE INFORMATION	
Briefly describe the proposed new operation and/or any change(s) to the facility:	
Directions to the facility:	
ATTACHMENTS AND SUPPORTING DOCUMENTS	
I have enclosed the following required documents:	
Check payable to WVDEP – Division of Air Quality with the appropriate application fee (per 45CSR13 and 45CSR22). ☐ Check attached to front of application. ☐ I wish to pay by electronic transfer. Contact for payment (incl. name and email address): ☐ I wish to pay by credit card. Contact for payment (incl. name and email address): ☐$500 (Construction, Modification, and Relocation) ☐$300 (Class II Administrative Update) ☐$1,000 NSPS fee for 40 CFR60, Subpart IIII, JJJJ and/or OOOO and/or OOOOa [1] ☐$2,500 NESHAP fee for 40 CFR63, Subpart ZZZZ and/or HH [2] [1] Only one NSPS fee will apply. [2] Only one NESHAP fee will apply. The Subpart ZZZZ NESHAP fee will be waived for new engines that satisfy requirements by complying with NSPS, Subparts IIII and/or JJJJ. *NSPS and NESHAP fees apply to new construction or if the source is being modified.*	
☐ Responsible Official or Authorized Representative Signature (if applicable)	
☐ Single Source Determination Form **(must be completed in its entirety)** – Attachment A	
☐ Siting Criteria Waiver (if applicable) – Attachment B	☐ Current Business Certificate – Attachment C
☐ Process Flow Diagram – Attachment D	☐ Process Description – Attachment E
☐ Plot Plan – Attachment F	☐ Area Map – Attachment G
☐ G35-D Section Applicability Form – Attachment H	☐ Emission Units/ERD Table – Attachment I
☐ Fugitive Emissions Summary Sheet – Attachment J	
☐ Storage Vessel(s) Data Sheet (include gas sample data, USEPA Tanks, simulation software (e.g. ProMax, E&P Tanks, HYSYS, etc.), etc. where applicable) – Attachment K	
☐ Natural Gas Fired Fuel Burning Unit(s) Data Sheet (GPUs, Heater Treaters, In-Line Heaters if applicable) – Attachment L	
☐ Internal Combustion Engine Data Sheet(s) (include manufacturer performance data sheet(s) if applicable) – Attachment M	
☐ Tanker Truck Loading Data Sheet (if applicable) – Attachment N	
☐ Glycol Dehydration Unit Data Sheet(s) (include wet gas analysis, GRI- GLYCalc™ input and output reports and information on reboiler if applicable) – Attachment O	
☐ Pneumatic Controllers Data Sheet – Attachment P	
☐ Centrifugal Compressor Data Sheet – Attachment Q	
☐ Reciprocating Compressor Data Sheet – Attachment R	
☐ Blowdown and Pigging Operations Data Sheet – Attachment S	
☐ Air Pollution Control Device/Emission Reduction Device(s) Sheet(s) (include manufacturer performance data sheet(s) if applicable) – Attachment T	
☐ Emission Calculations (please be specific and include all calculation methodologies used) – Attachment U	
☐ Facility-wide Emission Summary Sheet(s) – Attachment V	
☐ Class I Legal Advertisement – Attachment W	
☐ One (1) paper copy and two (2) copies of CD or DVD with pdf copy of application and attachments	

All attachments must be identified by name, divided into sections, and submitted in order.

ATTACHMENT A - SINGLE SOURCE DETERMINATION FORM

Classifying multiple facilities as one "stationary source" under 45CSR13, 45CSR14, and 45CSR19 is based on the definition of Building, structure, facility, or installation as given in §45-14-2.13 and §45-19-2.12. The definition states:

"Building, Structure, Facility, or Installation" means all of the pollutant-emitting activities which belong to the same industrial grouping, are located on one or more contiguous or adjacent properties, and are under the control of the same person (or persons under common control). Pollutant-emitting activities are a part of the same industrial grouping if they belong to the same "Major Group" (i.e., which have the same two (2)-digit code) as described in the Standard Industrial Classification Manual, 1987 (United States Government Printing Office stock number GPO 1987 0-185-718:QL 3).

The Source Determination Rule for the oil and gas industry was published in the Federal Register on June 3, 2016 and will become effective on August 2, 2016. EPA defined the term "adjacent" and stated that equipment and activities in the oil and gas sector that are under common control will be considered part of the same source if they are located on the same site or on sites that share equipment and are within ¼ mile of each other.

Is there equipment and activities in the same industrial grouping (defined by SIC code)?
Yes ☐ No ☐

Is there equipment and activities under the control of the same person/people?
Yes ☐ No ☐

Is there equipment and activities located on the same site or on sites that share equipment and are within ¼ mile of each other?
Yes ☐ No ☐

ATTACHMENT B - SITING CRITERIA WAIVER
If applicable, please complete this form and it must be notarized.

G35-D General Permit
Siting Criteria Waiver

WV Division of Air Quality 300' Waiver

I _____ hereby
Print Name

acknowledge and agree that _____ will
General Permit Applicant's Name

construct an emission unit(s) at a natural gas compressor and/or dehydration facility that will be located within 300' of my dwelling and/or business.

.

I hereby offer this waiver of siting criteria to the West Virginia Department of Environmental Protection Division of Air Quality as permission to construct, install and operate in such location.

Signed:

_____
Signature Date

_____
Signature Date

Taken, subscribed and sworn before me this _____ day of

_____, 20_____.

My commission expires: _____

SEAL_____
Notary Public

ATTACHMENT C – CURRENT BUSINESS CERTIFICATE

If the applicant is a resident of West Virginia, the applicant should provide a copy of the current Business Registration Certificate issued to them from the West Virginia Secretary of State's Office. If the applicant is not a resident of the State of West Virginia, the registrant should provide a copy of the Certificate of Authority/Authority of LLC/Registration. This information is required for all sources to operate a business in West Virginia regardless of whether it is a construction, modification, or administrative update.

If you are a new business to West Virginia and have applied to the West Virginia Secretary of State's Office for a business license, please include a copy of your application.

Please note: Under the West Virginia Bureau of Employment Programs, 96CSR1, the DAQ may not grant, issue, or renew approval of any permit, general permit registration, or Certificate to Operate to any employing unit whose account is in default with the Bureau of Employment Programs Unemployment Compensation Division.

ATTACHMENT D – PROCESS FLOW DIAGRAM

Provide a diagram or schematic that supplements the process description of the operation. The process flow diagram must show all sources, components or facets of the operation in an understandable line sequence of operation. The process flow diagram should include the emission unit ID numbers, the pollution control device ID numbers, and the emission point ID numbers consistent with references in other attachments of the application. For a proposed modification, clearly identify the process areas, emission units, emission points, and/or control devices that will be modified, and specify the nature and extent of the modification.

Use the following guidelines to ensure a complete process flow diagram:

- The process flow diagram shall logically follow the entire process from beginning to end.
- Identify each emission source and air pollution control device with proper and consistent emission unit identification numbers, emission point identification numbers, and control device identification numbers.
- The process flow lines may appear different for clarity. For example, dotted lines may be used for vapor flow and solid lines used for liquid flow and arrows for direction of flow.
- The process flow lines may be color coded. For example: new or modified equipment may be red; old or existing equipment may be blue; different stages of preparation such as raw material may be green; and, finished product or refuse, another color.

ATTACHMENT E – PROCESS DESCRIPTION

Provide a detailed written description of the operation for which the applicant is seeking a permit. The process description is used in conjunction with the process flow diagram to provide the reviewing engineer a complete understanding of the activity at the operation. Describe in detail and order the complete process operation.

Use the following guidelines to ensure a complete Process Description:

- The process flow diagram should be prepared first and used as a guide when preparing the process description. The written description shall follow the logical order of the process flow diagram.
- All emission sources, emission points, and air pollution control devices must be included in the process description.
- When modifications are proposed, describe the modifications and the effect the changes will have on the emission sources, emission points, control devices and the potential emissions.
- Proper emission source ID numbers must be used consistently in the process description, the process flow diagram, the emissions calculations, and the emissions summary information provided.
- Include any additional information that may facilitate the reviewers understanding of the process operation.

The process description is required for all sources regardless of whether it is a construction, modification, or administrative update.

ATTACHMENT F – PLOT PLAN

Provide an accurately scaled and detailed Plot Plan showing the locations of all emission units, emission points, and air pollution control devices. Show all emission units, affected facilities, enclosures, buildings and plant entrances and exits from the nearest public road(s) as appropriate. Note height, width and length of proposed or existing buildings and structures.

A scale between 1"=10' and 1"=200' should be used with the determining factor being the level of detail necessary to show operation or plant areas, affected facilities, emission unit sources, transfer points, etc. An overall small scale plot plan (e.g., 1"=300') should be submitted in addition to larger scale plot plans for process or activity areas (e.g., 1"=50') if the plant is too large to allow adequate detail on a single plot plan. Process or activity areas may be grouped for the enlargements as long as sufficient detail is shown.

Use the following guidelines to ensure a complete Plot Plan:

- Facility name
- Company name
- Company facility ID number (for existing facilities)
- Plot scale, north arrow, date drawn, and submittal date.
- Facility boundary lines
- Base elevation
- Lat/Long reference coordinates from the area map and corresponding reference point elevation
- Location of all point sources labeled with proper and consistent source identification numbers

This information is required for all sources regardless of whether it is a construction, modification, or administrative update.

ATTACHMENT G – AREA MAP
Provide an Area Map showing the current or proposed location of the operation. On this map, identify plant or operation property lines, access roads and any adjacent dwelling, business, public building, school, church, cemetery, community or institutional building or public park within a 300' boundary circle of the collective emission units. Please provide a 300' boundary circle on the map surrounding the proposed emission units collectively. This information is required for all sources regardless of whether it is a construction, modification, or administrative update.

ATTACHMENT H – G35-D SECTION APPLICABILITY FORM

General Permit G35-D Registration
Section Applicability Form

General Permit G35-D was developed to allow qualified applicants to seek registration for a variety of sources. These sources include storage vessels, gas production units, in-line heaters, heater treaters, glycol dehydration units and associated reboilers, pneumatic controllers, centrifugal compressors, reciprocating compressors, reciprocating internal combustion engines (RICEs), tank truck loading, fugitive emissions, completion combustion devices, flares, enclosed combustion devices, and vapor recovery systems. All registered facilities will be subject to Sections 1.0, 2.0, 3.0, and 4.0.

General Permit G35-D allows the registrant to choose which sections of the permit they are seeking registration under. Therefore, please mark which additional sections that you are applying for registration under. If the applicant is seeking registration under multiple sections, please select all that apply. Please keep in mind, that if this registration is approved, the issued registration will state which sections will apply to your affected facility.

GENERAL PERMIT G35-D APPLICABLE SECTIONS	
☐Section 5.0	Storage Vessels Containing Condensate and/or Produced Water[1]
☐Section 6.0	Storage Vessel Affected Facility (NSPS, Subpart OOOO/OOOOa)
☐Section 7.0	Control Devices and Emission Reduction Devices not subject to NSPS Subpart OOOO/OOOOa and/or NESHAP Subpart HH
☐Section 8.0	Small Heaters and Reboilers not subject to 40CFR60 Subpart Dc
☐Section 9.0	Pneumatic Controllers Affected Facility (NSPS, Subpart OOOO/OOOOa)
☐Section 10.0	Centrifugal Compressor Affected Facility (NSPS, Subpart OOOO/OOOOa)[2]
☐Section 11.0	Reciprocating Compressor Affected Facility (NSPS, Subpart OOOO/OOOOa)[2]
☐Section 12.0	Reciprocating Internal Combustion Engines, Generator Engines. Microturbine Generators
☐Section 13.0	Tanker Truck Loading[3]
☐Section 14.0	Glycol Dehydration Units[4]
☐Section 15.0	Blowdown and Pigging Operations
☐Section 16.0	Fugitive Emission Components (NSPS, Subpart OOOOa)

1 *Applicants that are subject to Section 5 may also be subject to Section 6 if the applicant is subject to the NSPS, Subpart OOOO/OOOOa control requirements or the applicable control device requirements of Section 7.*

2 *Applicants that are subject to Section 10 and 11 may also be subject to the applicable RICE requirements of Section 12.*

3 *Applicants that are subject to Section 13 may also be subject to control device and emission reduction device requirements of Section 7.*

4 *Applicants that are subject to Section 14 may also be subject to the requirements of Section 8 (reboilers). Applicants that are subject to Section 14 may also be subject to control device and emission reduction device requirements of Section 7.*

ATTACHMENT I – EMISSION UNITS / EMISSION REDUCTION DEVICES (ERD) TABLE

Include ALL emission units and air pollution control devices/ERDs that will be part of this permit application review. Do not include fugitive emission sources in this table. Deminimis storage tanks shall be listed in the Attachment K table. This information is required for all sources regardless of whether it is a construction, modification, or administrative update.

Emission Unit ID[1]	Emission Point ID[2]	Emission Unit Description	Year Installed	Manufac. Date[3]	Design Capacity	Type[4] and Date of Change	Control Device(s)[5]	ERD(s)[6]

[1] For Emission Units (or Sources) use the following numbering system:1S, 2S, 3S,... or other appropriate designation.
[2] For Emission Points use the following numbering system:1E, 2E, 3E, ... or other appropriate designation.
[3] When required by rule
[4] New, modification, removal, existing
[5] For Control Devices use the following numbering system: 1C, 2C, 3C,... or other appropriate designation.
[6] For ERDs use the following numbering system: 1D, 2D, 3D,... or other appropriate designation.

ATTACHMENT J – FUGITIVE EMISSIONS SUMMARY SHEET

Sources of fugitive emissions may include loading operations, equipment leaks, blowdown emissions, etc.
Use extra pages for each associated source or equipment if necessary.

Source/Equipment:

Leak Detection Method Used	☐ Audible, visual, and olfactory (AVO) inspections	☐ Infrared (FLIR) cameras	☐ Other (please describe)	☐ None required

Is the facility subject to quarterly LDAR monitoring under 40CFR60 Subpart OOOOa? ☐ Yes ☐ No. If no, why?

Component Type	Closed Vent System	Count	Source of Leak Factors (EPA, other (specify))	Stream type (gas, liquid, etc.)	Estimated Emissions (tpy)		
					VOC	HAP	GHG (CO_2e)
Pumps	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			
Valves	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			
Safety Relief Valves	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			
Open Ended Lines	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			
Sampling Connections	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			
Connections (Not sampling)	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			
Compressors	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			
Flanges	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			
Other[1]	☐ Yes ☐ No			☐ Gas ☐ Liquid ☐ Both			

[1] Other equipment types may include compressor seals, relief valves, diaphragms, drains, meters, etc.

Please indicate if there are any closed vent bypasses (include component):

Specify all equipment used in the closed vent system (e.g. VRU, ERD, thief hatches, tanker truck loading, etc.)

ATTACHMENT K – STORAGE VESSEL DATA SHEET

Complete this data sheet if you are the owner or operator of a storage vessel that contains condensate and/or produced water. This form must be completed for ***each*** new or modified bulk liquid storage vessel(s) that contains condensate and/or produced water. (If you have more than one (1) identical tank (i.e. 4-400 bbl condensate tanks), then you can list all on one (1) data sheet). **Include gas sample analysis, flashing emissions, working and breathing losses, USEPA Tanks, simulation software (ProMax, E&P Tanks, HYSYS, etc.), and any other supporting documents where applicable.**

The following information is REQUIRED:

□ Composition of the representative sample used for the simulation
□ For each stream that contributes to flashing emissions:
  □ Temperature and pressure (inlet and outlet from separator(s))
  □ Simulation-predicted composition
  □ Molecular weight
  □ Flow rate
□ Resulting flash emission factor or flashing emissions from simulation
□ Working/breathing loss emissions from tanks and/or loading emissions if simulation is used to quantify those emissions

Additional information may be requested if necessary.

GENERAL INFORMATION

1. Bulk Storage Area Name	2. Tank Name
3. Emission Unit ID number	4. Emission Point ID number
5. Date Installed , Modified or Relocated *(for existing tanks)* Was the tank manufactured after August 23, 2011? ☐ Yes ☐ No	6. Type of change: ☐ New construction ☐ New stored material ☐ Other ☐ Relocation
7A. Description of Tank Modification *(if applicable)*	
7B. Will more than one material be stored in this tank? *If so, a separate form must be completed for each material.* ☐ Yes ☐ No	
7C. Was USEPA Tanks simulation software utilized? ☐ Yes ☐ No ***If Yes, please provide the appropriate documentation and items 8-42 below are not required.***	

TANK INFORMATION

8. Design Capacity *(specify barrels or gallons).* Use the internal cross-sectional area multiplied by internal height.	
9A. Tank Internal Diameter (ft.)	9B. Tank Internal Height (ft.)
10A. Maximum Liquid Height (ft.)	10B. Average Liquid Height (ft.)
11A. Maximum Vapor Space Height (ft.)	11B. Average Vapor Space Height (ft.)
12. Nominal Capacity *(specify barrels or gallons)*. This is also known as "working volume".	
13A. Maximum annual throughput (gal/yr)	13B. Maximum daily throughput (gal/day)
14. Number of tank turnovers per year	15. Maximum tank fill rate (gal/min)
16. Tank fill method ☐ Submerged ☐ Splash ☐ Bottom Loading	
17. Is the tank system a variable vapor space system? ☐ Yes ☐ No If yes, (A) What is the volume expansion capacity of the system (gal)? (B) What are the number of transfers into the system per year?	
18. Type of tank (check all that apply): ☐ Fixed Roof ☐ vertical ☐ horizontal ☐ flat roof ☐ cone roof ☐ dome roof ☐ other (describe) ☐ External Floating Roof ☐ pontoon roof ☐ double deck roof ☐ Domed External (or Covered) Floating Roof ☐ Internal Floating Roof ☐ vertical column support ☐ self-supporting ☐ Variable Vapor Space ☐ lifter roof ☐ diaphragm ☐ Pressurized ☐ spherical ☐ cylindrical ☐ Other (describe)	

PRESSURE/VACUUM CONTROL DATA

19. Check as many as apply:

☐ Does Not Apply ☐ Rupture Disc (psig)

☐ Inert Gas Blanket of _____ ☐ Carbon Adsorption[1]

☐ Vent to Vapor Combustion Device[1] (vapor combustors, flares, thermal oxidizers, enclosed combustors)

☐ Conservation Vent (psig) ☐ Condenser[1]

Vacuum Setting Pressure Setting

☐ Emergency Relief Valve (psig)

Vacuum Setting Pressure Setting

☐ Thief Hatch Weighted ☐ Yes ☐ No

[1] Complete appropriate Air Pollution Control Device Sheet

20. Expected Emission Rate (submit Test Data or Calculations here or elsewhere in the application).

Material Name	**Flashing Loss**		**Breathing Loss**		**Working Loss**		**Total Emissions Loss**		**Estimation Method[1]**
	lb/hr	**tpy**	**lb/hr**	**tpy**	**lb/hr**	**tpy**	**lb/hr**	**tpy**	

[1] EPA = EPA Emission Factor, MB = Material Balance, SS = Similar Source, ST = Similar Source Test, Throughput Data, O = Other (specify)
Remember to attach emissions calculations, including TANKS Summary Sheets and other modeling summary sheets if applicable.

TANK CONSTRUCTION AND OPERATION INFORMATION			
21. Tank Shell Construction: ☐ Riveted ☐ Gunite lined ☐ Epoxy-coated rivets ☐ Other (describe)			
21A. Shell Color:	21B. Roof Color:	21C. Year Last Painted:	
22. Shell Condition (if metal and unlined): ☐ No Rust ☐ Light Rust ☐ Dense Rust ☐ Not applicable			
22A. Is the tank heated? ☐ Yes ☐ No	22B. If yes, operating temperature:	22C. If yes, how is heat provided to tank?	
23. Operating Pressure Range (psig): **Must be listed for tanks using VRUs with closed vent system.**			
24. Is the tank a **Vertical Fixed Roof Tank**? ☐ Yes ☐ No	24A. If yes, for dome roof provide radius (ft):	24B. If yes, for cone roof, provide slop (ft/ft):	
25. Complete item 25 for **Floating Roof Tanks** ☐ Does not apply ☐			
25A. Year Internal Floaters Installed:			
25B. Primary Seal Type *(check one):* ☐ Metallic (mechanical) shoe seal ☐ Liquid mounted resilient seal ☐ Vapor mounted resilient seal ☐ Other (describe):			
25C. Is the Floating Roof equipped with a secondary seal? ☐ Yes ☐ No			
25D. If yes, how is the secondary seal mounted? *(check one)* ☐ Shoe ☐ Rim ☐ Other (describe):			
25E. Is the floating roof equipped with a weather shield? ☐ Yes ☐ No			
25F. Describe deck fittings:			
26. Complete the following section for **Internal Floating Roof Tanks** ☐ Does not apply			
26A. Deck Type: ☐ Bolted ☐ Welded	26B. For bolted decks, provide deck construction:		
26C. Deck seam. Continuous sheet construction: ☐ 5 ft. wide ☐ 6 ft. wide ☐ 7 ft. wide ☐ 5 x 7.5 ft. wide ☐ 5 x 12 ft. wide ☐ other (describe)			
26D. Deck seam length (ft.):	26E. Area of deck (ft^2):	26F. For column supported tanks, # of columns:	26G. For column supported tanks, diameter of column:
27. Closed Vent System with VRU? ☐ Yes ☐ No			
28. Closed Vent System with Enclosed Combustor? ☐ Yes ☐ No			
SITE INFORMATION			
29. Provide the city and state on which the data in this section are based:			
30. Daily Avg. Ambient Temperature (°F):	31. Annual Avg. Maximum Temperature (°F):		
32. Annual Avg. Minimum Temperature (°F):	33. Avg. Wind Speed (mph):		
34. Annual Avg. Solar Insulation Factor (BTU/ft^2-day):	35. Atmospheric Pressure (psia):		
LIQUID INFORMATION			
36. Avg. daily temperature range of bulk liquid (°F):	36A. Minimum (°F):	36B. Maximum (°F):	
37. Avg. operating pressure range of tank (psig):	37A. Minimum (psig):	37B. Maximum (psig):	
38A. Minimum liquid surface temperature (°F):	38B. Corresponding vapor pressure (psia):		
39A. Avg. liquid surface temperature (°F):	39B. Corresponding vapor pressure (psia):		
40A. Maximum liquid surface temperature (°F):	40B. Corresponding vapor pressure (psia):		
41. Provide the following for each liquid or gas to be stored in the tank. Add additional pages if necessary.			
41A. Material name and composition:			
41B. CAS number:			
41C. Liquid density (lb/gal):			
41D. Liquid molecular weight (lb/lb-mole):			

41E. Vapor molecular weight (lb/lb-mole):			
41F. Maximum true vapor pressure (psia):			
41G. Maximum Reid vapor pressure (psia):			
41H. Months Storage per year. From: To:			
42. Final maximum gauge pressure and temperature prior to transfer into tank used as inputs into flashing emission calculations.			

STORAGE TANK DATA TABLE

List all deminimis storage tanks (i.e. lube oil, glycol, diesel etc.)

Source ID #[1]	Status[2]	Content[3]	Volume[4]

1. Enter the appropriate Source Identification Numbers (Source ID #) for each storage tank located at the compressor station. Tanks should be designated T01, T02, T03, etc.
2. Enter storage tank Status using the following:
   - EXIST Existing Equipment
   - NEW Installation of New Equipment
   - REM Equipment Removed
3. Enter storage tank content such as condensate, pipeline liquids, glycol (DEG or TEG), lube oil, diesel, mercaptan etc.
4. Enter the maximum design storage tank volume in gallons.

ATTACHMENT L – SMALL HEATERS AND REBOILERS NOT SUBJECT TO 40CFR60 SUBPART DC
DATA SHEET

Complete this data sheet for each small heater and reboiler not subject to 40CFR60 Subpart Dc at the facility. ***The Maximum Design Heat Input (MDHI) must be less than 10 MMBTU/hr.***

Emission Unit ID#[1]	Emission Point ID#[2]	Emission Unit Description (manufacturer, model #)	Year Installed/ Modified	Type[3] and Date of Change	Maximum Design Heat Input (MMBTU/hr)[4]	Fuel Heating Value (BTU/scf)[5]

1 Enter the appropriate Emission Unit (or Source) identification number for each fuel burning unit located at the production pad. Gas Producing Unit Burners should be designated GPU-1, GPU-2, etc. Heater Treaters should be designated HT-1, HT-2, etc. Heaters or Line Heaters should be designated LH-1, LH-2, etc. For sources, use 1S, 2S, 3S…or other appropriate designation. Enter glycol dehydration unit Reboiler Vent data on the Glycol Dehydration Unit Data Sheet.

2 Enter the appropriate Emission Point identification numbers for each fuel burning unit located at the production pad. Gas Producing Unit Burners should be designated GPU-1, GPU-2, etc. Heater Treaters should be designated HT-1, HT-2, etc. Heaters or Line Heaters should be designated LH-1, LH-2, etc. For emission points, use 1E, 2E, 3E…or other appropriate designation.

3 New, modification, removal

4 Enter design heat input capacity in MMBtu/hr.

5 Enter the fuel heating value in BTU/standard cubic foot.

ATTACHMENT M – INTERNAL COMBUSTION ENGINE DATA SHEET							
Complete this data sheet for each internal combustion engine at the facility. Include manufacturer performance data sheet(s) or any other supporting document if applicable. Use extra pages if necessary. *Generator(s) and microturbine generator(s) shall also use this form.*							
Emission Unit ID#[1]							
Engine Manufacturer/Model							
Manufacturers Rated bhp/rpm							
Source Status[2]							
Date Installed/ Modified/Removed/Relocated[3]							
Engine Manufactured /Reconstruction Date[4]							
Check all applicable Federal Rules for the engine (include EPA Certificate of Conformity if applicable)[5]		☐40CFR60 Subpart JJJJ ☐JJJJ Certified? ☐40CFR60 Subpart IIII ☐IIII Certified? ☐40CFR63 Subpart ZZZZ ☐NESHAP ZZZZ/ NSPS JJJJ Window ☐NESHAP ZZZZ Remote Sources		☐40CFR60 Subpart JJJJ ☐JJJJ Certified? ☐40CFR60 Subpart IIII ☐IIII Certified? ☐40CFR63 Subpart ZZZZ ☐NESHAP ZZZZ/ NSPS JJJJ Window ☐NESHAP ZZZZ Remote Sources		☐40CFR60 Subpart JJJJ ☐JJJJ Certified? ☐40CFR60 Subpart IIII ☐IIII Certified? ☐40CFR63 Subpart ZZZZ ☐NESHAP ZZZZ/ NSPS JJJJ Window ☐NESHAP ZZZZ Remote Sources	
Engine Type[6]							
APCD Type[7]							
Fuel Type[8]							
H_2S (gr/100 scf)							
Operating bhp/rpm							
BSFC (BTU/bhp-hr)							
Hourly Fuel Throughput		ft^3/hr gal/hr		ft^3/hr gal/hr		ft^3/hr gal/hr	
Annual Fuel Throughput (Must use 8,760 hrs/yr unless emergency generator)		$MMft^3$/yr gal/yr		$MMft^3$/yr gal/yr		$MMft^3$/yr gal/yr	
Fuel Usage or Hours of Operation Metered		Yes ☐ No ☐		Yes ☐ No ☐		Yes ☐ No ☐	
Calculation Methodology[9]	**Pollutant[10]**	**Hourly PTE (lb/hr)[11]**	**Annual PTE (tons/year)[11]**	**Hourly PTE (lb/hr)[11]**	**Annual PTE (tons/year)[11]**	**Hourly PTE (lb/hr)[11]**	**Annual PTE (tons/year)[11]**
	NO_x						
	CO						
	VOC						
	SO_2						
	PM_{10}						
	Formaldehyde						
	Total HAPs						
	GHG (CO_2e)						

1 Enter the appropriate Source Identification Number for each natural gas-fueled reciprocating internal combustion compressor/generator engine located at the compressor station. Multiple compressor engines should be designated CE-1, CE-2, CE-3 etc. Generator engines should be designated GE-1, GE-2, GE-3 etc. Microturbine generator engines should be designated MT-1, MT-2, MT-3 etc. If more than three (3) engines exist, please use additional sheets.

2 Enter the Source Status using the following codes:

NS	Construction of New Source (installation)	ES	Existing Source
MS	Modification of Existing Source	RS	Relocated Source
REM	Removal of Source		

3 Enter the date (or anticipated date) of the engine's installation (construction of source), modification, relocation or removal.

4 Enter the date that the engine was manufactured, modified or reconstructed.

5 Is the engine a certified stationary spark ignition internal combustion engine according to 40CFR60 Subpart IIII/JJJJ? If so, the engine and control device must be operated and maintained in accordance with the manufacturer's emission-related written instructions. You must keep records of conducted maintenance to demonstrate compliance, but no performance testing is required. If the certified engine is not operated and maintained in accordance with the manufacturer's emission-related written instructions, the engine will be considered a non-certified engine and you must demonstrate compliance as appropriate.

Provide a manufacturer's data sheet for all engines being registered.

6 Enter the Engine Type designation(s) using the following codes:

2SLB	Two Stroke Lean Burn	4SRB	Four Stroke Rich Burn
4SLB	Four Stroke Lean Burn		

7 Enter the Air Pollution Control Device (APCD) type designation(s) using the following codes:

A/F	Air/Fuel Ratio	IR	Ignition Retard
HEIS	High Energy Ignition System	SIPC	Screw-in Precombustion Chambers
PSC	Prestratified Charge	LEC	Low Emission Combustion
NSCR	Rich Burn & Non-Selective Catalytic Reduction	OxCat	Oxidation Catalyst
SCR	Lean Burn & Selective Catalytic Reduction		

8 Enter the Fuel Type using the following codes:

PQ	Pipeline Quality Natural Gas	RG	Raw Natural Gas /Production Gas	D	Diesel

9 Enter the Potential Emissions Data Reference designation using the following codes. Attach all reference data used.

MD	Manufacturer's Data	AP	AP-42	
GR	GRI-HAPCalc™	OT	Other	(please list)

10 Enter each engine's Potential to Emit (PTE) for the listed regulated pollutants in pounds per hour and tons per year. PTE shall be calculated at manufacturer's rated brake horsepower and may reflect reduction efficiencies of listed Air Pollution Control Devices. Emergency generator engines may use 500 hours of operation when calculating PTE. PTE data from this data sheet shall be incorporated in the *Emissions Summary Sheet*.

11 PTE for engines shall be calculated from manufacturer's data unless unavailable.

Engine Air Pollution Control Device
(Emission Unit ID# , use extra pages as necessary)

Air Pollution Control Device Manufacturer's Data Sheet included?
Yes ☐ No ☐

☐ NSCR ☐ SCR ☐ Oxidation Catalyst

Provide details of process control used for proper mixing/control of reducing agent with gas stream:

Manufacturer:	Model #:
Design Operating Temperature: °F	Design gas volume: scfm
Service life of catalyst:	Provide manufacturer data? ☐Yes ☐ No
Volume of gas handled: acfm at °F	Operating temperature range for NSCR/Ox Cat: From °F to °F
Reducing agent used, if any:	Ammonia slip (ppm):

Pressure drop against catalyst bed (delta P): inches of H_2O

Provide description of warning/alarm system that protects unit when operation is not meeting design conditions:

Is temperature and pressure drop of catalyst required to be monitored per 40CFR63 Subpart ZZZZ?
☐ Yes ☐ No

How often is catalyst recommended or required to be replaced (hours of operation)?

How often is performance test required?
☐ Initial
☐ Annual
☐ Every 8,760 hours of operation
☐ Field Testing Required
☐ No performance test required. If so, why (please list any maintenance required and the applicable sections in NSPS/GACT,

ATTACHMENT N – TANKER TRUCK LOADING DATA SHEET

Complete this data sheet for each new or modified bulk liquid transfer area or loading rack at the facility. This is to be used for bulk liquid transfer operations to tanker trucks. Use extra pages if necessary.

Truck Loadout Collection Efficiencies

The following applicable capture efficiencies of a truck loadout are allowed:

- For tanker trucks passing the MACT level annual leak test – 99.2%
- For tanker trucks passing the NSPS level annual leak test – 98.7%
- For tanker trucks not passing one of the annual leak tests listed above – 70%

Compliance with this requirement shall be demonstrated by keeping records of the applicable MACT or NSPS Annual Leak Test certification for ***every*** truck and railcar loaded/unloaded. This requirement can be satisfied if the trucking company provided certification that its entire fleet was compliant. This certification must be submitted in writing to the Director of the DAQ. These additional requirements must be noted in the Registration Application and will be noted on the issued G35-D Registration.

Emission Unit ID#:	Emission Point ID#:	Year Installed/Modified:
Emission Unit Description:		
Loading Area Data		
Number of Pumps:	Number of Liquids Loaded:	Max number of trucks loading at one (1) time:
Are tanker trucks pressure tested for leaks at this or any other location? ☐ Yes ☐ No ☐ Not Required If Yes, Please describe:		
Provide description of closed vent system and any bypasses.		
Are any of the following truck loadout systems utilized? ☐ Closed System to tanker truck passing a MACT level annual leak test? ☐ Closed System to tanker truck passing a NSPS level annual leak test? ☐ Closed System to tanker truck not passing an annual leak test and has vapor return?		

Projected Maximum Operating Schedule (for rack or transfer point as a whole)

Time	Jan – Mar	Apr - Jun	Jul – Sept	Oct - Dec
Hours/day				
Days/week				

Bulk Liquid Data (use extra pages as necessary)

Liquid Name			
Max. Daily Throughput (1000 gal/day)			
Max. Annual Throughput (1000 gal/yr)			
Loading Method[1]			
Max. Fill Rate (gal/min)			
Average Fill Time (min/loading)			
Max. Bulk Liquid Temperature (°F)			
True Vapor Pressure[2]			
Cargo Vessel Condition[3]			
Control Equipment or Method[4]			

Max. Collection Efficiency (%)				
Max. Control Efficiency (%)				
Max.VOC Emission Rate	Loading (lb/hr)			
	Annual (ton/yr)			
Max.HAP Emission Rate	Loading (lb/hr)			
	Annual (ton/yr)			
Estimation Method[5]				

1 BF Bottom Fill SP Splash Fill SUB Submerged Fill

2 At maximum bulk liquid temperature

3 B Ballasted Vessel C Cleaned U Uncleaned (dedicated service)
O Other (describe)

4 List as many as apply (complete and submit appropriate Air Pollution Control Device Sheets)
CA Carbon Adsorption VB Dedicated Vapor Balance (closed system)
ECD Enclosed Combustion Device F Flare
TO Thermal Oxidization or Incineration

5 EPA EPA Emission Factor in AP-42 MB Material Balance
TM Test Measurement based upon test data submittal O Other (describe)

ATTACHMENT O – GLYCOL DEHYDRATION UNIT DATA SHEET

Complete this data sheet for each Glycol Dehydration Unit, Reboiler, Flash Tank and/or Regenerator at the facility. Include gas sample analysis and GRI- GLYCalc™ input and aggregate report. Use extra pages if necessary.

Manufacturer:	Model:
Max. Dry Gas Flow Rate: mmscf/day	Reboiler Design Heat Input: MMBTU/hr
Design Type: ☐ TEG ☐ DEG ☐ EG	Source Status[1]:
Date Installed/Modified/Removed[2]:	Regenerator Still Vent APCD/ERD[3]:
Control Device/ERD ID#[3]:	Fuel HV (BTU/scf):
H_2S Content (gr/100 scf):	Operation (hours/year):
Pump Rate (scfm):	
Water Content (wt %) in: Wet Gas:	Dry Gas:

Is the glycol dehydration unit exempt from 40CFR63 Section 764(d)? ☐Yes ☐No: If Yes, answer the following:

The actual annual average flowrate of natural gas to the glycol dehydration unit is less than 85 thousand standard cubic meters per day, as determined by the procedures specified in §63.772(b)(1) of this subpart. ☐Yes ☐No

The actual average emissions of benzene from the glycol dehydration unit process vent to the atmosphere are less than 0.90 megagram per year (1 ton per year), as determined by the procedures specified in §63.772(b)(2) of this subpart. ☐Yes ☐No

Is the glycol dehydration unit located within an Urbanized Area (UA) or Urban Cluster (UC)? ☐Yes ☐No

Is a lean glycol pump optimization plan being utilized? ☐Yes ☐No

Recycling the glycol dehydration unit back to the flame zone of the reboiler.
☐ Yes ☐ No
If yes:
Is the reboiler configured to accept flash drum vapors (straight from the glycol dehydrator)? ☐ Yes ☐ No
Is the reboiler configured to accept still vent vapors (after a condenser)? ☐ Yes ☐ No
Is the reboiler configured to accept both in the same operation? ☐ Yes ☐ No

Recycling the glycol dehydration unit back to the flame zone of the reboiler and mixed with fuel.
☐ Yes ☐ No

What happens when temperature controller shuts off fuel to the reboiler?
☐ Still vent emissions to the atmosphere.
☐ Still vent emissions stopped with valve.
☐ Still vent emissions to glow plug.

Please indicate if the following equipment is present.
☐ Flash Tank
☐ Burner management system that continuously burns condenser or flash tank vapors

Control Device Technical Data

Pollutants Controlled	Manufacturer's Guaranteed Control Efficiency (%)

Emissions Data

Emission Unit ID / Emission Point ID[4]	Description	Calculation Methodology[5]	PTE[6]	Controlled Maximum Hourly Emissions (lb/hr)	Controlled Maximum Annual Emissions (tpy)
	Reboiler Vent		NO_x		
			CO		

			VOC		
			SO_2		
			PM_{10}		
			GHG (CO_2e)		
	Glycol Regenerator Still Vent	GRI-GlyCalc™	VOC		
		GRI-GlyCalc™	Benzene		
		GRI-GlyCalc™	Toluene		
		GRI-GlyCalc™	Ethylbenzene		
		GRI-GlyCalc™	Xylenes		
		GRI-GlyCalc™	n-Hexane		
	Glycol Flash Tank	GRI-GlyCalc™	VOC		
		GRI-GlyCalc™	Benzene		
		GRI-GlyCalc™	Toluene		
		GRI-GlyCalc™	Ethylbenzene		
		GRI-GlyCalc™	Xylenes		
		GRI-GlyCalc™	n-Hexane		

1 Enter the Source Status using the following codes:
NS Construction of New Source ES Existing Source
MS Modification of Existing Source

2 Enter the date (or anticipated date) of the glycol dehydration unit's installation (construction of source), modification or removal.

3 Enter the Air Pollution Control Device (APCD)/Emission Reduction Device (ERD) type designation using the following codes and the device ID number:
NA None CD Condenser FL Flare
CC Condenser/Combustion Combination TO Thermal Oxidizer O Other (please list)

4 Enter the appropriate Emission Unit ID Numbers and Emission Point ID Numbers for the glycol dehydration unit reboiler vent and glycol regenerator still vent. The glycol dehydration unit reboiler vent and glycol regenerator still vent should be designated RBV-1 and RSV-1, respectively. If the compressor station incorporates multiple glycol dehydration units, a Glycol Dehydration Emission Unit Data Sheet shall be completed for each, using Source Identification RBV-2 and RSV-2, RBV-3 and RSV-3, etc.

5 Enter the Potential Emissions Data Reference designation using the following codes:
MD Manufacturer's Data AP AP-42
GR GRI-GLYCalc™ OT Other (please list)

6 Enter the Reboiler Vent and Glycol Regenerator Still Vent Potential to Emit (PTE) for the listed regulated pollutants in lbs per hour and tons per year. The Glycol Regenerator Still Vent potential emissions may be determined using the most recent version of the thermodynamic software model GRI-GLYCalc™ (Radian International LLC & Gas Research Institute). **Attach all referenced Potential Emissions Data (or calculations) and the GRI-GLYCalc™ Aggregate Calculations Report (shall include emissions reports, equipment reports, and stream reports) to this Glycol Dehydration Emission Unit Data Sheet(s). Backup pumps do not have to be considered as operating for purposes of PTE.** This PTE data shall be incorporated in the Emissions Summary Sheet.

ATTACHMENT P – PNEUMATIC CONTROLLERS DATA SHEET

Are there any continuous bleed natural gas driven pneumatic controllers at this facility that commenced construction, modification or reconstruction after August 23, 2011, and on or before September 18, 2015?

☐ Yes ☐ No

Please list approximate number.

Are there any continuous bleed natural gas driven pneumatic controllers at this facility that commenced construction, modification or reconstruction after September 18, 2015?

☐ Yes ☐ No

Please list approximate number.

Are there any continuous bleed natural gas driven pneumatic controllers at this facility with a bleed rate greater than 6 standard cubic feet per hour that are required based on functional needs, including but not limited to response time, safety and positive actuation that commenced construction, modification or reconstruction after August 23, 2011, and on or before September 18, 2015?

☐ Yes ☐ No

Please list approximate number.

Are there any continuous bleed natural gas driven pneumatic controllers at this facility with a bleed rate greater than 6 standard cubic feet per hour that are required based on functional needs, including but not limited to response time, safety and positive actuation that commenced construction, modification or reconstruction after September 18, 2015?

☐ Yes ☐ No

Please list approximate number.

ATTACHMENT Q – CENTRIFUGAL COMPRESSOR DATA SHEET

Are there any centrifugal compressors at this facility that commenced construction, modification or reconstruction after August 23, 2011, and on or before September 18, 2015?

☐ Yes ☐ No

Please list:

Emission Unit ID#	Compressor Description

Are there any centrifugal compressors at this facility that commenced construction, modification or reconstruction after September 18, 2015?

☐ Yes ☐ No

Please list:

Emission Unit ID#	Compressor Description

ATTACHMENT R – RECIPROCATING COMPRESSOR DATA SHEET

Are there any reciprocating compressors at this facility that commenced construction, modification or reconstruction after August 23, 2011, and on or before September 18, 2015?

☐ Yes ☐ No

Please list:

Emission Unit ID#	Compressor Description

Are there any reciprocating compressors at this facility that commenced construction, modification or reconstruction after September 18, 2015?

☐ Yes ☐ No

Please list:

Emission Unit ID#	Compressor Description

ATTACHMENT S – BLOWDOWN AND PIGGING OPERATIONS DATA SHEET

Will there be any blowdown and pigging operations that occur at this facility?

☐ Yes ☐ No

Please list:

Type of Event	# of Events (event/yr)	Amount Vented per event (scf/event)	MW of vented gas (lb/lb-mol)	Total Emissions (ton/yr)	VOC weight fraction	VOC emissions (ton/yr)
Compressor Blowdown						
Compressor Startup						
Plant Shutdown						
Low Pressure Pig Venting						
High Pressure Pig Venting						

Type of Event	# of Events (event/yr)	Amount Vented per event (scf/event)	MW of vented gas (lb/lb-mol)	Total Emissions (ton/yr)	HAP weight fraction	HAP emissions (ton/yr)
Compressor Blowdown						
Compressor Startup						
Plant Shutdown						
Low Pressure Pig Venting						
High Pressure Pig Venting						

ATTACHMENT T – AIR POLLUTION CONTROL DEVICE / EMISSION REDUCTION DEVICE SHEETS

Complete the applicable air pollution control device sheets for each flare, vapor combustor, thermal oxidizer, condenser, adsorption system, vapor recovery unit, BTEX Eliminator, Reboiler with and without Glow Plug, etc. at the facility. Use extra pages if necessary.

Emissions calculations must be performed using the most conservative control device efficiency.

The following five (5) rows are only to be completed if registering an alternative air pollution control device.	
Emission Unit ID:	Make/Model:
Primary Control Device ID:	Make/Model:
Control Efficiency (%):	APCD/ERD Data Sheet Completed: ☐Yes ☐No
Secondary Control Device ID:	Make/Model:
Control Efficiency (%):	APCD/ERD Data Sheet Completed: ☐Yes ☐No

VAPOR COMBUSTION
(Including Enclosed Combustors)

General Information

Control Device ID#:	Installation Date: ☐ New ☐ Modified ☐ Relocated	
Maximum Rated Total Flow Capacity scfh scfd	Maximum Design Heat Input (from mfg. spec sheet) MMBTU/hr	Design Heat Content BTU/scf

Control Device Information

Type of Vapor Combustion Control?

☐ Enclosed Combustion Device ☐ Elevated Flare ☐ Ground Flare
☐ Thermal Oxidizer

Manufacturer: Model:	Hours of operation per year?

List the emission units whose emissions are controlled by this vapor control device (Emission Point ID#)

Emission Unit ID#	Emission Source Description	Emission Unit ID#	Emission Source Description

If this vapor combustor controls emissions from more than six (6) emission units, please attach additional pages.

Assist Type (Flares only)	Flare Height	Tip Diameter	Was the design per §60.18?
☐ Steam ☐ Air ☐ Pressure ☐ Non	feet	feet	☐ Yes ☐ No Provide determination.

Waste Gas Information

Maximum Waste Gas Flow Rate (scfm)	Heat Value of Waste Gas Stream BTU/ft^3	Exit Velocity of the Emissions Stream (ft/s)

Provide an attachment with the characteristics of the waste gas stream to be burned.

Pilot Gas Information

Number of Pilot Lights	Fuel Flow Rate to Pilot Flame per Pilot scfh	Heat Input per Pilot BTU/hr	Will automatic re-ignition be used? ☐ Yes ☐ No

If automatic re-ignition is used, please describe the method.

Is pilot flame equipped with a monitor to detect the presence of the flame? ☐ Yes ☐ No	If Yes, what type? ☐ Thermocouple ☐ Infrared ☐ Ultraviolet ☐ Camera ☐ Other:

Describe all operating ranges and maintenance procedures required by the manufacturer to maintain the warranty. *(If unavailable, please indicate).*

Additional information attached? ☐ Yes ☐ No
Please attach copies of manufacturer's data sheets, drawings, flame demonstration per §60.18 or §63.11(b) and performance testing.

CONDENSER		
General Information		
Control Device ID#:	Installation Date: ☐ New ☐ Modified ☐ Relocated	
Manufacturer:	Model:	Control Device Name:
Control Efficiency (%):		
Manufacturer's required temperature range for control efficiency. °F		
Describe the warning and/or alarm system that protects against operation when unit is not meeting the design requirements:		
Describe all operating ranges and maintenance procedures required by the manufacturer to maintain the warranty.		
Additional information attached? ☐ Yes ☐ No Please attach copies of manufacturer's data sheets.		
Is condenser routed to a secondary APCD or ERD? ☐ Yes ☐ No		

ADSORPTION SYSTEM

General Information

Control Device ID#:	Installation Date: ☐ New ☐ Modified ☐ Relocated	
Manufacturer:	Model:	Control Device Name:
Design Inlet Volume: scfm	Adsorbent charge per adsorber vessel and number of adsorber vessels:	
Length of Mass Transfer Zone supplied by the manufacturer:	Adsorber diameter: ft Adsorber area: ft^2	
Adsorbent type and physical properties:	Overall Control Efficiency (%):	
Working Capacity of Adsorbent (%):		

Operating Parameters

Inlet volume: scfm @ °F	
Adsorption time per adsorption bed (life expectancy):	Breakthrough Capacity (lbs of VOC/100 lbs of adsorbent):
Temperature range of carbon bed adsorber. °F - °F	

Control Device Technical Data

Pollutants Controlled	Manufacturer's Guaranteed Control Efficiency (%)

Describe the warning and/or alarm system that protects against operation when unit is not meeting the design requirements:
Has the control device been tested by the manufacturer and certified?
Describe all operating ranges and maintenance procedures required by the manufacturer to maintain the warranty.
Additional information attached? ☐ Yes ☐ No Please attach copies of manufacturer's data sheets, drawings, and performance testing.

VAPOR RECOVERY UNIT

General Information

Emission Unit ID#:	Installation Date: ☐ New ☐ Modified ☐ Relocated

Device Information

Manufacturer:
Model:

List the emission units whose emissions are controlled by this vapor recovery unit (Emission Point ID#)

Emission Unit ID#	Emission Source Description	Emission Unit ID#	Emission Source Description

If this vapor recovery unit controls emissions from more than six (6) emission units, please attach additional pages.

Additional information attached? ☐ Yes ☐ No
Please attach copies of manufacturer's data sheets, drawings, and performance testing.

The registrant may claim a capture and control efficiency of 95 % (which accounts for 5% downtime) for the vapor recovery unit.

The registrant may claim a capture and control efficiency of 98% if the VRU has a backup flare that meet the requirements of Section 8.1.2 of this general permit.

The registrant may claim a capture and control efficiency of 98% if the VRU has a backup VRU.

ATTACHMENT U – EMISSIONS CALCULATIONS

Provide detailed potential to emit (PTE) emission calculations for criteria and hazardous air pollutants (HAPs) for each emission point identified in the application. For hazardous air pollutants and volatile organic compounds (VOCs), the speciated emission calculations must be included.

Use the following guidelines to ensure complete emission calculations:

- All emission sources and fugitive emissions are included in the emission calculations, as well as all methods used to calculate the emissions.
- Proper emission point identification numbers and APCD and ERD identification numbers are used consistently in the emission calculations that are used throughout the application.
- A printout of the emission summary sheets is attached to the registration application.
- Printouts of any modeling must be included with the emission calculations. The modeling printout must show all inputs/outputs or assumptions that the modeled emissions are based upon.
- If emissions are provided from the manufacturer, the manufacturer's documentation and/or certified emissions must also be included.
- The emission calculations results must match the emissions provided on the emissions summary sheet.
- If calculations are based on a compositional analysis of the gas, attach the laboratory analysis. Include the following information: the location that the sample was taken as representative; the date the sample was taken; and, if the sample is considered representative, the reasons that it is considered representative (same gas field, same formation and depth, distance from actual site, etc.).
- Potential to emit (PTE) from the main or backup control device may be calculated based on the highest emission from a control device that could handle the stream, plus any intrinsic emission such as those from pilot flames.
- Provide any additional clarification as necessary. Additional clarification or information is especially helpful when reviewing modeling calculations to assist the engineer in understanding the basis of assumptions and/or inputs.

Please follow specific guidance provided on the emissions summary sheet when providing the calculations.

ATTACHMENT V – FACILITY-WIDE CONTROLLED EMISSIONS SUMMARY SHEET

List all sources of emissions in this table. Use extra pages if necessary.

Emission Point ID#	NO_x		CO		VOC		SO_2		PM_{10}		$PM_{2.5}$		GHG (CO_2e)	
	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy
TOTAL														

Annual emissions shall be based on 8,760 hours per year of operation for all emission units except emergency generators.
According to 45CSR14 Section 2.43.e, fugitive emissions are not included in the major source determination because it is not listed as one of the source categories in Table 1. Therefore, fugitive emissions shall not be included in the PTE above.

ATTACHMENT V – FACILITY-WIDE HAP CONTROLLED EMISSIONS SUMMARY SHEET

List all sources of emissions in this table. Use extra pages if necessary.

Emission Point ID#	Formaldehyde		Benzene		Toluene		Ethylbenzene		Xylenes		Hexane		Total HAPs	
	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy	lb/hr	tpy
TOTAL														

Annual emissions shall be based on 8,760 hours per year of operation for all emission units except emergency generators.
According to 45CSR14 Section 2.43.e, fugitive emissions are not included in the major source determination because it is not listed as one of the source categories in Table 1. Therefore, fugitive emissions shall not be included in the PTE above.

ATTACHMENT W – CLASS I LEGAL ADVERTISEMENT

Publication of a proper Class I legal advertisement is a requirement of the G35-D registration process. In the event the applicant's legal advertisement fails to follow the requirements of 45CSR13, Section 8 or the requirements of Chapter 59, Article 3, of the West Virginia Code, the application will be considered incomplete and no further review of the application will occur until this is corrected.

The applicant, utilizing the format for the Class I legal advertisement example provided on the following page, shall have the legal advertisement appear a minimum of one (1) day in the newspaper most commonly read in the area where the facility exists or will be constructed. The notice must be published no earlier than five (5) working days of receipt by this office of your application. The original affidavit of publication must be received by this office no later than the last day of the public comment period.

The advertisement shall contain, at a minimum, the name of the applicant, the type and location of the source, the type and amount of air pollutants that will be discharged (include fugitive emissions separately), the nature of the permit being sought, the proposed start-up date for the source, and a contact telephone number for more information.

The location of the source should be as specific as possible starting with: 1.) the street address of the source; 2.) the nearest street or road; 3.) the nearest town or unincorporated area, 4.) the county, and 5.) latitude and longitude coordinates in decimal format.

Types and amounts of pollutants discharged must include all regulated pollutants (Nitrogen Oxides, Carbon Monoxide, Particulate Matter-2.5, Particulate Matter-10, Volatile Organic Compounds, Sulfur Dioxide, Formaldehyde, Benzene, Toluene, Ethylbenzene, Xylenes, Hexane, Total Hazardous Air Pollutants) and their potential to emit or the permit level being sought in units of tons per year.

In the event the 30th day is a Saturday, Sunday, or legal holiday, the comment period will be extended until 5:00 p.m. on the following regularly scheduled business day.

A list of qualified newspapers that are eligible to publish legal ads may be found:

http://www.sos.wv.gov/elections/resource/Documents/Qualified%20Newspapers.pdf

RECOMMENDED PUBLIC NOTICE TEMPLATE

AIR QUALITY PERMIT NOTICE
Notice of Application

Notice is given that **(Applicant's Legal Name)** has applied to the West Virginia Department of Environmental Protection, Division of Air Quality, for a G35-D **(General Permit Registration, General Permit Modification, General Permit Class II Administrative Update)** for a **natural gas compressor and/or dehydration** facility located on **(Street Name, Road Number, etc.)**, **(in/near City or Town)**, in **(County Name)** County, West Virginia. The latitude and longitude coordinates are: **(Provide latitude and longitude in decimal format, NAD83 Decimal to 5 digits)**.

The applicant estimates the **(Increased, if modification application)** potential to discharge the following Regulated Air Pollutants will be: **(Pollutants and associated amounts in tons per year)**.

Startup of operation is planned to begin on or about the **(Day)** day of **(Month)**, **(Year)**. Written comments will be received by the West Virginia Department of Environmental Protection, Division of Air Quality, 601 57th Street, SE, Charleston, WV 25304, for at least 30 calendar days from the date of publication of this notice.

Any questions regarding this permit application should be directed to the DAQ at (304) 926-0499, extension 1250, during normal business hours.
Dated this the **(Day)** day of **(Month)**, **(Year)**.

By: **(Applicant's Legal Name)**
(Name of Responsible Official)
(Title of Responsible Official)
(Mailing Address)
(City, State and Zip Code)