

# **Bayer CropScience**

# Group 8 Title V Renewal Permit Application

Institute, West Virginia

**Redacted** 

Prepared By
ENVIRONMENTAL RESOURCES MANAGEMENT, Inc.
Hurricane, West Virginia
April 2011

### TITLE V PERMIT APPLICATION CHECKLIST FOR ADMINISTRATIVE COMPLETENESS

prep subi	omplete application is demonstrated when all of the information required below is properly bared, completed and attached. The items listed below are required information which must be mitted with a Title V permit application. Any submittal will be considered incomplete if the nired information is not included.*
	Two signed copies of the application (at least one <u>must</u> contain the original " <i>Certification</i> " page signed and dated in blue ink)
	Correct number of copies of the application on separate CDs or diskettes, (i.e. at least one disc per copy)
	*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
$\boxtimes$	Confidential Information submitted in accordance with 45CSR31



### WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION

### **DIVISION OF AIR QUALITY**

601 57<sup>th</sup> Street SE Charleston, WV 25304 Phone: (304) 926-0475

www.wvdep.org/daq

### TITLE V PERMIT APPLICATION - GENERAL FORMS

#### Section 1: General Information

<b>3</b>		
Name of Applicant (As registered with the WV Secretary of State's Office):  Bayer CropScience	2. Facility Name or Location: Route 25 Institute, West Virginia 25112	
3. DAQ Plant ID No.:	4. Federal Employer ID No. (FEIN):	
0 3 9 — 0 0 0 0 7	1 3 2 8 8 7 8 2 5	
5. Permit Application Type:		
-	perations commence? MM/DD/1961-62 expiration date of the existing permit? 11/02/2011	
6. Type of Business Entity:	7. Is the Applicant the:	
☐ Corporation ☐ Governmental Agency ☐ Partnership ☐ Limited Partnership	Owner Operator Both	
8. Number of onsite employees: $\sim 500$	If the Applicant is not both the owner and operator, please provide the name and address of the other party.	
9. Governmental Code:		
<ul> <li>☑ Privately owned and operated; 0</li> <li>☐ Federally owned and operated; 1</li> <li>☐ State government owned and operated; 2</li> </ul>	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 informatio	n (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		

11. Mailing Address				
<b>Street or P.O. Box:</b> P.O. Box 1005				
City: Institute		State: WV		<b>Zip:</b> 25112 -
<b>Telephone Number:</b> ( 304 ) 767 -	6500	Fax Number: ( 304	Fax Number: ( 304 ) 767 - 6879	
12. Facility Location				
Street: Route 25	Street: Route 25 City: Institute		County	: Kanawha
UTM Easting: 432.0 km	UTM Northin	<b>ng:</b> 4,248.3 km	Zone:	☑ 17 or ☐ 18
<b>Directions:</b> Adjacent to Route 25, west of Institute, West Virginia				
Portable Source?				
Is facility located within a nonattainment area?			If yes, fo	or what air pollutants?
Is facility located within 50 miles of another state?			If yes, n Kentuc Ohio	name the affected state(s).
Is facility located within 100 km of a Class I Area <sup>1</sup> ?  Yes No			If yes, n	name the area(s).
If no, do emissions impact a Class I Area <sup>1</sup> ?  Yes No				

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: Steven B. Hedrick	<b>Title:</b> Vice President, Head Institue Industrial Park		
<b>Street or P.O. Box:</b> P.O. Box 1005			
City: Institute	State: WV	<b>Zip:</b> 25112 -	
<b>Telephone Number:</b> ( 304 ) 767 - 6500	<b>Fax Number:</b> ( 304 ) 767 -	- 6879	
E-mail address: N/A			
Environmental Contact: Brian Schmidt		Title: Environmental Specialist	
Street or P.O. Box: P.O. Box 1005			
City: Institute	State: WV	<b>Zip:</b> 25112 -	
<b>Telephone Number:</b> ( 304 ) 767 - 6161	<b>Fax Number:</b> ( 304 ) 767 -	- 6879	
E-mail address: brian.schmidt@bayercropscience.com			
Application Preparer:		Title:	
Company:			
Street or P.O. Box:			
City:	State:	Zip:	
Telephone Number:	Γelephone Number: Fax Number:		
E-mail address:			

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
Phosgene Unit	Phosgene	325199	2869
SEVIN Unit	Carbaryl (SEVIN)	325320	2879
MIC Unit	Methyl Isocyanate	325199	2869

Provide a general description of operations.

#### **Phosgene Unit Process:**

#### 1. Raw materials feed:

Chlorine is supplied by pipeline as a gas from the existing chlorine storage tanks of the Institute plant. Carbon Monoxide is supplied by pipeline from the existing Syngas unit of the Institute plant.

#### 2. Phosgene Reaction:

Chlorine is preheated in the Chlorine superheater E-413 and mixed with Carbon Monoxide before feeding the converter C-410. Chlorine and Carbon Monoxide react in the tubes of C-410 in the presence of an activated carbon catalyst. Chloroform is boiled in the shell side of C-410 to remove the heat of reaction.

#### 3. Phosgene vapor condenser and surge tank:

Phosgene from the converter is condensed by refrigerated Chloroform in E-440 to separate the Phosgene from the excess Carbon Monoxide.

The liquid Phosgene is stored in a 500 gallon surge tank C-460 and fed to the existing Phosgene vaporizer of the MIC unit. The excess Carbon Monoxide saturated in Phosgene is sent to the process vent scrubber C-471.

Refrigerated Chloroform is circulated in the jacket of C-460 to maintain the Phosgene liquid cold.

#### 4. Process vent scrubber:

The process vent scrubber C-471 is installed to remove Phosgene from the excess Carbon Monoxide flow to a concentration below 50 ppm.

Phosgene reacts with Sodium Hydroxide (NaOH) to form Sodium Chloride (NaCl) and Sodium Carbonate (Na<sub>2</sub>CO<sub>3</sub>).

$$COCl_2$$
 +  $4NaOH$   $\rightarrow$   $2NaCl$  +  $Na_2CO_3$  +  $2H_2O$ 

The Carbon Monoxide is sent to the existing MIC unit flare A-242 for destruction.

The scrubber receives, also the analyzer purges and double wall pipe sweep.

The scrubber system consists of circulating pumps, caustic cooler and a caustic storage tank. Caustic is circulated and temperature controlled. Fresh caustic and process water are continuously added to control the caustic (NaOH) concentration between 3 and 10%. Excess liquid is then purged to the process sewer going to the Institute plant Wastewater Treatment Unit.

In the event of the process scrubber not operating, the process vents are sent to the existing MIC Emergency Vent Scrubber C-242 venting to the flare A-242.

#### 5. Converter Cooling Loop:

Vapor Chloroform form the Phosgene Converter C-410 is condensed in the Chloroform Converter condenser E-411. Liquified chloroform is recycled back to the converter C-410 via gravity flow. The closed loop is maintained at constant pressure with nitrogen. Excess pressure is vented through the existing MIC residue treater C-150 to the existing MIC Incinerator/Scrubber system D-242/E-242 for the chloroform destruction.

#### 6. Chloroform Storage:

Fresh chloroform from the existing MIC unit chloroform storage and pump can be supplied to the chloroform storage tank C-430.

Tank C-430 is normally at approximately 10% level at ambient temperatures under a nitrogen pressure between 5 and 10 psig with excess pressure venting through the existing MIC residue treater C-150 to the existing MIC Incinerator/Scrubber system D-242/E-242 for the chloroform destruction.

C-430 purpose is to receive the chloroform inventory of the converter C-410 and condenser E-411 in the event of a shutdown. During start-up, chloroform is heated in the Chloroform start-up Heater E-431 to preheat the converter C-410 prior to initiating the reaction. Chloroform is recirculating back to C-430 in a closed loop system.

#### 7. Chloroform Refrigeration Loop:

Chilled chloroform is circulated in a loop comprising canned pump, brine cooler E-450 and the Phosgene Condenser E-440 and the jacket of C-460. The pressure is maintained by nitrogen in an expansion tank C-452. Excess pressure is vented through the existing MIC Residue Treater C-150 to the existing MIC Incinerator/Scrubber system C-242/E-242 for the chloroform destruction.

#### 8. Emergency vent system:

All chloroform relief valves are vented to the Chloroform Storage Tank C-430. The Chloroform Storage Tank C-430 and all Phosgene and Chlorine relief valves vent to the existing MIC Emergency vent scrubber to remove Phosgene and Chlorine the to the flare.

#### 9. Existing MIC Residue Treater:

The existing MIC residue treater C-150 hydrolyze byproducts from the MIC unit and recover the chloroform contained in these by-products into overhead brine cooled condensers.

The vents from the Phosgene unit containing chloroform will be sent to the MIC unit residue treater. No credit is taken from some chloroform removal and the vents are assumed to be going through the residue treater directly to the existing MIC Incinerator/Scrubber D-242/E-242.

#### 10. Analyzers:

The output of the Phosgene Converter is analyzed continuously to insure total Chlorine conversion (<10ppm) and maintain the excess CO required. A small flow is taken out of the main stream, analyzed and discharged to the Process Vent Scrubber for destruction of the Phosgene and Chlorine content.

#### **MIC Unit Process No. 242:**

Methyl Isocyanate (MIC) is produced by a two-step process. Monomethylamine (MMA) and phosgene (COCl<sub>2</sub>), are reacted to produce methyl carbamoyl chloride (MCC) and by-product hydrogen chloride (HCl). The MCC is then thermally decomposed to form MIC and HCl. The MIC and HCl then flow through a refrigerated CHCl<sub>3</sub> quench and a river water condenser prior to being fed to the phosgene stripping still. The MIC and some HCl recombine in liquid form making a reaction intermediate MCC. The phosgene stripping still removes excess phosgene which is then recycled. The tails flow to the pyrolyzer tanks where the MIC-MCC-CHCl3 mixture is boiled overhead to separate the MCC into MIC and HCl. The HCl is vented from the Pyrolyzer Condenser and flows through a vent condenser to the HCl absorber. The Pyrolyzer Condenser Accumulator receives a CHCl3-MIC mixture which then flows to the MIC refining still where MIC product is made off the top.

#### **SEVIN Unit Process No. 260:**

Technical grade SEVIN Brand Carbaryl Insecticide is produced by reacting methyl isocyanate with alpha naphthol in a toluene solvent. Excess methyl isocyanate is fed to the reaction to convert as much alpha naphthol as possible. Following the reactors, the excess methyl isocyanate is recovered in a stripping still and recycled back to the reactor feed stream.

The carbaryl product is the concentrated in the toluene slurry by evaporative crystallization in series. A continual loop from the second crystallizer feeds one of the three vertical batch centrifuges. The solids cake is then dried utilizing a Wyssmont tray dryer and heated nitrogen. Dried carbaryl is then fluidized to one of seven storage bins to be packaged for shipment.

Recovered liquid from the centrifuges is recrystallized for further centrifugation. The recoverable material is recycled to the crystallization system to become part of the final product stream. The spent solvent, toluene, is then reprocessed for use in the system.

Packaging of the carbaryl insecticide is done in either 25 kg bags or one metric ton supersacks. The material is loaded onto trailers for shipments to formulators, customers, or warehousing facilities.

- 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 (45CSR15)	☐ 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)	☐ Compliance Assurance Monitoring (40CFR64)
☐ NO <sub>x</sub> Budget Trading Program Non-EGUs (45CSR1)	□ NO <sub>x</sub> Budget Trading Program EGUs (45CSR26)

#### 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.

- 40CFR60, Subpart D Standards of Performance for Fossil-Fuel-fired Steam Generators constructed after August 17, 1971
  - Basis for Applicability Determination: Applies to steam generation units with heat input > 250 mmBtu/hr, and were constructed, reconstructed, or modified after 8/17/71. The Unit's thermal oxidize heat input design capacity is < 250 MMBtu/hr.
- 40CFR60, Subpart Db Standards of Performance for Industrial-Commercial-Institutional Steam Generating Units
  - Basis for Applicability Determination: Applies to steam generating units with heat input > 100 mmBtu/hr which were constructed, reconstructed, or modified after 6/19/84. The Unit's thermal oxidizer does not burn one of the listed fuels.
- 40CFR60, Subpart Dc Standards of Performance for Small Industrial-Commercial-Institutional Steam Generating Units.
  - *Basis for Applicability Determination:* Applies to steam generating units with heat input of 10-100 mmBtu/hr which were constructed, reconstructed, or modified after 6/9/89 and burn one of the listed fuels. The Unit's thermal oxidizer does not burn one of the listed fuels.
- 40CFR60, Subpart E Standards of Performance for Incinerators. Basis for Applicability Determination: Applies only to burning solid waste. The Unit's thermal oxidizer only burns gaseous waste.
- 40CFR60, Subpart K Standards of Performance for Storage Vessels for Petroleum Liquids constructed or modified after June 11, 1973 and prior May 19, 1978.
   Basis for Applicability Determination: Petroleum liquids are not stored in vessels with a capacity greater than 40,000 gallons.
- 40CFR60, Subpart Ka Standards of Performance for Storage Vessels for Petroleum Liquids constructed or modified after May 18, 1978 and prior July 23, 1984.
   Basis for Applicability Determination: Petroleum liquids are not stored in vessels with a capacity greater than 40,000 gallons.
- 40CFR60, Subpart O Standards of Performance for Sewage Treatment Plants. Basis for Applicability Determination: The Unit does not operate a municipal treatment plant.
- 40CFR63, Subpart I National Emission Standards for Organic Hazardous Air Pollutants for certain processes subject to the negotiated regulation for Equipment Leaks.

  Basis for Applicability Determination: Subparts YY and FFFF take precedence.
- 40CFR63, Subpart EEEE National Emission Standards for Organic Hazardous Air Pollutants: Organic Liquids Distrution (Non-Gasoline).
  - Basis for Applicability Determination: Storage tanks were below the regulation's capacity or vapor pressure threshold, specifically exempt by the regulation, or are regulated under another MACT regulation.

$\boxtimes$	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).  Open Burning - 45CSR§6-3.1 and 3.2  Asbestos - 40CFR61 and 45CSR15  Odor - 45CSR§4-3.1 (State enforceable only)  Standby Plan for Reducing Emissions - 45CSR§11-5.2  Emission Inventory - WV Code § 22-5-4(a)(14)  Ozone-Depleting Substances - 40CFR82, Subpart F  Risk Management Plan - 40CFR68  NOx Budget Trading Program - 45CSR1  Facility Construction & Operation - 45CSR13, Permit No. R13-223 & R13-226
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.)  Monitoring - N/A  Testing - WV Code § 22-5-4(a)(15) and 45CSR13  Record Keeping Requirements  • Monitoring Information - 45CSR§30-5.1.c.2.A  • Retention of Records - 45CSR§30-5.1.c.2.B  • Odor - 45CSR§30-5.1.c (State enforceable only)  Reporting Requirements  • Responsible Official - 45CSR§30-4.4, 5.1.c.3.D and 5.1.c.3.E  • Ceritified Emissions Statement - 45CSR§30-8  • Compliance Certification - 45CSR§30-5.3.e  • Semi-Annual Monitoring Reports - 45CSR§30-5.1.c.3.A  • Emergencies - Section 2.17 of Title V permit.  • Deviations - 45CSR§30-5.1.c.3.B through D  • New Applicable Requirements - 45CSR§30-4.3.h.1.B
Are you in compliance with all facility-wide applicable requirements?   Yes   No
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

21. Active Permits/Consent Orders			
Date of Issuance MM/DD/YYYY	List any Permit Determinations that Affect the Permit (if any)		
012/19/2006	N/A		
05/28/1976	N/A		
05/21/1976	NA		
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
/ /			
	MM/DD/YYYY  012/19/2006  05/28/1976  05/21/1976  / / / / / / / / / / / / / / / / / / /		

22. Inactive Permits/Obsolete	22. Inactive Permits/Obsolete Permit Conditions				
Permit Number	Date of Issuance	Permit Condition Number			
N/A	N/A	N/A			
	1 1				
	/ /				
	/ /				
	/ /				
	/ /				
	/ /				
	/ /				
	/ /				
	/ /				
	/ /				
	1 1				
	1 1				
	1 1				
	1 1				
	1 1				
	1 1				
	1 1				
	1 1				
	/ /				
	/ /				
	/ /				
	/ /				
	/ /				
	/ /				

Section 3: Facility-Wide Emissions

23. Group 7 Emissions Summary [Tons per Year]		
Criteria Pollutants	Potential Emissions	
Carbon Monoxide (CO)	20.35	
Nitrogen Oxides $(NO_X)$ – Includes startups and diversions.	60.05	
Lead (Pb)	NA	
Particulate Matter (PM <sub>2.5</sub> ) <sup>1</sup>	NA	
Particulate Matter (PM <sub>10</sub> ) <sup>1</sup>	< 0.01	
Total Particulate Matter (TSP)	0.03	
Sulfur Dioxide (SO <sub>2</sub> )	0.02	
Volatile Organic Compounds (VOC)	86.39	
Hazardous Air Pollutants <sup>2</sup>	Potential Emissions	
Toluene	27.99	
Benzene	0.04	
Chloroform	4.24	
Methyl Isocyanate	0.29	
Carbaryl	36.24	
Phosgene	0.03	
Chlorine	0.08	
Hydrogen Chloride	17.03	
Methyl Chloride	< 0.001	
Carbon Tetrachloride	0.33	

 $<sup>^{1}</sup>PM_{2.5}$  and  $PM_{10}$  are components of TSP.

<sup>&</sup>lt;sup>2</sup>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.	Insign	ificant 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.
$\boxtimes$	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.
$\boxtimes$	9.	Brazing, soldering or welding equipment used as an auxiliary to the principal equipment at the source.
	10.	CO <sub>2</sub> 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.
$\boxtimes$	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.
$\boxtimes$	18.	Emergency road flares.
	19.	Emission units which do not have any applicable requirements and which emit criteria pollutants (CO, NO <sub>x</sub> , SO <sub>2</sub> , 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:
		<del></del>

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.				
$\boxtimes$	26.	Fire suppression systems.				
$\boxtimes$	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.				
$\boxtimes$	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.				
$\boxtimes$	33.	Hydraulic and hydrostatic testing equipment.				
	34.	Indoor or outdoor kerosene heaters.				
$\boxtimes$	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.				

	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.			
$\boxtimes$	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.			
$\boxtimes$	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.			
$\boxtimes$	51.	Steam cleaning operations.			
$\boxtimes$	52.	Steam leaks.			
	53.	Steam sterilizers.			
$\boxtimes$	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.			
$\boxtimes$	58.	Tobacco smoking rooms and areas.			
$\boxtimes$	59.	Vents from continuous emissions monitors and other analyzers.			

#### 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 This Certification must be signed by a responsible official. The original, signed in blue ink, must be *Note:* submitted with the application. Applications without an **original** signed certification will be considered as incomplete. 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)** Title: Vice President, Head Institute Industrial Name: Steven B. Hedrick Park Responsible official's signature: Signature: \_\_\_\_ Signature Date: (Must be signed and dated in blue ink) 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)

### **Table of Contents**

ATTACHMENT A Area Map

ATTACHMENT B Plot Plan

**ATTACHMENT C** Process Flow Diagrams

**ATTACHMENT D** Equipment Tables

**ATTACHMENT E** Emission Unit Forms

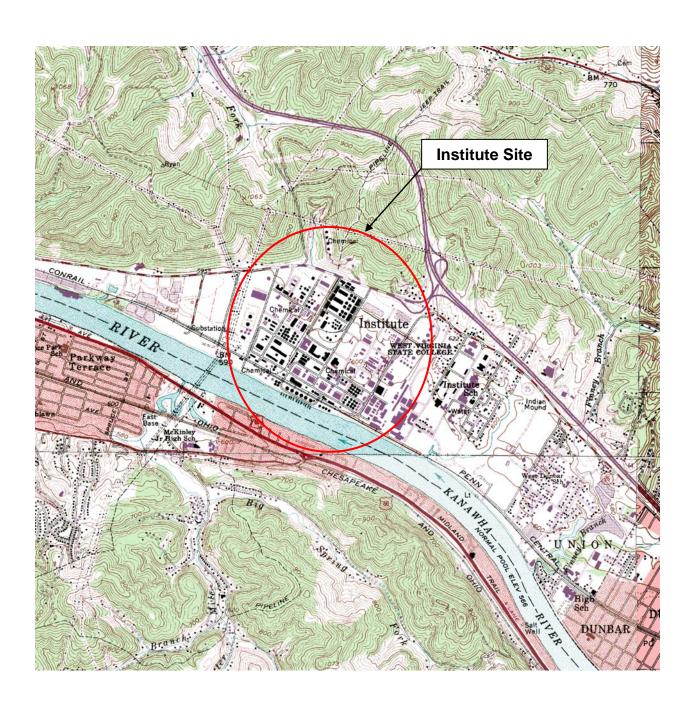
ATTACHMENT F Schedule of Compliance

ATTACHMENT G Air Pollution Control Device Forms

ATTACHMENT H Compliance Assurance Monitoring

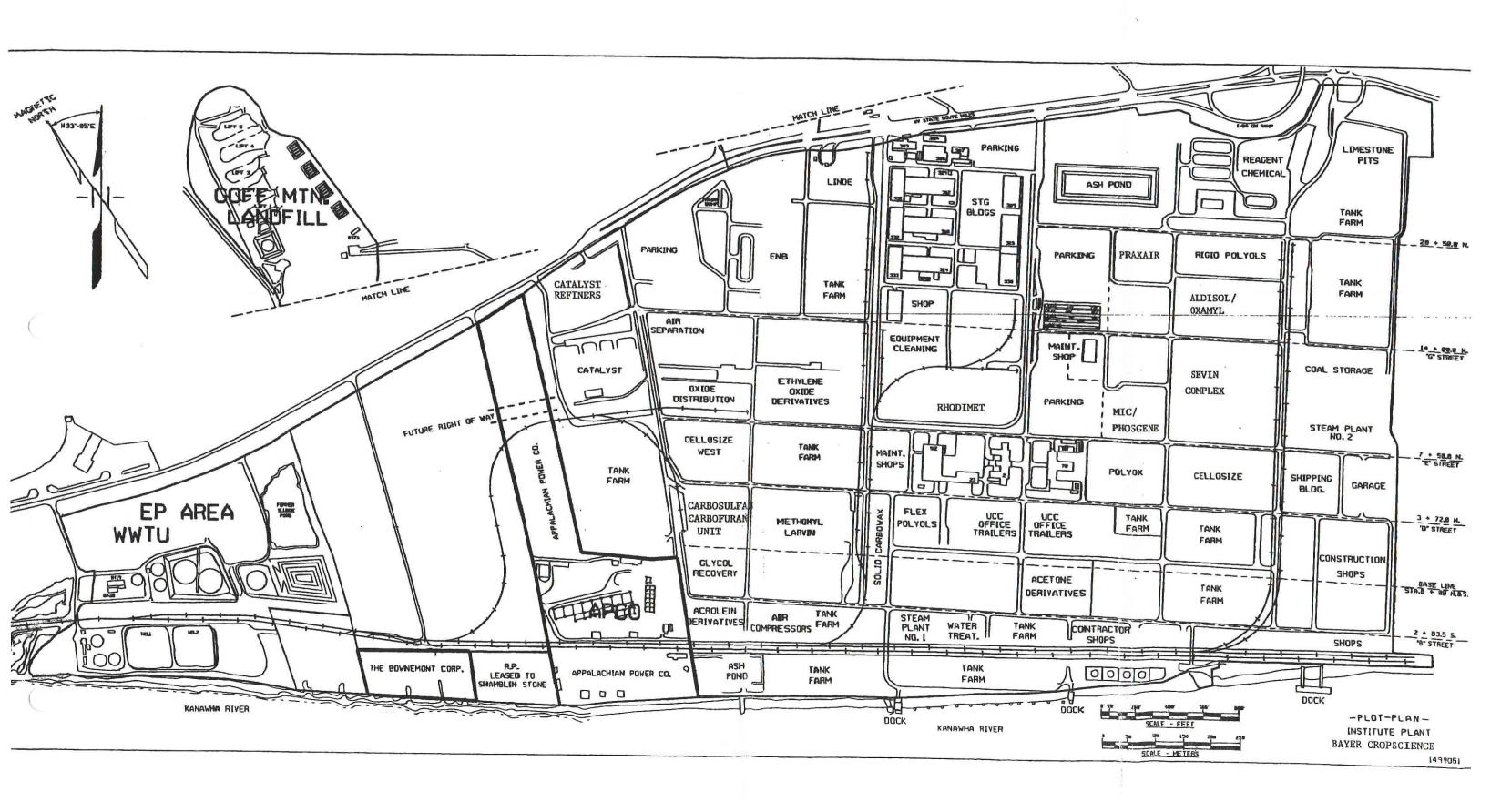
# Attachment A Area Map

# Attachment A Area Map



# Attachment B Plot Plan

### **Attachment B - Plot Plan**



# Attachment C Process Flow Diagrams

Attachment C
Process Flow Diagram
Sevin Process No. 260
Page 6 of 6

Redacted Claim of Confidentiality – Bayer CropScience – 4/18/11

Attachment C
Process Flow Diagram
Sevin Process No. 260
Page 5 of 6

Redacted Claim of Confidentiality – Bayer CropScience – 4/18/11

Attachment C
Process Flow Diagram
Phosgene Process No. 241
Page 4 of 6

Redacted Claim of Confidentiality – Bayer CropScience – 4/18/11

Attachment C
Process Flow Diagram
MIC Process No. 242
Page 3 0f 6
Redacted Claim of Confidentiality – Bayer

CropScience – 4/18/11

Attachment C
Process Flow Diagram
MIC Process No. 242
Page 2 0f 6

Redacted Claim of Confidentiality – Bayer CropScience – 4/18/11

Attachment C
Process Flow Diagram
MIC Process No. 242
Page 1 of 6

Redacted Claim of Confidentiality – Bayer CropScience – 4/18/11

# Attachment D Equipment Tables

# Attachment E Emission Unit Forms

### **ATTACHMENT D - Emission Units Table**

# (includes all emission units at the facility except those designated as insignificant activities in Section 4, Item 24 of the General Forms)

Emission Unit ID	Emission Point ID	Emission Unit Description	Year Installed	Design Capacity	Control Device
Phosgene					
E-411	242E or 242A	Converter Condenser	1993	3.7 MMBTU/hr	242D/242E or 242B/242A
E-413	242E or 242A	Superheater	1993	68,850 BTU/hr	N/A
E-431	242E or 242A	Start-up heater	1993	869 BTU/hr	N/A
E-440	242A	Condenser	1993	975,185 BTU/hr	C-471 242A
E-450	242E or 242A	Brine Cooler	1993	975,185 BTU/hr	N/A
C-410	242E or 242A	Converters	1993	1,254 gal 1,122 gal	N/A
C-430	242E or 242A	Storage Tank	1993	4,000 gal	242D/242E or 242B/242A
C-452	242E or 242A	Storage Tank	1993	300 gal	242D/242E or 242B/242A
C-460	242A	Storage Tank	1993	500 gal	N/A
T-4578	T-4578	Storage Tank	1970	30,000 gal	N/A
T-4579	T-4579	Storage Tank	1963	30,000 gal	N/A
T-4580	T-4580	Storage Tank	1959	30,000 gal	N/A
T-4581	T-4581	Storage Tank	1959	30,000 gal	N/A
Y-1539	Y-1539	Filter	1993	6 gal	N/A
D-1528	D-1528	Knock out pot	1993	6 gal	N/A
Tank Car	Tank Car	Tank Car	1993	180,000 lbs	N/A
D-1520	D-1520	Vent Scrubber	1993	9,000 gal	N/A
E-1521	D-1520	Caustic Cooler	1993	370,000 BTU/hr	N/A
D-1524	D-1520	De-entrainment tank	1993	200 gal	N/A
E-1532	D-1520	Vaporizer North	1993	2.55 MMBTU/hr	N/A
E-1531	D-1520	Vaporizer South	1993	2.55 MMBTU/hr	N/A
E-1534	E-1534	Superheater	1993	68,850 BTU/hr	N/A
V-1555	V-1555	Hydecat Reactor	2000	100 gal/hr	N/A

### **ATTACHMENT D - Emission Units Table**

## (includes all emission units at the facility except those designated as insignificant activities in Section 4, Item 24 of the General Forms)

Emission Unit ID	Emission Point ID	Emission Unit Description	Year Installed	Design Capacity	<b>Control Device</b>
V-1556	V-1556	Pick flow water heater	2000	134,000 BTU/hr	N/A
Control Device	ces		1	•	•
242A	242A	Flare	1976	300 MMBTU/hr	N/A
242B	242B	Scrubber (NVS)	1976	30' x 36" packed column	242A
242C	242A or 242C	Scrubber (EVS)	1976	52' x 10' packed column	242A
242D	242E	Incinerator (VGI)	1989	5 MMBTU/hr	242A
242E	242E	Scrubber (VGI Scrubber)	2001	1,1918 gal	N/A
C-471	242A	Scrubber (PVS)	1993	28' x 3' packed column	242A
MIC	•				
T-4875	T-4875	Storage Tank	1976	38,800 gal	N/A
T-4876	T-4876	Storage Tank	1976	38,800 gal	N/A
T-4877	T-4877	Storage Tank	1976	38,800 gal	N/A
T-4878	T-4878	Storage Tank	1976	38,800 gal	N/A
E-101	242E or 242A	Vaporizer	1976	1.7 MMBTU/hr	N/A
R-A&B 104	242E or 242A	Reactors	1976	1.6 gal	N/A
E-A&B 105	242E or 242A	Reactor Condensers	1976	4.450 MMBTU/hr	N/A
E-A&B 103	242E or 242A	Superheaters	1976	1.27 MMBTU/hr	N/A
E-A&B 102	242E or 242A	Vaporizers	1993 2003	2.93 MMBTU/hr	N/A
C-106	242E or 242A	Feed Tank	1976	11,500 gal	N/A
E-107	242E or 242A	Reactors Vent Condenser	1976	1.96 MMBTU/hr	N/A
C-133	242E or 242A	Scrubber	1976	530 gal	N/A
C-109	242E or 242A	Stripping Still	1976	1,893 gal	N/A
E-111	242E or 242A	Stripping Still Condenser (PSS)	1986	9.15 MMBTU/hr	N/A
E-112	242E or 242A	Stripping Still Vent Condensers	1976	3.58 MMBTU/hr	N/A

### **ATTACHMENT D - Emission Units Table**

## (includes all emission units at the facility except those designated as insignificant activities in Section 4, Item 24 of the General Forms)

Emission Unit ID	Emission Point ID	Emission Unit Description	Year Installed	Design Capacity	Control Device
C-A&B117	242E or 242A	Pyrolyzers	1976 (East) 1997 (West)	5,600 gal	N/A
E-A&B119	242E or 242A	Pyrolyzers Condensers	1976	9.18 MMBTU/hr	N/A
E-A&B120	242E or 242A	Pyrolyzer Vent Condensers	1976	240,000 BTU/hr	N/A
T-4867	242A	MRS Feed Tank	1976	11,500 gal	242A
C-121	242A	MRS Feed Surge Tank	1976	11,500 gal	N/A
C-123	242A	MRS Refining Still	1976	140,000 lbs	N/A
E-126	242A	MRS Condenser	1979	4.025 MMBTU/hr	N/A
E-128	242A	MRS Vent Condenser	1976	230,000 BTU/hr	242A
C-A242	242A	Unit Storage Tank 4871	1976	15,500 gal	242A
C-B242	242A	Unit Storage Tank 4872	1976	15,500 gal	242A
C-C242	242A	Unit Storage Tank 4873	1976	15,500 gal	242A
C-247	242A	Unit Dump Tank 4874	1976	30,000 gal	242A
T-4840	242A	Refrigeration Tank	1976	2,500 gal	242A
T-4851	242A	Field Storage Tank	1976	31,000 gal	242A
T-4852	242A	Field Storage Tank	1976	31,000 gal	242A
T-4853	242A	Field Storage Tank	1976	31,000 gal	242A
T-4850	242A	Refrigeration System	1976	1.100 gal	242A
C-201	242A or 242E	Absorber	1992	280 gal	N/A
E-203	242A or 242E	Absorber Condenser	1976	7.796 MMBTU/hr	N/A
E-205	242A or 242E	Absorber Vent Condenser	1976	348,000 BTU/hr	242D/242E or 242B/242A
T-139-A	242A	Pump Seal Oil Tank	1976	180 gal	242A/242B
T-4865	242A	Brine Surge Tank	1976	9,280 gal	242A/242B
V-260	V-260	Refrigeration Unit	1996	12,000 lbs	N/A
T-4869	242A or 242E	Residue Feed Tank	1976	4,351 gal	N/A
C-150	242A or 242E	Residue Treater	1997	319 gal	N/A
E-153	242A or 242E	Residue Treater Condenser	1976	720,000 gal	N/A
E-155	242A or 242E	Residue Treater Vent Condenser	1976	407,761 BTU/hr	242D/242E or 242B/242A

Emission Unit ID	Emission Point ID	<b>Emission Unit Description</b>	Year Installed	Design Capacity	<b>Control Device</b>
C-173	242A or 242E	Residue Treater Water Surge Tank	1999	3,547 gal	242D/242E or 242B/242A
C-154	242E or 242A	Residue Treater Overhead Decanter	1999	1,315 gal	242D/242E or 242B/242A
C-170	242E or 242A	Extractor Feed Tank	1999	1,700 gal	242D/242E or 242B/242A
C-204	242E or 242A	Absorber Overhead Decanter	1999	650 gal	242D/242E or 242B/242A
C-158	242E or 242A	Extractor	2003	475 gal	N/A
C-159	242E or 242A	Drying Column	2002	475 gal	N/A
E-162	242E or 242A	Drying Column Condenser	1976	134,000 BTU/hr	N/A
T-4868	242E or 242A	Storage Tank	1976	3,300 gal	242D/242E or 242B/242A
T-4879	242E or 242A	Storage Tank	1976	21,000 gal	242D/242E or 242B/242A
T-4821	242F	Caustic Storage Tank	1992	70,000 gal	N/A
T-4881	242G	Caustic Storage Tank	1976	30,000 gal	N/A
T-4883	242A	EVS Surge Tank	1985	10,000 gal	242A/242C
C-250	242A	EVS Knock Out Pot	1976	1,400 gal	242A
3110	242A	Knock Out Pot	1976	500 gal	242A
E-109	N/A	PSS Calandria	1992	1.746 MMBTU/hr	N/A
E-125	N/A	MRS Column Calandria	1992	4.108 MMBTU/hr	N/A
E-220	N/A	HCl Absorber Calandria	1989	610,000 BTU/hr	N/A
E-129	N/A	MRS Make Cooler	1976	230,000 BTU/hr	N/A
E-A&B 118	N/A	Pyrolyzer Calandria	1992	1.052 MMBTU/hr	N/A
E-135	N/A	HCl Scrubber Solvent Brine Cooler	1976	1.54 MMBTU/hr	N/A
E-136	N/A	HCl Scrubber Solvent Washer Cooler	1976	1.38 MMBTU/hr	N/A
E-152	N/A	Residue Treater Tails Cooler	1996	740,000 BTU/hr	N/A
E-161	N/A	Tails Drying Column	1976	70,000 BTU/hr	N/A

Emission Unit ID	Emission Point ID	Emission Unit Description	Year Installed	Design Capacity	<b>Control Device</b>
E-202	N/A	HCl Absorber Tails Cooler	1993	468,000 BTU/hr	N/A
E-232	N/A	Normal Vent Scrubber Recycle Cooler	1996	695,100 BTU/hr	N/A
E-243	N/A	Storage Cooler	1984	1.632 MMBTU/hr	N/A
C-1211	N/A	MIC Vent Separator Pot	1985	100 gal	N/A
Control Devi	ces			•	
242A	242A	Flare	1976	300 MMBTU/hr	N/A
242B	242B	Scrubber (NVS)	1976	30' x 36" packed column	242A
242C	242A or 242C	Scrubber (EVS)	1976	52' x 10' packed column	242A
242D	242E	Incinerator (VGI)	1989	5 MMBTU/hr	242A
242E	242E	Scrubber (VGI Scrubber)	2001	1,1918 gal	N/A
SEVIN			•	•	
4601 (265D)	260K	Storage Tank	1962	15,000 gal	260K
4602	260K	Storage Tank	1962	15,000 gal	260K
4603 (265C)	260K	Storage Tank	1962	15,000 gal	260K
4604	260K	Storage Tank	1962	15,000 gal	260K
4608	260K	Storage Tank	1962	15,000 gal	260K
4615 (260A)	260K	Storage Tank	1962	10,000 gal	260K/260A
4617	242A	Storage Tank	1962	16,000 gal	242A
4619 (265G)	260K	Storage Tank	1962	15,000 gal	260K
4621	260K	Storage Tank	1962	16,000 gal	260K
4623	260K	Storage Tank	1962	14,500 gal	260K
26017	260K	Crystallizer Overhead Tank	1962	1,000 gal	260K
26007	260K	A/C Surge Tank	1962	1,500 gal	260K
26004	260K	Mother Liquor Storage Tank	1962	5,000 gal	260K

Emission Unit ID	Emission Point ID	Emission Unit Description	Year Installed	Design Capacity	Control Device
26606	260K	Dissolver Storage Tank	1962	1,000 gal	260K
29763	29763	Regeneration Condenser	1962	1,000 gal	N/A
1570	260K	Overflow Pot	1962	100 gal	260K
26019	260K	Feed Filter	1962	40 gal	260A/260K
26001	260K	Reactor	1962	7,000 gal	260A/260K
26002	260K	Reactor	1962	7,000 gal	260A/260K
26003	260K	Stripping Still	1962	6,000 gal	260A/260K
26022	260K	Vent Condenser (MSS Vent Condenser)	1962	0.1 MMBTU/hr	260A/260K
26023	260K	Overhead Condenser	1962	3.9 MMBTU/hr	260A/260K
26018	260K	Product Filter	1962	5,088 in <sup>3</sup>	N/A
26015	260F	Surge Bin	1962	20,000 lbs/hr	F-260
25584	25584	Conveyors	1962	20,000 lbs/hr	F-260
26131	26131	Packers	1962	6,000 lbs/hr	F-260
26011	260K	Vacuum Pump	1962	50mmHg	260K
28197	260K	#1 Crystallizer	1962	10,000 gal	260K
02134	260K	#2 Crystallizer	1962	10,000 gal	260K
26010	260K	Drying Still	1962	40,000 gal	260K
26012	260K	Vacuum Pump	1962	50 mmHg	260K
26953	260K	#3 Crystallizer	1962	10,000 gal	260K
31084	260K	Vent Kettle	1962	1,500 gal	260K
26016	260G Brine Side	AC Chiller Coil	1962	0.2 MMBTU/hr	N/A
26013	260K	Centrifuges	1962	300 gal	260K
1515115- 62B (260C)	260K	Hopper	1962	7,500 gal	260K
00028	260K	Dryer	1962	7,500 gal	260K
1180 28310	260K	Wyssmont Dryer Condensers (2)	1962	2.2 MMBTU/hr	260K

260K	Demister	1962		
		1702	1,200 gal	260K
260K	Bird Centrifuge	1962	400 gal	260K
260K	Evaporator	1962	300 gal	260K
265A or 265B	Storage Bins	1962	150,000 lbs	265A or 265B
260K	Knock out pot	1962	65 gal	260K
260K	Jet Pot	1962	120 gal	260K
260K	Condensate Pot	1962	320 gal	260K
260K	Solvent Heater	1962	2.9 MMBTU/hr	260K
es				
260K	Sevin Scrubber	1978	1'2" x 14'	260K
260K	Thermal Oxidizer (PTO)	1989	6.0 MMBTU/hr	N/A
265A	Baghouse – Storage Bins	1962	140 ft <sup>2</sup>	N/A
265B	Baghouse – Storage Bins	1962	140 ft <sup>2</sup>	N/A
260F	Baghouse – Surge Bin Packout	1961	63 ft <sup>2</sup>	N/A
	260K 265A or 265B 260K 260K 260K 260K 260K 260K 260K 250K 260K 260K 260K	260K Evaporator 265A or 265B Storage Bins  260K Knock out pot 260K Jet Pot 260K Condensate Pot 260K Solvent Heater  28 260K Sevin Scrubber 260K Thermal Oxidizer (PTO) 265A Baghouse – Storage Bins 265B Baghouse – Storage Bins	260K       Evaporator       1962         265A or 265B       Storage Bins       1962         260K       Knock out pot       1962         260K       Jet Pot       1962         260K       Condensate Pot       1962         260K       Solvent Heater       1962         260K       Sevin Scrubber       1978         260K       Thermal Oxidizer (PTO)       1989         265A       Baghouse – Storage Bins       1962         265B       Baghouse – Storage Bins       1962	260K       Evaporator       1962       300 gal         265A or 265B       Storage Bins       1962       150,000 lbs         260K       Knock out pot       1962       65 gal         260K       Jet Pot       1962       120 gal         260K       Condensate Pot       1962       320 gal         260K       Solvent Heater       1962       2.9 MMBTU/hr         260K       Sevin Scrubber       1978       1'2" x 14'         260K       Thermal Oxidizer (PTO)       1989       6.0 MMBTU/hr         265A       Baghouse – Storage Bins       1962       140 ft²         265B       Baghouse – Storage Bins       1962       140 ft²

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number:	Emission unit name: Knock Out Pot	List any control dewith this emission u		
		242A		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):	
Knock Out Pot				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1976	Modification date(s	):	
Design Capacity (examples: furnace 500 gal	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)			
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
	Indirect Fired	Direct Fired		
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:	
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be used during the term of the permit.				
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data			
Criteria Pollutants	Potential Emissions		
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242A data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	al Emissions	
	PPH	TPY	
	Refer to Table 2 for Emission Point 242A data.		
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	РРН	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate a versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number:	Emission unit name: Knock Out Pot	List any control dev		
	220021 0 40 2 50	242A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Knock Out Pot				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):	
Design Capacity (examples: furnace 500 gal	s - tons/hr, tanks - gallons):			
<b>Maximum Hourly Throughput:</b> N/A	, , , , , , , , , , , , , , , , , , , ,		ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fuel?Yes _X No If yes, is it?				
	Indirect Fired	Direct Fired		
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:	
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data			
Criteria Pollutants	Potential Emissions		
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242A data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	1 Emissions	
	РРН	TPY	
	Refer to Table 2 for E	mission Point 242A data.	
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	РРН	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate t versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Claim of Confidentiality – Bayer Cropscience – 4/18/2011				
Emission Unit Description				
Emission unit ID number: C-106	Emission unit name: Feed Tank	List any control devices associated with this emission unit:		
		N/A		
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):	
Phosgene Stripping Still Feed Tank	1			
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):	
Design Capacity (examples: furnace 11,500 gal	es - tons/hr, tanks - gallons):	<u> </u>		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr		
Fuel Usage Data (fill out all applica	ble fields)			
Does this emission unit combust fue	el?Yes _X_ No	If yes, is it?		
		Indirect Fired	Direct Fired	
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:	
N/A		N/A		
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s	s). For each fuel type	listed, provide	
N/A				
Describe each fuel expected to be us	sed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Potential Emissions		
РРН	TPY	
Refer to Table 2 for Emission Point 242E data.		
Potentia	l Emissions	
РРН	TPY	
Refer to Table 2 for Emission Point 242E data.		
Potential Emissions		
РРН	TPY	
N/A	N/A	
potential emissions (include date ntes of emission factors, etc.).	es of any stack tests conducted,	
	PPH  Refer to Table 2 for E  Potentia  PPH  Refer to Table 2 for E  Potentia  PPH  N/A  Potentia	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Clair	m of Confidentiality – Bayer Cropscie	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: C-109	Emission unit name: Stripping Still	List any control dev with this emission un	
	11 0	N/A	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.)	):
Phosgene Stripping Still			
<b>Manufacturer:</b> N/A	<b>Model number:</b> N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	:
<b>Design Capacity (examples: furnace</b> 1,893 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applicab	ole fields)		
Does this emission unit combust fuel	Does this emission unit combust fuel?Yes _X No If yes, is it?		
_		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burner			ing of burners:
N/A N/A			
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.			
N/A			
Describe each fuel expected to be used during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A
Construction date: N/A  Design Capacity (examples: furnace: 1,893 gal  Maximum Hourly Throughput: Conf.  Fuel Usage Data (fill out all applicab: Does this emission unit combust fuel  Maximum design heat input and/or: N/A  List the primary fuel type(s) and if a the maximum hourly and annual fuel N/A  Describe each fuel expected to be use Fuel Type	Installation date: 1976  s - tons/hr, tanks - gallons):  Maximum Annual Throughput: Conf.  Ole fields)  ?Yes _X_ No  maximum horsepower rating:  applicable, the secondary fuel type(sel usage for each.  Max. Sulfur Content	Modification date(s) N/A  Maximum Operatin 28 weeks/yr  If yes, is it? Indirect Fired Type and Btu/hr rat N/A  S). For each fuel type I	g Schedule: Direct Fire ing of burner isted, provide

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.	
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	al Emissions
	PPH	TPY
	Refer to Table 2 for I	Emission Point 242E data.
Regulated Pollutants other than	Potentia	al Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,
Engineering estimates.		

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
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: Storage Tank	List any control dev	
	233306	N/A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
MRS Feed Surge Tank			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):
Design Capacity (examples: furnace 11,500 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel?Yes _X_ No If yes, is it?			
Indirect FiredDirect l		Direct Fired	
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:			ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be used during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data				
Criteria Pollutants	Potential Emissions			
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )	Refer to Table 2 for Emission Point 242A data.			
Lead (Pb)				
Particulate Matter (PM <sub>2.5</sub> )				
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	l Emissions		
	PPH	TPY		
	Refer to Table 2 for E	Emission Point 242A data.		
Regulated Pollutants other than	Potentia	l Emissions		
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,		

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the Schedule of Compliance Form as ATTACHMENT F.

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number:	Emission unit name:	List any control dev	
C-123	MRS Refining Still	with this emission u	nit:
		N/A	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Methyl Isocyanate Refining Still			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s)	):
Design Capacity (examples: furnac 140,000 lbs	es - tons/hr, tanks - gallons):	1	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applica	able fields)	1	
Does this emission unit combust fue	el? Yes X 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:			ting of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(sel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )	Refer to Table 2 for Emission Point 242A data.	
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )		
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	1 Emissions
	PPH	TPY
	Refer to Table 2 for E	Emission Point 242A data.
Regulated Pollutants other than	Potentia	1 Emissions
Criteria and HAP	PPH TPY	
N/A	N/A	N/A
List the method(s) used to calculate the versions of software used, source and definition of the source		es of any stack tests conducted,

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropscie	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number:	Emission unit name:	List any control dev	
C-133	Scrubber	N/A	
Provide a description of the emissio	n unit (type, method of operation, d	esign parameters, etc.	):
Hydrogen Chloride Scrubber			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	):
Design Capacity (examples: furnace 530 gal	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	<b>!?</b> YesX _ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr rat	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A
the maximum hourly and annual fu  N/A  Describe each fuel expected to be us  Fuel Type	el usage for each.  sed during the term of the permit.  Max. Sulfur Content	Max. Ash Content	BTU Value

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for E	Emission Point 242E data.
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	Refer to Table 2 for E	Emission Point 242E data.
Regulated Pollutants other than	Potentia	ll Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: C-150	Emission unit name: Residue Treater	List any control dev with this emission u	
		N/A	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Residue Treater			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1997	Modification date(s) N/A	:
<b>Design Capacity (examples: furnac</b> 319 gal	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr (14 hrs/	
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	el?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s nel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )	Refer to Table 2 for Emission Point 242E data.	
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )		
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	al Emissions
	РРН	TPY
	Refer to Table 2 for E	Emission Point 242E data.
Regulated Pollutants other than	Potentia	ıl Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate a versions of software used, source and Engineering estimates		es of any stack tests conducted,

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropscie	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: C-154	Emission unit name: Residue Treater Overhead Decanter	List any control dev with this emission us 242E – VGI Scrubbes	nit:
Provide a description of the emissio	n unit (type, method of operation, de	esign parameters, etc.	):
Residue Treater Overhead Decanter	Τ	T	
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1999	Modification date(s) N/A	:
Design Capacity (examples: furnace 1,315 gal	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr (14 hrs.	0
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	!?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr rat	ing of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data				
Criteria Pollutants	Potential Emissions			
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)				
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.		Refer to Table 2 for Emission Point 242E data.	
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	al Emissions		
	PPH	TPY		
	Refer to Table 2 for I	Emission Point 242E data.		
Regulated Pollutants other than	Potentia	al Emissions		
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,		
Engineering estimates.				

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: C-158	Emission unit name: Extractor	List any control dev with this emission u	
		N/A	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Extractor			
Manufacturer: N/A	<b>Model number:</b> N/A	Serial number: N/A	
Construction date: N/A	Installation date: 2003	Modification date(s) N/A	:
<b>Design Capacity (examples: furnac</b> 475 gal	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 47 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	el?Yes _ <u>X</u> _ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for E	Refer to Table 2 for Emission Point 242E data.	
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	ll Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: C-159	Emission unit name: Drying Column	List any control dev with this emission u	
		N/A	
-	on unit (type, method of operation, d	esign parameters, etc.	):
Chloroform Drying Column	<u> </u>	T	
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 2002	Modification date(s N/A	):
Design Capacity (examples: furnace 475 gal	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatir 47 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applica	ble fields)	1	
Does this emission unit combust fuel?Yes _X_ No If yes, is it?			
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burne			ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )	Refer to Table 2 for Emission Point 242E data.	
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )		
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	Refer to Table 2 for E	Emission Point 242E data.
Regulated Pollutants other than	Potentia	ll Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	nim of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: C-170	Emission unit name: Extractor Feed Tank	List any control dev with this emission us 242E – VGI Scrubbe	nit:
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1999	Modification date(s) N/A	):
<b>Design Capacity (examples: furnac</b> 1,700 gal	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 47 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applica	able fields)	1	
Does this emission unit combust fu	el?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	r maximum horsepower rating:	Type and Btu/hr rat	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual for	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potentia	l Emissions
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for E	Emission Point 242E data.
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	Refer to Table 2 for E	Emission Point 242E data.
Regulated Pollutants other than	Potentia	ll Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number:	Emission unit name:	List any control dev	
C-173	Water Surge Tank	with this emission up	
		242E – VGI Scrubber	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.)	):
Residue Treater Water Surge Tank	1	T	
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1999	Modification date(s) N/A	:
Design Capacity (examples: furnace 3,547 gal	es - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 47 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	el?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burn		ing of burners:	
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s nel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.	Emission Point 242E data.	
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	l Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number:	Emission unit name:	List any control dev	
C-201	Absorber	N/A	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Hydrogen Chloride Absorber			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1992	Modification date(s)	):
Design Capacity (examples: furnace 280 gal	es - tons/hr, tanks - gallons):	<u>I</u>	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applica	able fields)		
Does this emission unit combust fue	el?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rat	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A
<del>``</del>			

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

Redacted Cla	im of Confidentiality – Bayer Cropscie	ence – 4/18/2011		
Emission Unit Description				
Emission unit ID number: C-204	Emission unit name: Absorber Overhead Decanter	List any control dev		
		N/A		
Provide a description of the emissio	n unit (type, method of operation, d	esign parameters, etc.	):	
Hydrogen Chloride Absorber Overhea	nd Decanter			
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1999	Modification date(s	):	
Design Capacity (examples: furnace 650 gal	es - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operation 28 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applica	ble fields)			
Does this emission unit combust fue	<b>!?</b> Yes _X_ 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:				
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be used during the term of the permit.				
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	al Emissions	
	РРН	TPY	
	Refer to Table 2 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	РРН	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate a versions of software used, source and Engineering estimates		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: C-250	Emission unit name: EVS Knock Out Pot	List any control devices associated with this emission unit:	
		242A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
EVS Knock Out Pot			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):
Design Capacity (examples: furnace 1,400 gal	s - tons/hr, tanks - gallons):		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel	1?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A N/A			
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.			
N/A			
Describe each fuel expected to be used during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)	Refer to Table 2 for Emission Point 242A data.		
Particulate Matter (PM <sub>2.5</sub> )			
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242A data.	
Regulated Pollutants other than	Potentia	l Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number:	Emission unit name:	List any control dev	
C-A&B 117	Pyrolyzers	with this emission u	mt. IVA
Provide a description of the emission	on unit (type, method of operation, d	lesign parameters, etc.	):
Pyrolyzers	_		
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976 (East) 1997 (West)	Modification date(s) N/A	):
<b>Design Capacity (examples: furnac</b> 5,600 gal	es - tons/hr, tanks - gallons):	•	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr	
Fuel Usage Data (fill out all applica	ble fields)	_	
Does this emission unit combust fue	el?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rat	ting of burners:
N/A N/A			
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(see left) applicable, the second	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential	Emissions
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential	Emissions
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

versions of software used, source and dates of emission factors, etc.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-101	Emission unit name: Vaporizer	List any control devices associated with this emission unit:	
	, aported	N/A	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Monomethylamine Vaporizer			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):
Design Capacity (examples: furnac 1.7 MMBTU/hr	es - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 365 days/yr	
Fuel Usage Data (fill out all applica	ble fields)	1	
Does this emission unit combust fue	el?Yes _ <u>X</u> _ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A			
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>2.5</sub> )			
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	l Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropscie	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-107	Emission unit name: Reactor Vent Condenser	List any control devices associated with this emission unit:	
Provide a description of the emission Reactor Vent Condenser	on unit (type, method of operation, d	esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):
Design Capacity (examples: furnac 1.98 MMBTU/hr	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr	
Fuel Usage Data (fill out all applica	ble fields)	1	
Does this emission unit combust fue	el?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A N/A			
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s nel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.	,	
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.	
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	al Emissions
	PPH	TPY
	Refer to Table 2 for I	Emission Point 242E data.
Regulated Pollutants other than	Potentia	al Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,
Engineering estimates.		

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form		
Emission Unit Description				
Emission unit ID number: E-109	Emission unit name: PSS Calandria	List any control dev		
		N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	):	
PSS Calandria				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1992	Modification date(s N/A	):	
<b>Design Capacity (examples: furnace</b> 1.746 MMBTU/hr	s - tons/hr, tanks - gallons):	I		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ble fields)	I		
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
Indirect FiredDirect Fir			Direct Fired	
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:				
N/A N/A				
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

versions of software used, source and dates of emission factors, etc.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

Redacted Cla	aim of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-111	Emission unit name: Stripping Still Condenser	List any control dev with this emission u	
		N/A	
Provide a description of the emission of the E	on unit (type, method of operation, d	esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1986	Modification date(s) N/A	) <b>:</b>
<b>Design Capacity (examples: furnac</b> 9.15 MMBTU/hr	ees - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applica	able fields)		
Does this emission unit combust fu	el?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/o	r maximum horsepower rating:	Type and Btu/hr rat	ting of burners:
N/A N/A			
List the primary fuel type(s) and if the maximum hourly and annual f	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.	
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	al Emissions
	PPH	TPY
	Refer to Table 2 for I	Emission Point 242E data.
Regulated Pollutants other than	Potentia	al Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,
Engineering estimates.		

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropscie	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-112	Emission unit name: Stripping Still Vent Condenser	List any control dev with this emission us N/A	
Provide a description of the emission  Phosgene Stripping Still Vent Conden		esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	<b>:</b>
Design Capacity (examples: furnace 3.58 MMBTU/hr	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	<b>!?</b> Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A N/A			
List the primary fuel type(s) and if the maximum hourly and annual fu		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )	Refer to Table 2 for Emission Point 242E data.	
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )		
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	Refer to Table 2 for E	Emission Point 242E data.
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form						
Emission Unit Description						
Emission unit ID number: E-125	Emission unit name: MRS Column Calandria	List any control devices associated with this emission unit:				
_,-,		N/A				
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):			
MRS Column Calandria						
Manufacturer: N/A	Model number: N/A	Serial number: N/A				
Construction date: N/A	Installation date: 1992	Modification date(s): N/A				
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 4.108 MMBTU/hr						
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr				
Fuel Usage Data (fill out all applical	ole fields)					
Does this emission unit combust fuel?Yes _X_ No		If yes, is it?				
	Indirect FiredDirect Fired					
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:			
N/A	N/A					
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.						
N/A						
Describe each fuel expected to be us	ed during the term of the permit.					
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value			
N/A	N/A	N/A	N/A			

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Vitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

versions of software used, source and dates of emission factors, etc.).

_			. •
Hn	oin	Pering	estimates.
$\perp$ 111	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-126	Emission unit name: MRS Condenser	List any control devices associated with this emission unit:	
		N/A	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Methyl Isocyanate Refining Still Con	denser		
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1979	Modification date(s) N/A	:
Design Capacity (examples: furnac 4.025 MMBTU/hr	es - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr	
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	el?Yes _ <u>X</u> _ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s nel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)	Refer to Table 2 for Emission Point 242A data.		
Particulate Matter (PM <sub>2.5</sub> )			
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	al Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242A data.	
Regulated Pollutants other than	Potentia	ll Emissions	
Criteria and HAP	РРН	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate a versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	nim of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-128	Emission unit name: MRS Vent Condenser	List any control devices associated with this emission unit: 242A - Flare	
Provide a description of the emission  Methyl Isocyanate Refining Still Ver	on unit (type, method of operation, d	esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	):
Design Capacity (examples: furnace 230,000 BTU/hr	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr	
Fuel Usage Data (fill out all applica	able fields)	1	
Does this emission unit combust fu	el?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	r maximum horsepower rating:	Type and Btu/hr rat	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual for	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242A data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242A data.	
Regulated Pollutants other than	Potentia	l Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate the versions of software used, source and date of the software used.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: E-129	Emission unit name: MRS Make Cooler	List any control devices associated with this emission unit:	
		N/A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc	.):
MRS Make Cooler			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s	s):
Design Capacity (examples: furnace 230,000 BTU/hr	s - tons/hr, tanks - gallons):		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	?Yes _ <u>X</u> 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:			
N/A N/A			
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.			
N/A			
Describe each fuel expected to be used during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

riteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

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.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: E-135	Emission unit name: HCl Scrubber Solvent Brine	List any control devices associate with this emission unit:	
E-133	Cooler Cooler	N/A	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
HCl Scrubber Solvent Brine Cooler			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 1.54 MMBTU/hr	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ole fields)	l	
Does this emission unit combust fue	!?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:		
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential	Emissions
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

•			. •
Hn	ann	apring	estimates.
-11	2111	CHILE	Commatco

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: E-136	Emission unit name: HCl Scrubber Solvent Waster	List any control devices associat with this emission unit:		
L-130	Cooler Cooler	N/A		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	):	
HCl Scrubber Solvent Waster Cooler				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1976	Modification date(s): N/A		
Design Capacity (examples: furnace 1.38 MMBTU/hr	s - tons/hr, tanks - gallons):			
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)			
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
		Indirect Fired	Direct Fired	
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential	Emissions
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

•			. •
Hn	ann	apring	estimates.
-11	2111	CHILE	Commatco

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: E-152	Emission unit name: Residue Treater Tails Cooler	List any control devices associated with this emission unit:	
3 102	Trestant Trains Cooler	N/A	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):
Residue Treater Tails Cooler			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1996	Modification date(s): N/A	
Design Capacity (examples: furnace 740,000 BTU/hr	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(sel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

riteria Pollutants	Potential Emissions	
	PPH	TPY
rbon Monoxide (CO)	N/A	N/A
trogen Oxides (NO <sub>X</sub> )	N/A	N/A
ad (Pb)	N/A	N/A
rticulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			. •
Hn	oin	Pering	estimates.
$\perp$ 111	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-153	Emission unit name: Residue Treater Condenser	List any control devices associated with this emission unit:	
		N/A	
Provide a description of the emission Residue Treater Condenser	on unit (type, method of operation, d	esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s): N/A	
<b>Design Capacity (examples: furnac</b> 720,000 gal	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr (14 hrs/day)	
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	el?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s nel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data				
Criteria Pollutants	Potential Emissions			
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)	Refer to Table 2 for Emission Point 242E data.			
Particulate Matter (PM <sub>2.5</sub> )				
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	l Emissions		
	PPH	TPY		
	Refer to Table 2 for I	Emission Point 242E data.		
Regulated Pollutants other than	Potentia	ıl Emissions		
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,		
Engineering estimates				

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	nim of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-155	Emission unit name: Residue Treater Vent Condenser	List any control dev with this emission un	
		242E – VGI Scrubber	r
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Residue Treater Vent Condenser			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	:
Design Capacity (examples: furnace 407,761 BTU/hr	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr (14 hrs/	_
Fuel Usage Data (fill out all applica	able fields)	1	
Does this emission unit combust fu	el?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	r maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual for	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.	_	
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potentia	Potential Emissions	
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )	Refer to Table 2 for Emission Point 242E data.		
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )			
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	l Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates and material balance.	l dates of emission factors, etc.).	es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
<b>45CSR§21-37, CO-21-97-4</b> : Control device 242D/242E efficiency is 99.6/0.9 % and 242B/242A is 0.9/98 %. Maximum hours of operation limited to 2,744 hrs/yr and emissions are limited to 8.34 lbs/hr and 11.44 tpy.
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.)
compliance. If there is not arready a required method in place, then a method must be proposed.)
Maintain applicable records required by the HON MACT.
Maintain applicable records required by the HON MACT.
Maintain applicable records required by the HON MACT.
Maintain applicable records required by the HON MACT.
Maintain applicable records required by the HON MACT.
Maintain applicable records required by the HON MACT.
Maintain applicable records required by the HON MACT.

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: E-161	Emission unit name: Tails Drying Column	List any control dev		
_,		N/A		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	):	
Tails Drying Column				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):	
Design Capacity (examples: furnace 70,000 BTU/hr	s - tons/hr, tanks - gallons):	I		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)			
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
Indirect FiredD		Direct Fired		
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:			ting of burners:	
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be used during the term of the permit.				
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

riteria Pollutants	Potential	Emissions
	PPH	TPY
arbon Monoxide (CO)	N/A	N/A
itrogen Oxides (NO <sub>X</sub> )	N/A	N/A
ead (Pb)	N/A	N/A
articulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

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.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	aim of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-162	Emission unit name: Drying Column Condenser	List any control dev with this emission u	
		N/A	
Provide a description of the emission	on unit (type, method of operation, d	lesign parameters, etc.	):
Chloroform Drying Column Condens	ser	T	_
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	):
Design Capacity (examples: furnace 134,000 BTU/hr	ees - tons/hr, tanks - gallons):	1	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 47 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applica	able fields)	1	
Does this emission unit combust fu	<b>el?</b> Yes _X_ No	If yes, is it?	
		Indirect FiredDirect Fire	
Maximum design heat input and/o	r maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual f	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	etants Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>2.5</sub> )			
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	al Emissions	
	PPH	TPY	
	Refer to Table 2 for I	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	al Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,	
Engineering estimates.			

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form		
Emission Unit Description				
Emission unit ID number: E-202	Emission unit name: HCl Absorber Tails Cooler	List any control devices associated with this emission unit:		
		N/A		
Provide a description of the emission	n unit (type, method of operation, do	esign parameters, etc.	):	
HCl Absorber Tails Cooler				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1993	Modification date(s): N/A		
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 468,000 BTU/hr				
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)			
Does this emission unit combust fuel?Yes _X_ No		If yes, is it?		
		Indirect FiredDirect Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr rating of burners:		
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	l Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-203	Emission unit name: Absorber Condenser	List any control devices associated with this emission unit:	
2 200		N/A	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Hydrogen Chloride Absorber Conden	ser		
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s): N/A	
Design Capacity (examples: furnac 7.796 MMBTU/hr	es - tons/hr, tanks - gallons):	1	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr	
Fuel Usage Data (fill out all applica	ble fields)	I	
Does this emission unit combust fue	el?Yes _X_ No	If yes, is it?	
		Indirect FiredDirect Fired	
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr rating of burners:	
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	Potential Emissions	
	РРН	TPY	
	Refer to Table 2 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropscie	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-205	Emission unit name: Absorber Vent Condenser	List any control dev with this emission us 242E – VGI Scrubber	nit:
Provide a description of the emissio  Hydrogen Chloride Absorber Vent Co		esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	:
Design Capacity (examples: furnace 348,000 BTU/hr	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr	
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	<b>!?</b> Yes _ <u>X</u> No	If yes, is it?	
Indirect FiredDirect I			Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A	N/A		
List the primary fuel type(s) and if the maximum hourly and annual fu		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potentia	Potential Emissions	
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for F	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	ll Emissions	
Criteria and HAP	РРН	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate a versions of software used, source and Material balance calculations.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
<b>45CSR§21-37, CO-21-97-4</b> : Control device 242D/242E efficiency is 99.6/0.9 % and 242B/242A is 0.9/98 %. Maximum hours of operation limited to 4,704 hrs/yr and VOC emissions are limited to 0.62 lbs/hr and 1.46 tpy.
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.)
Maintain applicable records required by the HON MACT.
<b>45CSR§21-37, CO-21-97-4</b> : See Attachment G for specific control device requirements.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	it Form	
Emission Unit Description			
Emission unit ID number: E-220	Emission unit name: HCl Absorber Calandria	List any control de with this emission u	
		N/A	
Provide a description of the emissio	n unit (type, method of operation, d	esign parameters, etc	.):
HCl Absorber Calandria			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1989	Modification date(s	s):
Design Capacity (examples: furnace 610,000 BTU/hr	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	<b>Maximum Annual Throughput:</b> N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	1?Yes <u>X</u> No	If yes, is it?	
Indirect FiredDirect Fire			Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A	N/A		
List the primary fuel type(s) and if the maximum hourly and annual fu		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

riteria Pollutants	Potential	Emissions
	PPH	TPY
rbon Monoxide (CO)	N/A	N/A
itrogen Oxides (NO <sub>X</sub> )	N/A	N/A
ead (Pb)	N/A	N/A
articulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ılfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form		
Emission Unit Description				
Emission unit ID number:	Emission unit name:	List any control dev		
E-232	Normal Vent Scrubber Recycle Cooler	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Normal Vent Scrubber Recycle Coole	r			
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1996	Modification date(s N/A	):	
<b>Design Capacity (examples: furnace</b> 695,100 BTU/hr	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)	l		
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
Indirect FiredDirect Fire			Direct Fired	
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:				
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

riteria Pollutants	Potential Emissions	
	PPH	TPY
rbon Monoxide (CO)	N/A	N/A
trogen Oxides (NO <sub>X</sub> )	N/A	N/A
ad (Pb)	N/A	N/A
rticulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: E-243	Emission unit name: Storage Cooler	List any control devices associated with this emission unit:		
		N/A		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):	
Storage Cooler				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1984	Modification date(s): N/A		
<b>Design Capacity (examples: furnace</b> 1.632 MMBTU/hr	s - tons/hr, tanks - gallons):			
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)			
Does this emission unit combust fuel? Yes X No If yes, is it?				
		Indirect Fired	Direct Fired	
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be used during the term of the permit.				
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
X Permit Shield
A 1 Crimit Sincid
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.)
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
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.)
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.)
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.)
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.)
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.)
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.)
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.)
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.)
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.)

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: E-A&B-118	Emission unit name: Pyrolyzer Calandria	List any control devices associated with this emission unit:	
		N/A	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	):
Pyrolyzer Calandria			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1992	Modification date(s): N/A	
Design Capacity (examples: furnace 1.052 MMBTU/hr	s - tons/hr, tanks - gallons):		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ole fields)	1	
Does this emission unit combust fue	!?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
itrogen Oxides (NO <sub>X</sub> )	N/A	N/A
ead (Pb)	N/A	N/A
articulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Cotal Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Emission Unit Description			
Emission unit ID number:	Emission unit name:	List any control dev	
E-A&B 102	Vaporizers	with this emission u	nit:
		N/A	
Provide a description of the emis	sion unit (type, method of operation, d	esign parameters, etc.	):
hosgene Vaporizers			
<b>Manufacturer:</b> U/A	Model number: N/A	Serial number: N/A	
Construction date:	Installation date: 1993 and 2003	Modification date(s) N/A	):
<b>Design Capacity (examples: furn</b> .93 MMBTU/hr	aces - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr	g Schedule:
Fuel Usage Data (fill out all appli	icable fields)		
Ooes this emission unit combust	<b>fuel?</b> Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and	or maximum horsepower rating:	Type and Btu/hr rat	ting of burners
V/A		N/A	
ist the primary fuel type(s) and he maximum hourly and annual	if applicable, the secondary fuel type(s fuel usage for each.	s). For each fuel type	listed, provide
J/A			
Describe each fuel expected to be	used during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 2 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	ll Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

Redacted Clai	m of Confidentiality – Bayer Cropscie	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-A&B 103	Emission unit name: Superheaters	List any control devices associated with this emission unit:	
		N/A	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Phosgene Superheaters			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s): N/A	
Design Capacity (examples: furnace 1.27 MMBTU/hr	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr	
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fue	!?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be used during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	al Emissions	
	PPH	TPY	
	Refer to Table 2 for I	Emission Point 242E data.	
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,	
Engineering estimates.			

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	aim of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-A&B 105	Emission unit name: Reactor Condensers	List any control dev with this emission us N/A	
Provide a description of the emission Primary Reactor Condensers	on unit (type, method of operation, d	esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	:
<b>Design Capacity (examples: furnac</b> 4.450 MMBTU/hr	ees - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.  Maximum Annual Throughput: 28 weeks/yr		Maximum Operatin 28 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applica	able fields)		
Does this emission unit combust fu	el?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	r maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual for	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for Emission Point 242E data.	
Particulate Matter (PM <sub>10</sub> )		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	Refer to Table 2 for E	Emission Point 242E data.
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

Redacted Cla	im of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-A&B 119	Emission unit name: Pyrolyzer Condensers	List any control dev with this emission u	
Provide a description of the emission  Pyrolyzer Condensers	on unit (type, method of operation, d	esign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s) N/A	:
<b>Design Capacity (examples: furnace</b> 9.18 MMBTU/hr	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operatin 28 weeks/yr	g Schedule:
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	el? Yes X No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rat	ing of burners:
N/A N/A			
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(see left) usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

riteria Pollutants	Potential Emissions	
	PPH	TPY
rbon Monoxide (CO)	N/A	N/A
trogen Oxides (NO <sub>X</sub> )	N/A	N/A
ad (Pb)	N/A	N/A
rticulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the Schedule of Compliance Form as ATTACHMENT F.

Redacted Cla	nim of Confidentiality – Bayer Cropsci	ence – 4/18/2011	
Emission Unit Description			
Emission unit ID number: E-A&B 120 Emission unit name: Pyrolyzer Vent Condensers		List any control devices associated with this emission unit: N/A	
Provide a description of the emission Pyrolyzer Vent Condensers	on unit (type, method of operation, d	lesign parameters, etc.	):
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1976	Modification date(s N/A	):
Design Capacity (examples: furnace 240,000 BTU/hr	res - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: Conf.	Maximum Annual Throughput: Conf.	Maximum Operating Schedule: 28 weeks/yr	
Fuel Usage Data (fill out all applica	able fields)		
Does this emission unit combust fu	el?Yes _ <u>X</u> _ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	r maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A	N/A	N/A	
List the primary fuel type(s) and if the maximum hourly and annual for	applicable, the secondary fuel type(suel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

riteria Pollutants	Potential Emissions	
	PPH	TPY
rbon Monoxide (CO)	N/A	N/A
trogen Oxides (NO <sub>X</sub> )	N/A	N/A
ad (Pb)	N/A	N/A
rticulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.			
MIC unit is subject to the HON MACT.			
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.)			
Maintain applicable records required by the HON MACT.			
Are you in compliance with all applicable requirements for this emission unit? X YesNo			
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .			

nission unit name: actors  It (type, method of operation, decodel number: A	List any control deviwith this emission un N/A  esign parameters, etc.)  Serial number: N/A  Modification date(s) N/A	nit: :
actors  it (type, method of operation, decoder number:  A	with this emission un N/A  esign parameters, etc.)  Serial number: N/A  Modification date(s)	nit: :
odel number: A Stallation date:	esign parameters, etc.)  Serial number: N/A  Modification date(s)	
odel number: A Stallation date:	Serial number: N/A  Modification date(s)	
tallation date:	N/A  Modification date(s)	
tallation date:	N/A  Modification date(s)	
	1 -	•
		•
ons/hr, tanks - gallons):		
eximum Annual Throughput:	Maximum Operating 42 weeks/yr	g Schedule:
elds)		
Does this emission unit combust fuel?Yes _X_ No If yes,		
	Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		ing of burners:
N/A		
cable, the secondary fuel type(sage for each.	s). For each fuel type l	isted, provide
uring the term of the permit.		
Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A
i .	elds)  Yes X No  imum horsepower rating:  cable, the secondary fuel type (sage for each.  uring the term of the permit.  Max. Sulfur Content	ms/hr, tanks - gallons):    Maximum Annual Throughput:   Maximum Operating   42 weeks/yr

Emissions Data				
Criteria Pollutants	Potentia	l Emissions		
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)				
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 2 for E	Refer to Table 2 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	l Emissions		
	PPH	TPY		
	Refer to Table 2 for E	Emission Point 242E data.		
Regulated Pollutants other than	Potentia	l Emissions		
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,		

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.
MIC unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number:	Emission unit name: Converter	List any control dev		
	- C31, 71, 132	N/A		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	):	
Phosgene Converters				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):	
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 1,254 gal and 1,122 gal				
Maximum Hourly Throughput: 115,333 pph	Maximum Annual Throughput: 503,771 tpy	Maximum Operation 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fuel?Yes _X_ No		If yes, is it?		
		Indirect Fired	Direct Fired	
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data				
Criteria Pollutants	Potential Emissions			
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)				
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 1 for E	Refer to Table 1 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	al Emissions		
	PPH	TPY		
	Refer to Table 1 for E	Emission Point 242E data.		
Regulated Pollutants other than	Potentia	al Emissions		
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,		
Engineering estimates.				

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number:	Emission unit name:	List any control dev	
Y-1539	Filter		
		N/A	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Filter			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
IVA	IV/A	IV/A	
Construction date:	Installation date:	Modification date(s	):
N/A	1993	N/A	
<b>Design Capacity (examples: furnace</b> 6 gal	s - tons/hr, tanks - gallons):	,	
Morienne House Throughout	Manimum Annual Thuanahanta	Marriana Oranati	a Calcadula.
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ig schedule:
Fuel Usage Data (fill out all applical	ple fields)	T	
Does this emission unit combust fue	?Yes <u>X</u> 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:			ting of burners:
N/A N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fu		). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be used during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

riteria Pollutants	Potential Emissions	
	PPH	TPY
rbon Monoxide (CO)	N/A	N/A
trogen Oxides (NO <sub>X</sub> )	N/A	N/A
ad (Pb)	N/A	N/A
rticulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

versions of software used, source and dates of emission factors, etc.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: C-430	Emission unit name: Storage Tank	List any control devices associated with this emission unit:	
	33338	242E	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):
Phosgene Storage Tank			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s	):
<b>Design Capacity (examples: furnace</b> 4,000 gal	s - tons/hr, tanks - gallons):	I	
Maximum Hourly Throughput: 12,100 pph	<b>Maximum Annual Throughput:</b> 52,998 tpy	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fue	!?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	ria Pollutants Potentia		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 1 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 1 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	ll Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates using AP-42.		es of any stack tests conducted,	

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
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: Storage Tank	List any control dewith this emission u	
	2001.60	242D/242E or 242B	/242A
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc	.):
Storage Tank			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s	):
Design Capacity (examples: furnace 300 gal	s - tons/hr, tanks - gallons):	l	
Maximum Hourly Throughput: 500 pph	Maximum Annual Throughput: 2,190 tpy	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	!?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burn		ting of burners:	
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be used during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	ria Pollutants Potentia		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 1 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 1 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	ll Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates using AP-42.		es of any stack tests conducted,	

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATI	CACHMENT E - Emission Uni	it Form	
Emission Unit Description			
Emission unit ID number: C-460	Emission unit name: Storage Tank	List any control devices associated with this emission unit:	
		N/A	
Provide a description of the emission	on unit (type, method of operation, d	esign parameters, etc.	):
Phosgene Surge Tank			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):
Design Capacity (examples: furnac 500 gal	es - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: 154,302 pph	<b>Maximum Annual Throughput:</b> 675,852 tpy	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applica	ble fields)		
Does this emission unit combust fue	el?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if the maximum hourly and annual fu	applicable, the secondary fuel type(s nel usage for each.	s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be u	sed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potentia	Potential Emissions	
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 1 for E	Emission Point 242A data.	
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 1 for E	Emission Point 242A data.	
Regulated Pollutants other than	Potentia	al Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,	
Engineering estimates.			

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: D-1520	Emission unit name: Vent Scrubber	List any control dev	
_ 10 <b>_</b> 0	, , , , , , , , , , , , , , , , , , , ,	N/A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Vent Scrubber			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 9,000 lbs	s - tons/hr, tanks - gallons):		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel	1?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

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.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: D-1524	Emission unit name:  De-entrainment Tank	List any control dev	
		N/A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
De-entrainment Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):
Design Capacity (examples: furnace 200 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	1	
Does this emission unit combust fuel	!?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
		_

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.).

_			. •
Hn	oin	Pering	estimates.
$\perp$ 111	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: D-1528	Emission unit name: Knock Out Pot	List any control dev	
		N/A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Knock Out Pot			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 6 gal	s - tons/hr, tanks - gallons):		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	!?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

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.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
W. Downit Gl. 11
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number:	Emission unit name: Converter Condenser	List any control dewith this emission u		
		242E – VGI Scrubbe	er	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc	.):	
Converter Chloroform Condenser				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1993	Modification date(s	):	
Design Capacity (examples: furnace 3.7 MMBTU/hr	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: 50,600 pph	Maximum Annual Throughput: 221,628 tpy	Maximum Operation 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)			
Does this emission unit combust fuel	<b>!</b> ?Yes _ <u>X</u> No	If yes, is it?		
		Indirect Fired	Direct Fired	
Maximum design heat input and/or	Maximum design heat input and/or maximum horsepower rating: Type and Btu/hr rating of burners:			
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be used during the term of the permit.				
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 1 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )			
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	Refer to Table 1 for E	Emission Point 242E data.	
Regulated Pollutants other than	Potentia	ll Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and Engineering estimates using AP-42.		es of any stack tests conducted,	

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.
Phosgene unit is subject to the HON MACT.
<b>45CSR§21-37, CO-21-97-4</b> : Control device 242D/242E efficiency is 99.58/99 % and 242B/242A is 0/98 %. Maximum hours of operation limited to 8,424 hrs/yr and emissions are limited to 0.45 lbs/hr and 1.90 tpy.
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.)
Maintain applicable records required by the HON MACT.
<b>45CSR§21-37, CO-21-97-4</b> : See Attachment G for specific control device requirements.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: E-413	Emission unit name: Superheater	List any control dev	
		N/A	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	):
Chlorine Superheater			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s	):
<b>Design Capacity (examples: furnace</b> 68,560 BTU/hr	s - tons/hr, tanks - gallons):	I	
Maximum Hourly Throughput: 8,282 pph	<b>Maximum Annual Throughput:</b> 36,275 tpy	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	I	
Does this emission unit combust fue	!?Yes <u>X</u> 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:			
N/A N/A			
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data				
Criteria Pollutants	Potential Emissions			
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)				
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 1 for Emission Point 242E data.			
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	al Emissions		
	PPH	TPY		
	Refer to Table 1 for E	Emission Point 242E data.		
Regulated Pollutants other than	Potentia	al Emissions		
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,		
Engineering estimates.				

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: E-431	Emission unit name: Start-Up Heater	List any control dev	
	and of anima	N/A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Chloroform Start-Up Heater			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):
Design Capacity (examples: furnace 869 BTU/hr	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: 52,900 pph	Maximum Annual Throughput: 231,698 tpy	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data				
Criteria Pollutants	Potential Emissions			
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)	Refer to Table 1 for Emission Point 242E data.			
Particulate Matter (PM <sub>2.5</sub> )				
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	al Emissions		
	PPH	TPY		
	Refer to Table 1 for E	Emission Point 242E data.		
Regulated Pollutants other than	Potentia	ıl Emissions		
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate to versions of software used, source and Engineering estimates.		es of any stack tests conducted,		

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: E-440	Emission unit name: Condenser	List any control dev	
		242A/C-471	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	):
Phosgene Condenser			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 975,185 BTU/hr	s - tons/hr, tanks - gallons):	I	
Maximum Hourly Throughput: 740,823 pph	<b>Maximum Annual Throughput:</b> 3,244,803 tpy	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	?Yes _ <u>X</u> 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:			
N/A N/A			
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data				
Criteria Pollutants	Potential Emissions			
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)				
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 1 for Emission Point 242A data.			
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	Potential Emissions		
	РРН	TPY		
	Refer to Table 1 for E	Emission Point 242A data.		
Regulated Pollutants other than	Potential Emissions			
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate the versions of software used, source and Material balance calculations.		es of any stack tests conducted,		

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.			
Phosgene unit is subject to the HON MACT.			
<b>45CSR§21-37, CO-21-97-4</b> : Control device C-471/242A efficiency is 99.99/98 %. Maximum hours of operation limited to 8,424 hrs/yr and emissions are limited to 33.2 lbs/hr and 139.8 tpy.			
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.)			
Maintain applicable records required by the HON MACT.			
45CSR§21-37, CO-21-97-4: See Attachment G for specific control device requirements.			
Are you in compliance with all applicable requirements for this emission unit? X_YesNo			

ATTACHMENT E - Emission Unit Form					
Emission Unit Description					
Emission unit ID number: E-450	Emission unit name: Brine Cooler	List any control dev			
	Brine Cooler	N/A			
Provide a description of the emission unit (type, method of operation, design parameters, etc.):					
Chloroform Brine Cooler					
Manufacturer: N/A	Model number: N/A	Serial number: N/A			
Construction date: N/A	Installation date: 1993	Modification date(s	):		
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 975,185 BTU/hr					
<b>Maximum Hourly Throughput:</b> 872,000 pph	Maximum Annual Throughput: 3,819,360 tpy	Maximum Operation 52 weeks/yr	ng Schedule:		
Fuel Usage Data (fill out all applicable fields)					
Does this emission unit combust fuel?Yes _X_ No		If yes, is it?			
		Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:		
N/A		N/A			
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.					
N/A					
Describe each fuel expected to be used during the term of the permit.					
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value		
N/A	N/A	N/A	N/A		

Emissions Data				
Criteria Pollutants	Potential Emissions			
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)				
Particulate Matter (PM <sub>2.5</sub> )	Refer to Table 1 for E	Refer to Table 1 for Emission Point 242E data.		
Particulate Matter (PM <sub>10</sub> )				
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	Potential Emissions		
	PPH	TPY		
	Refer to Table 1 for E	Emission Point 242E data.		
Regulated Pollutants other than	Potential Emissions			
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,		
Engineering estimates.				

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: E-1521	Emission unit name: Caustic Cooler	List any control dev		
2 1021	- Causar Cooly	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Caustic Cooler				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):	
Design Capacity (examples: furnace 370,000 BTU/hr	s - tons/hr, tanks - gallons):	<u> </u>		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A			
Fuel Usage Data (fill out all applical	ble fields)			
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential	Emissions
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			. •
Hn	oin	Pering	estimates.
$\perp$ 111	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: E-1531	Emission unit name: Vaporizer South	List any control dev		
2 1001	vaporizer south	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Vaporizer South				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):	
Design Capacity (examples: furnace 2.55 MMBTU/hr	s - tons/hr, tanks - gallons):	<u> </u>		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)	-		
Does this emission unit combust fuel? Yes X No If yes, is it?				
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

riteria Pollutants	Potential	Emissions
	PPH	TPY
arbon Monoxide (CO)	N/A	N/A
itrogen Oxides (NO <sub>X</sub> )	N/A	N/A
ead (Pb)	N/A	N/A
articulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? _X_YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: E-1532	Emission unit name: Vaporizer North	List any control dev		
2 1002	, apolizer i vorui	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Vaporizer North				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):	
Design Capacity (examples: furnace 2.55 MMBTU/hr	s - tons/hr, tanks - gallons):	<u> </u>		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)			
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential	Emissions
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
		_

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: E-1534	Emission unit name: Superheater	List any control dev		
2 100 .		N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Superheater				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):	
<b>Design Capacity (examples: furnace</b> 68,850 BTU/hr	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: Maximum Annual Throughput: N/A  N/A		Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)			
Does this emission unit combust fuel	If yes, is it?			
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

riteria Pollutants	Potential	Emissions
	PPH	TPY
rbon Monoxide (CO)	N/A	N/A
trogen Oxides (NO <sub>X</sub> )	N/A	N/A
ad (Pb)	N/A	N/A
rticulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number:	Emission unit name: Storage Tank	List any control dev		
	Zoorago rama	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Storage Tank				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1970	Modification date(s N/A	):	
Design Capacity (examples: furnace 30,000 gal	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: Maximum Annual Throughput: N/A		Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)			
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

riteria Pollutants	Potential	Emissions
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

•			. •
Hn	ann	apring	estimates.
-11	2111	CHIIE	Commatco

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: T-4579	Emission unit name: Storage Tank	List any control dev		
	Zoorago rama	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Storage Tank				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1963	Modification date(s N/A	):	
Design Capacity (examples: furnace 30,000 gal	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: Maximum Annual Throughp N/A		Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)			
Does this emission unit combust fuel	If yes, is it?			
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

riteria Pollutants	Potential	Emissions
	PPH	TPY
arbon Monoxide (CO)	N/A	N/A
itrogen Oxides (NO <sub>X</sub> )	N/A	N/A
ead (Pb)	N/A	N/A
articulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
otal Particulate Matter (TSP)	N/A	N/A
ulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
olatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: T-4580	Emission unit name: Storage Tank	List any control dev		
	2001480 14444	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Storage Tank				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1959	Modification date(s N/A	):	
Design Capacity (examples: furnace 30,000 gal	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: Maximum Annual Throughput: N/A		Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fuel	If yes, is it?			
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

riteria Pollutants	Potential	Emissions
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.				
Phosgene unit is subject to the HON MACT.				
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.)				
Maintain applicable records required by the HON MACT.				
Are you in compliance with all applicable requirements for this emission unit? X YesNo				
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: Storage Tank	List any control dev		
	33338	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Storage Tank				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1959	Modification date(s N/A	):	
Design Capacity (examples: furnace 30,000 gal	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: Maximum Annual Throughput: N/A N/A		Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fuel	If yes, is it?			
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

riteria Pollutants	Potential	Emissions
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: Tank Car	Emission unit name: Tank Car	List any control dev		
Tunk cu	Tunk cui	N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Tank Car				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1993	Modification date(s N/A	):	
Design Capacity (examples: furnace 180,000 lbs	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: N/A  Maximum Annual Throughput: N/A		Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fuel	If yes, is it?			
	Indirect Fired	Direct Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:	
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential	Emissions
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: V-1555	Emission unit name: Hydecat Reactor	List any control dev		
		N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Hydecat Reactor				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 2000	Modification date(s N/A	):	
Design Capacity (examples: furnace 100 gal/hr	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fuel?Yes _X No If yes, is it?				
Indirect Fired Direct Fire			Direct Fired	
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:				
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be used during the term of the permit.				
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Vitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential	Emissions
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: V-1556	Emission unit name: Pick Flow Water Heater	List any control dev		
		N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Pick Flow Water Heater				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 2000	Modification date(s N/A	):	
Design Capacity (examples: furnace 134,000 BTU/hr	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
Indirect Fired Direct Fired			Direct Fired	
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:				
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be used during the term of the permit.				
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Vitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential	Emissions
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
Phosgene unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 00028	Emission unit name: Dryer	List any control dev		
00020	Biyei	260A/260K		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):	
Wyssmont Dryer				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s	i):	
<b>Design Capacity (examples: furnace</b> 7,500 gal	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:	
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fuel	?Yes <u>X</u> 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:				
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be used during the term of the permit.				
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data		
Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions
Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.	
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	ll Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate the versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 00610	Emission unit name: Evaporator	List any control dev	
00010	2 raporator	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Evaporator			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 300 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	,	
Does this emission unit combust fuel?Yes _X_ 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:			ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point 260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,
Engineering estimates.		
Zingmeering estimates		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 1180 & 28310	Emission unit name:  Dryer Condensers	List any control dev	
20310	Bryer Condensers	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Wyssmont Dryer Condensers			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 2.2 MMBTU/hr	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel?Yes _X_ 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:			ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	1 Emissions
	РРН	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	1 Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,
Engineering estimates.	,	
Engineering estimates.		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number:	Emission unit name: Dissolver Storage Tank	List any control dev	
1070	Bissorver Storage Talik	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Dissolver Storage Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 1,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ble fields)	-	
Does this emission unit combust fuel?Yes _X_ 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:			ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point 260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,
Engineering estimates.		
Zingmeering estimates		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 02134	Emission unit name: #2 Crystallizer	List any control dev	
02131	"2 Crystallizer	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	):
Crystallizer			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 10,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	1	
Does this emission unit combust fuel?Yes _X_ 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:			
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point 260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	ll Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate the versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 1515115-62B	Emission unit name: Hopper	List any control dev	
		260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):
Hopper			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 7,500 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput:     Maximum Annual Throughput:     Maximum Operating Sch       N/A     52 weeks/yr		ng Schedule:	
Fuel Usage Data (fill out all applical	ble fields)	-	
Does this emission unit combust fuel?Yes _X_ No If yes, is it?			
	Indirect Fired	Direct Fired	
Maximum design heat input and/or	Type and Btu/hr ra	ting of burners:	
N/A	N/A		
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	1.219	5.340
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Гoluene	1.219	5.340
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 4601	Emission unit name: Storage Tank	List any control dev		
1001	Storage Tunk	260K		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Storage Tank				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):	
<b>Design Capacity (examples: furnace</b> 15,000 gal	s - tons/hr, tanks - gallons):	<u> </u>		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)	-		
Does this emission unit combust fuel?Yes _X No If yes, is it?				
		Indirect Fired	Direct Fired	
Maximum design heat input and/or	Type and Btu/hr ra	ting of burners:		
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data		
Criteria Pollutants	Potential	Emissions
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.023	0.101
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Toluene	0.023	0.100
Chloroform	< 0.001	0.001
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			. •
Hn	ann	APring	estimates
-11	2111	CUIIIE	Commanco

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 4602	Emission unit name: Storage Tank	List any control dev		
	233306	260K		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Storage Tank				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):	
<b>Design Capacity (examples: furnace</b> 15,000 gal	s - tons/hr, tanks - gallons):	<u> </u>		
<b>Maximum Hourly Throughput:</b> N/A	num Hourly Throughput: Maximum Annual Throughput: Maximum Operating Schedul 52 weeks/yr		ng Schedule:	
Fuel Usage Data (fill out all applical	ble fields)	-		
Does this emission unit combust fuel?Yes _X_ No If yes, is it?				
	Indirect Fired	Direct Fired		
Maximum design heat input and/or	Type and Btu/hr ra	ting of burners:		
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potentia	l Emissions
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.025	0.110
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Toluene	0.025	0.110
Regulated Pollutants other than	Potentia	ıl Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4603	Emission unit name: Storage Tank	List any control dev	
1003	Storage Tunk	260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):
Storage Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 15,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ble fields)	-	
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	(aximum design heat input and/or maximum horsepower rating: Type and Btu/hr rating of bu		ting of burners:
N/A N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.006	0.025
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Toluene	0.006	0.024
Chloroform	< 0.001	0.001
Benzene	< 0.001	< 0.001
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4604	Emission unit name: Storage Tank	List any control dev	
1001	Storage Tunk	260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):
Storage Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 15,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of bu		ting of burners:
N/A N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.020	0.086
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Toluene	0.020	0.086
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4608	Emission unit name: Storage Tank	List any control dev	
1000	Storage Tank	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Storage Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 15,000 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potentia	l Emissions
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)	For Emission Point 260A/260K emissions	
Particulate Matter (PM <sub>2.5</sub> )		
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate		es of any stack tests conducted,
versions of software used, source and	dates of emission factors, etc.).	
Engineering estimates.		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4615	Emission unit name: Storage Tank	List any control devices associated with this emission unit:	
1013	Storage Tank	260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc	.):
Storage Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 10,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	1?Yes _ <u>X</u> No	If yes, is it?	
		Indirect FiredDirect Fired	
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr rating of burners:	
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Potential	Emissions
РРН	TPY
N/A	N/A
0.008	0.035
Potential	Emissions
PPH	TPY
0.007	0.031
< 0.001	0.004
< 0.001	< 0.001
< 0.001	< 0.001
Potential	Emissions
РРН	TPY
N/A	N/A
	PPH  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/

•			. •
Hn	ann	APring	estimates.
-11	2111	CUIIIE	Commatco

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4617	Emission unit name: Storage Tank	List any control devices associated with this emission unit:	
	2333.60	242A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Storage Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 16,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)	-	
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect FiredDirect Fired	
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr rating of burners:	
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data Criteria Pollutants	Potantia	l Emissions
Criteria Poliutants	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.025	0.110
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4619	Emission unit name: Storage Tank	List any control dev	
	Storage Tunk	260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):
Storage Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 15,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)	-	
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of		ting of burners:	
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potentia	l Emissions
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.066	0.291
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Toluene	0.053	0.230
Carbaryl	< 0.001	< 0.001
Chloroform	0.010	0.044
Benzene	0.004	0.016
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4621	Emission unit name: Storage Tank	List any control dev	
1021	Storage Tank	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Storage Tank			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 16,000 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ole fields)	-	
Does this emission unit combust fuel	?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of		ting of burners:	
N/A N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point 260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Poin	t 260A/260K emission
	refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,
Engineering estimates.		
Zingmeering estimates		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4623	Emission unit name: Storage Tank	List any control dev	
1023	Storage Tunk	260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc	.):
Storage Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 15,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel	1?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of I		ting of burners:	
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.087	0.380
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Toluene	0.087	0.380
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 4688-4693	Emission unit name: Storage Bins	List any control devices associated with this emission unit:	
	2001.80	265A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Storage Bins			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 150,000 lbs	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)	-	
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	1.941	28.715
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Carbaryl	1.941	28.715
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 4694-4699	Emission unit name: Storage Bins	List any control devices associated with this emission unit:	
1057	Storage Bins	265B	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Storage Bins			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 150,000 lbs	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)	-	
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potentia	l Emissions
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
itrogen Oxides (NO <sub>X</sub> )	N/A	N/A
ead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
articulate Matter (PM <sub>10</sub> )	N/A	N/A
Γotal Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	15.412	67.525
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Carbaryl	15.412	67.525
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 25352	Emission unit name:  Jet Pot	List any control devices associated with this emission unit:	
23332	Jet 1 of	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Jet Pot			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 120 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ole fields)	-	
Does this emission unit combust fuel	?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.	
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	For Emission Poin	t 260A/260K emission	
	refer to equipment	# 26001 emissions data.	
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	РРН	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,	
Engineering estimates.			
Zingmeering estimates			

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 26001	Emission unit name: Reactor	List any control devices associated with this emission unit:	
20001	Reactor	260K/260A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Reactor			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 7,000 gal	s - tons/hr, tanks - gallons):		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel	1?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potentia	1 Emissions
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.610	2.670
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Toluene	0.602	2.637
Methyl Isocyanate	0.002	0.009
Benzene	0.006	0.024
Regulated Pollutants other than	Potentia	1 Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

_			. •
Hn	onn	Perina	estimates.
பப	2111	CCHHE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26002	Emission unit name: Reactor	List any control dev	
20002	Reactor	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Distillation Column			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 7,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	-	
Does this emission unit combust fuel?Yes _X_ No If yes, is it?			
	Indirect FiredDirect Fired		
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:		ting of burners:	
N/A N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)	For Emission Point 260A/260K emissions	
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )		
Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.	
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate the versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26003	Emission unit name: Stripping Still	List any control dev	
20003	Surpping Sun	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Stripping Still			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 6,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel?Yes _X_ No If yes, is it?			
Indirect Fired Direct Fired			Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:		ting of burners:	
N/A N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)	For Emission Point 260A/260K emissions	
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )		
Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.	
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate the versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26004	Emission unit name:  Mother Liquor Tank	List any control dev	
20001	Modici Equal Talik	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Mother Liquor Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 5,000 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel?Yes _X No If yes, is it?			
Indirect FiredDirect Fired			Direct Fired
Maximum design heat input and/or maximum horsepower rating:  Type and Btu/hr rating of burners:			ting of burners:
N/A N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)	For Emission Point 260A/260K emissions	
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )		
Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.	
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate the versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 26006	Emission unit name: Dissolver Storage Tank	List any control devices associated with this emission unit:		
20000	Bissorver Storage Talik	260A/260K		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Dissolver Storage Tank				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s): N/A		
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 1,000 gal				
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)	-		
Does this emission unit combust fuel?Yes _X No		If yes, is it?		
		Indirect FiredDirect Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr rating of burners:		
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants    PPH   TPY	Emissions Data			
Carbon Monoxide (CO)  Nitrogen Oxides (NO <sub>X</sub> )  Lead (Pb)  Particulate Matter (PM <sub>2.5</sub> )  Particulate Matter (PM <sub>10</sub> )  Total Particulate Matter (TSP)  Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants  Per Emission Point 260A/260K emissions data.  Potential Emissions  PPH  TPY  For Emission Point 260A/260K emissions data.  Potential Emissions  PPH  TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	Criteria Pollutants	Potential Emissions		
Nitrogen Oxides (NO <sub>X</sub> )  Lead (Pb)  Particulate Matter (PM <sub>2.5</sub> ) Particulate Matter (PM <sub>10</sub> )  Total Particulate Matter (TSP) Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants PPH TPY  For Emission Point 260A/260K emissions data.  Potential Emissions PPH TPY  For Emission Point 260A/260K emissions refer to equipment # 26001 emissions data.		РРН	TPY	
Particulate Matter (PM2.5)   For Emission Point 260A/260K emissions	Carbon Monoxide (CO)			
Particulate Matter (PM2.5) Particulate Matter (PM10) Particulate Matter (PM10) Total Particulate Matter (TSP) Sulfur Dioxide (SO2) Volatile Organic Compounds (VOC)  Hazardous Air Pollutants Potential Emissions PPH TPY  For Emission Point 260A/260K emission PPH TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions PPH TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH TPY  N/A N/A N/A N/A N/A  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.).	Nitrogen Oxides (NO <sub>X</sub> )			
Particulate Matter (PM <sub>10</sub> )  Total Particulate Matter (TSP)  Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants  Potential Emissions  PPH  TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP  PPH  TPY  N/A  N/A  N/A  N/A  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.).	Lead (Pb)			
Total Particulate Matter (TSP)  Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants  PPH  TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH  N/A N/A N/A N/A  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.).	Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	For Emission Point 260A/260K emissions	
Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants Potential Emissions PPH TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH PPH TPY  N/A N/A N/A N/A  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.).	Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.		
Notatile Organic Compounds (VOC)    Hazardous Air Pollutants	Total Particulate Matter (TSP)			
Hazardous Air Pollutants  Potential Emissions  PPH  TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH TPY  N/A N/A N/A N/A N/A  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.).	Sulfur Dioxide (SO <sub>2</sub> )			
PPH TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH TPY  N/A N/A N/A N/A N/A  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.).	Volatile Organic Compounds (VOC)			
For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.    Regulated Pollutants other than Criteria and HAP	Hazardous Air Pollutants	Potentia	l Emissions	
Regulated Pollutants other than Criteria and HAP PPH TPY N/A N/A N/A N/A N/A N/A  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.).		PPH	TPY	
Regulated Pollutants other than Criteria and HAP PPH TPY N/A N/A N/A N/A N/A N/A  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.).				
Regulated Pollutants other than Criteria and HAP PPH TPY N/A N/A N/A N/A N/A  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.).		For Emission Point 260A/260K emission		
Criteria and HAP  PPH  TPY  N/A  N/A  N/A  N/A  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.).		refer to equipment # 26001 emissions data.		
Criteria and HAP  PPH  TPY  N/A  N/A  N/A  N/A  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.).				
N/A N/A N/A N/A  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.).		Potential Emissions		
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.).	Спієпа апо нар	PPH	TPY	
versions of software used, source and dates of emission factors, etc.).	N/A	N/A	N/A	
versions of software used, source and dates of emission factors, etc.).				
versions of software used, source and dates of emission factors, etc.).				
			es of any stack tests conducted,	
Engineering estimates.				
	Engineering estimates.			

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.			
SEVIN unit is subject to the HON MACT.			
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.)			
Maintain applicable records required by the HON MACT.			
Are you in compliance with all applicable requirements for this emission unit? X YesNo			

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 26007	Emission unit name: A/C Surge Tank	List any control devices associated with this emission unit:		
20007	The Burge Tunk	260A/260K		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):	
A/C Surge Tank				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s): N/A		
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 1,500 gal				
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)			
Does this emission unit combust fuel?Yes _X No		If yes, is it?		
		Indirect FiredDirect Fired		
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr rating of burners:		
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data			
Criteria Pollutants	Potential Emissions		
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point 260A/260K emissions		
Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.		
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	Potential Emissions	
	PPH	TPY	
	For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.		
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate the versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 26008	Emission unit name: Bird Centrifuge	List any control dev	
20000	But commage	260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	):
Bird Centrifuge		,	
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 400 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	,	
Does this emission unit combust fuel	?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	1.941	8.500
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Toluene	1.941	8.500
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

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.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26010	Emission unit name: Drying Still	List any control dev	
20010	Diffing Sun	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Drying Still			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 40,000 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	,	
Does this emission unit combust fuel	?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions
Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.	
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Poin	t 260A/260K emission
	refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,
Engineering estimates.		
Zingmeering estimates		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 26011	Emission unit name: Vacuum Pump	List any control dev	
20011	vacaum rump	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Vacuum Pump			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 50 mmHg	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point 260A/260K emissions		
Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.		
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
		t 260A/260K emission # 26001 emissions data.	
Regulated Pollutants other than	Potentia	ll Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate the versions of software used, source and Engineering estimates.		es of any stack tests conducted,	

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 26012	Emission unit name: Vacuum Pump	List any control dev	
20012	vacaum rump	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Vacuum Pump			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 50 mmHg	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	-	
Does this emission unit combust fuel	?Yes _ <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potentia	ential Emissions	
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	t 260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.	
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	al Emissions	
	PPH	TPY	
		t 260A/260K emission # 26001 emissions data.	
Regulated Pollutants other than	Potentia	al Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,	
Engineering estimates.			

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26013	Emission unit name: Centrifuges	List any control dev	
20013	Commuges	260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	):
Centrifuges		,	
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 300 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	0.776	3.399
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Toluene	0.776	3.399
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

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.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26014	Emission unit name:  Demister	List any control dev	
20014	Beilisei	260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	):
Demister			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 1,200 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel	?Yes <u>X</u> No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	1.059	4.640
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
Гoluene	1.059	4.640
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

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.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26016	Emission unit name: AC Chiller Coil	List any control dev	
		N/A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
AC Chiller Coil			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 0.2 MMBTU/hr	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fue	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fu		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential	Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A

versions of software used, source and dates of emission factors, etc.).

_			. •
Hn	oin	Pering	estimates.
$\perp$ 111	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26017	Emission unit name: Crystallizer Overhead Tank	List any control dev	
20017	Crystallizer Overhead Tunk	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Crystallizer Overhead Tank			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
Design Capacity (examples: furnace 1,000 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fue	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fu		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	РРН	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
		t 260A/260K emission # 26001 emissions data.
Regulated Pollutants other than	Potentia	ll Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate the versions of software used, source and Engineering estimates.		es of any stack tests conducted,

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26018	Emission unit name: Product Filter	List any control dev	
		N/A	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Product Filter			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
<b>Design Capacity (examples: furnace</b> 5,088 in <sup>3</sup>	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	N/A	N/A
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A
Lead (Pb)	N/A	N/A
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A
Particulate Matter (PM <sub>10</sub> )	N/A	N/A
Total Particulate Matter (TSP)	N/A	N/A
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A
Volatile Organic Compounds (VOC)	N/A	N/A
Hazardous Air Pollutants	Potential Emissions	
	РРН	TPY
N/A	N/A	N/A
Regulated Pollutants other than	Potential Emissions	
Criteria and HAP	РРН	TPY
N/A	N/A	N/A

versions of software used, source and dates of emission factors, etc.).

•			. •
Hn	ann	apring	estimates.
-11	2111	CHILE	Commatco

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26019	Emission unit name: Feed Filter	List any control dev	
2001)	Teed Titlet	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Feed Filter			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s): N/A	
Design Capacity (examples: furnace 40 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr	
Fuel Usage Data (fill out all applical	ble fields)		
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ No	If yes, is it?	
		Indirect Fired	Direct Fired
Maximum design heat input and/or maximum horsepower rating:		Type and Btu/hr ra	ting of burners:
N/A		N/A	
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.	
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	For Emission Poin	t 260A/260K emission	
	refer to equipment # 26001 er		
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	РРН	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,	
Engineering estimates.			
Zingmeering estimates			

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 26022	Emission unit name: Vent Condenser	List any control devices associated with this emission unit:		
20022	Vent Condenser	260A/260K		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):	
Vent Condenser				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s): N/A		
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 0.1 MMBTU/hr				
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)			
Does this emission unit combust fuel?Yes _X_ No		If yes, is it?		
		Indirect FiredDirect Fired		
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rating of burners:		
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data				
Criteria Pollutants	Potentia	Potential Emissions		
	PPH	TPY		
Carbon Monoxide (CO)				
Nitrogen Oxides (NO <sub>X</sub> )				
Lead (Pb)				
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	For Emission Point 260A/260K emissions		
Particulate Matter (PM <sub>10</sub> )	refer to equipment	refer to equipment # 26001 emissions data.		
Total Particulate Matter (TSP)				
Sulfur Dioxide (SO <sub>2</sub> )				
Volatile Organic Compounds (VOC)				
Hazardous Air Pollutants	Potentia	Potential Emissions		
	PPH	TPY		
	For Emission Poin	t 260A/260K emission		
	refer to equipment # 26001 emissions data.			
Regulated Pollutants other than	Potentia	Potential Emissions		
Criteria and HAP	PPH	TPY		
N/A	N/A	N/A		
List the method(s) used to calculate t		es of any stack tests conducted,		
versions of software used, source and	i dates of emission factors, etc.).			
Engineering estimates.				

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.		
SEVIN unit is subject to the HON MACT.		
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.)		
Maintain applicable records required by the HON MACT.		
Are you in compliance with all applicable requirements for this emission unit? X YesNo		

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 26023	Emission unit name: Overhead Condenser	List any control devices associated with this emission unit:		
20020	0.0000000000000000000000000000000000000	260A/260K		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):	
Overhead Condenser				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s): N/A		
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 3.9 MMBTU/hr				
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)			
Does this emission unit combust fuel	1?Yes <u>X</u> No	If yes, is it?		
		Indirect FiredDirect Fired		
Maximum design heat input and/or	maximum horsepower rating:	Type and Btu/hr rating of burners:		
N/A		N/A		
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants    PPH   TPY	Emissions Data			
Carbon Monoxide (CO)  Nitrogen Oxides (NO <sub>X</sub> )  Lead (Pb)  Particulate Matter (PM <sub>2.5</sub> )  Particulate Matter (PM <sub>10</sub> )  Total Particulate Matter (TSP)  Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants  Per Emission Point 260A/260K emissions data.  Potential Emissions  PPH  TPY  For Emission Point 260A/260K emissions data.  Potential Emissions  PPH  TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.	Criteria Pollutants	Potential Emissions		
Nitrogen Oxides (NO <sub>X</sub> )  Lead (Pb)  Particulate Matter (PM <sub>2.5</sub> ) Particulate Matter (PM <sub>10</sub> )  Total Particulate Matter (TSP) Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants PPH TPY  For Emission Point 260A/260K emissions data.  Potential Emissions PPH TPY  For Emission Point 260A/260K emissions refer to equipment # 26001 emissions data.		РРН	TPY	
Particulate Matter (PM2.5)   For Emission Point 260A/260K emissions	Carbon Monoxide (CO)			
Particulate Matter (PM2.5) Particulate Matter (PM10) Particulate Matter (PM10) Total Particulate Matter (TSP) Sulfur Dioxide (SO2) Volatile Organic Compounds (VOC)  Hazardous Air Pollutants Potential Emissions PPH TPY  For Emission Point 260A/260K emission PPH TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions  PPH TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH TPY  N/A N/A N/A N/A N/A  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.).	Nitrogen Oxides (NO <sub>X</sub> )			
Particulate Matter (PM <sub>10</sub> )  Total Particulate Matter (TSP)  Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants  Potential Emissions  PPH  TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP  PPH  TPY  N/A  N/A  N/A  N/A  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.).	Lead (Pb)			
Total Particulate Matter (TSP)  Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants  PPH  TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH  N/A N/A N/A N/A  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.).	Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	For Emission Point 260A/260K emissions	
Sulfur Dioxide (SO <sub>2</sub> )  Volatile Organic Compounds (VOC)  Hazardous Air Pollutants Potential Emissions PPH TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH PPH TPY  N/A N/A N/A N/A  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.).	Particulate Matter (PM <sub>10</sub> )	refer to equipment # 26001 emissions data.		
Notatile Organic Compounds (VOC)    Hazardous Air Pollutants	Total Particulate Matter (TSP)			
Hazardous Air Pollutants  Potential Emissions  PPH  TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH TPY  N/A N/A N/A N/A N/A  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.).	Sulfur Dioxide (SO <sub>2</sub> )			
PPH TPY  For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.  Regulated Pollutants other than Criteria and HAP PPH TPY  N/A N/A N/A N/A N/A  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.).	Volatile Organic Compounds (VOC)			
For Emission Point 260A/260K emission refer to equipment # 26001 emissions data.    Regulated Pollutants other than Criteria and HAP	Hazardous Air Pollutants	Potentia	l Emissions	
Regulated Pollutants other than Criteria and HAP PPH TPY N/A N/A N/A N/A N/A N/A  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.).		PPH	TPY	
Regulated Pollutants other than Criteria and HAP PPH TPY N/A N/A N/A N/A N/A N/A  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.).				
Regulated Pollutants other than Criteria and HAP PPH TPY N/A N/A N/A N/A N/A  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.).		For Emission Poin	t 260A/260K emission	
Criteria and HAP  PPH  TPY  N/A  N/A  N/A  N/A  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.).		refer to equipment	# 26001 emissions data.	
Criteria and HAP  PPH  TPY  N/A  N/A  N/A  N/A  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.).				
N/A N/A N/A N/A  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.).		Potential Emissions		
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.).	Спієпа апо нар	PPH	TPY	
versions of software used, source and dates of emission factors, etc.).	N/A	N/A	N/A	
versions of software used, source and dates of emission factors, etc.).				
versions of software used, source and dates of emission factors, etc.).				
			es of any stack tests conducted,	
Engineering estimates.				
	Engineering estimates.			

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 26852	Emission unit name: Knock Out Pot	List any control dev	
20032	Milock Gut Fot	260A/260K	
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):
Knock Out Pot			
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 65 gal	s - tons/hr, tanks - gallons):	<u> </u>	
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	,	
Does this emission unit combust fuel?Yes _X_ 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:			
N/A N/A			
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Poin	t 260A/260K emission
	refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,
	i dates of emission factors, etc.).	
Engineering estimates.		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo
If no, complete the <b>Schedule of Compliance Form</b> as <b>ATTACHMENT F</b> .

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 26953	Emission unit name: #3 Crystallizer	List any control dev	
20,00	"" Crystallizer	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Crystallizer			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 10,000 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel?Yes _X_ 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:			
N/A N/A			
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Poin	t 260A/260K emission
	refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,
	i dates of emission factors, etc.).	
Engineering estimates.		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATT	ACHMENT E - Emission Uni	t Form	
Emission Unit Description			
Emission unit ID number: 28094	Emission unit name: Condensate Pot	List any control dev	
20071	Condensate 1 of	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Condensate Pot			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
Design Capacity (examples: furnace 320 gal	s - tons/hr, tanks - gallons):	<u> </u>	
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operation 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)		
Does this emission unit combust fuel?Yes _X_ 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:			
N/A N/A			
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Poin	t 260A/260K emission
	refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	PPH	TPY
N/A	N/A	N/A
List the method(s) used to calculate to versions of software used, source and		es of any stack tests conducted,
	i dates of emission factors, etc.).	
Engineering estimates.		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form			
Emission Unit Description			
Emission unit ID number: 28197	Emission unit name: #1 Crystallizer	List any control dev	
	- " - Caystanader	260A/260K	
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):
Cystallizer			
Manufacturer: N/A	Model number: N/A	Serial number: N/A	
Construction date: N/A	Installation date: 1962	Modification date(s N/A	):
<b>Design Capacity (examples: furnace</b> 10,000 gal	s - tons/hr, tanks - gallons):		
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operatin 52 weeks/yr	ng Schedule:
Fuel Usage Data (fill out all applical	ole fields)	1	
Does this emission unit combust fuel?Yes _X_ 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:			
N/A N/A			
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.			
N/A			
Describe each fuel expected to be us	ed during the term of the permit.		
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
N/A	N/A	N/A	N/A

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO <sub>X</sub> )		
Lead (Pb)		
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO <sub>2</sub> )		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potentia	l Emissions
	PPH	TPY
	For Emission Poin	t 260A/260K emission
	refer to equipment # 26001 emissions data.	
Regulated Pollutants other than	Potentia	l Emissions
Criteria and HAP	РРН	TPY
N/A	N/A	N/A
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,
Engineering estimates.		
Zingmeering estimates		

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 29640	Emission unit name: Solvent Heater	List any control dev		
		260A/260K		
Provide a description of the emission	n unit (type, method of operation, de	esign parameters, etc.	.):	
Toluene Solvent Heater				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s): N/A		
Design Capacity (examples: furnace 2.9 MMBTU/hr	s - tons/hr, tanks - gallons):			
Maximum Hourly Throughput: N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)	1		
Does this emission unit combust fue	?Yes <u>X</u> 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:				
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data			
Criteria Pollutants	Potentia	l Emissions	
	РРН	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.	
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	1 Emissions	
	PPH	TPY	
	For Emission Poin	t 260A/260K emission	
	refer to equipment # 26001 emissions data.		
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,	
Engineering estimates.			

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 29763	Emission unit name:  Regeneration Condenser  List any control devices associated with this emission unit:			
		N/A		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Regeneration Condenser				
Manufacturer: N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s): N/A		
Design Capacity (examples: furnace 1,000 gal	s - tons/hr, tanks - gallons):			
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ole fields)			
Does this emission unit combust fuel	?Yes <u>X</u> 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:				
N/A	N/A			
List the primary fuel type(s) and if a the maximum hourly and annual fue		s). For each fuel type	listed, provide	
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)	N/A	N/A	
Nitrogen Oxides (NO <sub>X</sub> )	N/A	N/A	
Lead (Pb)	N/A	N/A	
Particulate Matter (PM <sub>2.5</sub> )	N/A	N/A	
Particulate Matter (PM <sub>10</sub> )	N/A	N/A	
Total Particulate Matter (TSP)	N/A	N/A	
Sulfur Dioxide (SO <sub>2</sub> )	N/A	N/A	
Volatile Organic Compounds (VOC)	N/A	N/A	
Hazardous Air Pollutants	Potential	Emissions	
	PPH	TPY	
N/A	N/A	N/A	
Regulated Pollutants other than	Potential	Emissions	
Criteria and HAP	PPH	TPY	
N/A	N/A	N/A	

versions of software used, source and dates of emission factors, etc.).

_			
Hn	ann	Pering	estimates.
-11	2111	CCHIE	Commatco.

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

ATTACHMENT E - Emission Unit Form				
Emission Unit Description				
Emission unit ID number: 31084	Emission unit name: Vent Kettle	List any control dev		
3100+	Vent Retue	260A/260K		
Provide a description of the emission	n unit (type, method of operation, d	esign parameters, etc.	.):	
Vent Kettle				
<b>Manufacturer:</b> N/A	Model number: N/A	Serial number: N/A		
Construction date: N/A	Installation date: 1962	Modification date(s): N/A		
<b>Design Capacity (examples: furnace</b> 1,500 gal	s - tons/hr, tanks - gallons):	<u> </u>		
<b>Maximum Hourly Throughput:</b> N/A	Maximum Annual Throughput: N/A	Maximum Operating Schedule: 52 weeks/yr		
Fuel Usage Data (fill out all applical	ble fields)	-		
Does this emission unit combust fuel	<b>!</b> ?Yes _X_ 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:				
N/A	N/A			
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.				
N/A				
Describe each fuel expected to be us	ed during the term of the permit.			
Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value	
N/A	N/A	N/A	N/A	

Emissions Data			
Criteria Pollutants	Potential Emissions		
	PPH	TPY	
Carbon Monoxide (CO)			
Nitrogen Oxides (NO <sub>X</sub> )			
Lead (Pb)			
Particulate Matter (PM <sub>2.5</sub> )	For Emission Point	260A/260K emissions	
Particulate Matter (PM <sub>10</sub> )	refer to equipment	# 26001 emissions data.	
Total Particulate Matter (TSP)			
Sulfur Dioxide (SO <sub>2</sub> )			
Volatile Organic Compounds (VOC)			
Hazardous Air Pollutants	Potentia	l Emissions	
	PPH	TPY	
	For Emission Poin	t 260A/260K emission	
	refer to equipment	# 26001 emissions data.	
Regulated Pollutants other than	Potential Emissions		
Criteria and HAP	РРН	TPY	
N/A	N/A	N/A	
List the method(s) used to calculate t versions of software used, source and		es of any stack tests conducted,	
Engineering estimates.			
Zingmeering estimates			

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.
SEVIN unit is subject to the HON MACT.
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.)
Maintain applicable records required by the HON MACT.
Are you in compliance with all applicable requirements for this emission unit? X YesNo

**Table 1: Phosgene Unit Process Control Device Emissions** 

Emission Point ID No	Max Annual Vent Time (hr/yr)	Chemical Name	Max Hourly (lb/hr)	Est. Method Used	Concentration (mg/m3)	Max Annual (lb/yr)
		Phosgene	0.0001	EE	0.00019	0.6
		Chlorine	5 E-6	EE	8.5 E-6	0.03
242A 8424	Hydrogen Chloride	0.063	EE	0.11	380	
		Carbon Tetrachloride	0.0002	EE	0.00033	1.1
		Carbon Monoxide	2.2	EE	3.8	11,200
		Hydrogen Chloride	0.027	EE	7.2	2
242E 842	9424	Chlorine	0.002	EE	0.6	0.15
	0424	Chloroform	0.06	EE	16	4
		Carbon Tetrachloride	8.7 E-5	EE	0.03	0.0011

**Table 2: MIC Unit Process Control Device Emissions** 

Emission Point ID No	Max Annual Vent Time (hr/yr)	Chemical Name	Max Hourly (lb/hr)	Est. Method Used	Concentration (mg/m3)	Max Annual (lb/yr)
		Methyl Isocyanate	0.41	EE	0.7	561
		Phosgene	0.008	EE	0.014	65
		Chlorine	0.004	EE	0.007	34
		Dichloromethane	0.03	EE	0.05	18
		Hydrogen Chloride	3.8	EE	198	32,011
		Methyl Chloride	0.002	EE	0.003	0.8
242A	8424	Chloroform	0.02	EE	0.034	69
242A	0424	Carbon Tetrachloride	6.2E-06	EE	0.000003	0.00002
		C2 Hydrocarbons	0.00002	EE	0.00003	0.0002
		Chlorobromethane	4E-06	EE	0.000007	0.00003
		Particulates	0.006	AP-42	0.01	51
		Sulfur Dioxide	0.004	AP-42	37 ppm	34
		Nitrogen Oxides	11.9	AP-42/EE	20.4	100,246
		Carbon Monoxide	3.48	AP-42	6.4	29,316
242B	72	Chloroform	20	EE	166,912	1,360
		Hydrogen Chloride	0.33	EE	123	1,664
	8424	Chlorine	1	EE	266	126
		Chloroform	4.87	EE	1,296	6,952
242E		Carbon Tetrachloride	0.6	EE	160	652
2420	0424	Particulates	0.0012	AP-42	0.3	10
		Sulfur Dioxide	0.0007	AP-42	0.2 ppm	6
		Nitrogen Oxides	0.1203	AP-42/EE	32	19,861
		Carbon Monoxide	0.0241	AP-42	6	183
242F	8760	Sodium Hydroxide	1.8 E-14	AP-42	6.0 E-5	1.6 E-10
242G	8760	Sodium Hydroxide	3.1 E-15	AP-42	6.1 E-5	2.7 E-11

# Attachment F Schedule of Compliance

### Attachment F Schedule of Compliance

Since there are currently no "out of compliance" emission units in Group 7, this section is not applicable.

### Attachment G Air Pollution Control Device Forms

ATTACHMENT G - Air Pollution Control Device Form				
Control device ID number: A-242	List all emission units associated with this control device. MIC Process Units			
Manufacturer:	Model number:	Installation date:		
National Air Oil	NA	1976		
Type of Air Pollution Control Device:				
Baghouse/Fabric Filter	Venturi Scrubber	Multiclone		
Carbon Bed Adsorber l	Packed Tower Scrubber	Single Cyclone		
Carbon Drum(s)	Other Wet Scrubber	Cyclone Bank		
Catalytic Incinerator	Condenser	Settling Chamber		
Thermal IncineratorX_	Flare	Other (describe)		
Wet Plate Electrostatic Precipitator		Dry Plate Electrostatic Precipitator		
List the pollutants for which this device	ce is intended to control and the ca	pture and control efficiencies.		
Pollutant	Capture Efficiency	Control Efficiency		
VOC's	98%	98%		
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).				
Is this device subject to the CAM requirements of 40 C.F.R. 64? YesX_No  If Yes, Complete ATTACHMENT H  If No, Provide justification. Device emission limitations and standards already established under existing Title V Permit. Subject to 40CFR, Subpart MMM, PAI MACT.				
Describe the parameters monitored an	nd/or methods used to indicate per	formance of this control device.		
<ul> <li>Hourly records of whether the monitor was continuously operating and whether the pilot flame was continuously present during each hour.</li> <li>Record and report the presence of a flame at the pilot light over the full period of the compliance determination.</li> <li>Record the time and durations of all periods when all pilot flames are absent or the monitor is not operating.</li> <li>Report the times and durations of all periods when all pilot flames of a flare are absent.</li> </ul>				

<b>ATTACHMENT G - Air Pollution Control Device Form</b>			
Control device ID number: K-260	List all emission units associated with this control device. Process Vents from SEVIN unit.		
Manufacturer:	Model number:	Installation date:	
N/A	N/A	1989	
<b>Type of Air Pollution Control Device:</b>			
Baghouse/Fabric Filter	Venturi Scrubber 1	Multiclone	
Carbon Bed Adsorber	Packed Tower Scrubber	Single Cyclone	
Carbon Drum(s)	Other Wet Scrubber	Cyclone Bank	
Catalytic Incinerator	Condenser	Settling Chamber	
_X_ Thermal Incinerator	Flare	Other (describe)	
Wet Plate Electrostatic Precipitator	1	Dry Plate Electrostatic Precipitator	
List the pollutants for which this device	ce is intended to control and the ca	pture and control efficiencies.	
Pollutant	Capture Efficiency	Control Efficiency	
N/A	N/A	N/A	
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).  • Operates at a minimum temperature of 1,380°F.			
Is this device subject to the CAM requirements of 40 C.F.R. 64? YesX_No  If Yes, Complete ATTACHMENT H  If No, Provide justification. Device emission limitations and standards already established under existing Title V Permit. Subject to 40CFR, Subpart MMM, PAI MACT.			
Continuous Records     Record and report the firebox temperature over the full period of the performance test.     Record the daily average firebox temperature for each operating day.  Percord all daily average firebox temperature for each operating day.			
<ul> <li>Report all daily average temperatures that are outside the range established in the NCS or operating permit and all operating days when insufficient monitoring data are collected.</li> </ul>			

ATTACHMENT G - Air Pollution Control Device Form				
Control device ID number: A-260	List all emission units associated with this control device. Fugitives			
Manufacturer:	Model number:	Installation date:		
Air Scrubber	NA	1978		
<b>Type of Air Pollution Control Device:</b>				
Baghouse/Fabric Filter	Venturi Scrubber	Multiclone		
Carbon Bed AdsorberX	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	1	Dry Plate Electrostatic Precipitator		
List the pollutants for which this device	ce is intended to control and the ca	pture and control efficiencies.		
Pollutant	Capture Efficiency	Control Efficiency		
Methyl Isocyanate	99.99%	99.99%		
Chloroform	0.9%	0.9%		
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).				
<ul> <li>Packed bed scrubber</li> <li>Caustic scrubber liquor 98% water 2%NaOH\</li> <li>Pressure drop of 15in of H<sub>2</sub>O</li> </ul>				
Is this device subject to the CAM requ	irements of 40 C.F.R. 64?Ye	s <u>X</u> No		
If Yes, Complete ATTACHMENT H				
If No, <b>Provide justification.</b> Device en V Permit. Subject to 40CFR, Subpart M		eady established under existing Title		
Describe the parameters monitored an	nd/or methods used to indicate per	formance of this control device.		
<ul> <li>Liquor flow rate &gt;150 gpm</li> <li>Caustic solution used as necessary to control odors.</li> <li>Daily logs of the amount of Larvin and Methomyl produced.</li> </ul>				

ATTACHMENT G - Air Pollution Control Device Form			
Control device ID number: A-265	List all emission units associated with this control device. Storage Bins 4688 - 4699		
Manufacturer:	Model number:	Installation date:	
N/A	N/A	1962	
<b>Type of Air Pollution Control Device:</b>			
X Baghouse/Fabric Filter	Venturi Scrubber1	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	1	Dry Plate Electrostatic Precipitator	
List the pollutants for which this device	ce is intended to control and the ca	pture and control efficiencies.	
Pollutant	Capture Efficiency	Control Efficiency	
Particulate Matter	99%	99%	
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).  • 140 ft2 of cloth.			
Is this device subject to the CAM requ	nirements of 40 C.F.R. 64? Ye	s <u>X</u> No	
If Yes, Complete ATTACHMENT H	nimian limitation on the total to	and an antabilish of an idea of the invited	
If No, <b>Provide justification.</b> Device er V Permit. Subject to 40CFR, Subpart M		eady established under existing Title	
Describe the parameters monitored an	nd/or methods used to indicate per	formance of this control device.	
<ul> <li>Opacity must be &lt; 20 percent</li> <li>Monitor the pressure drop across baghouse monthly.</li> </ul>			

ATTACHMENT G - Air Pollution Control Device Form			
Control device ID number: B-242	List all emission units associated with this control device. Vent gas from D-242 Incinerator		
Manufacturer:	Model number:	Installation date:	
Frontier Plastic Fabricators, Inc.	NA	1976	
Type of Air Pollution Control Device:			
Baghouse/Fabric Filter	Venturi Scrubber	Multiclone	
Carbon Bed AdsorberX	_ 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 devi	ce is intended to control and the ca	pture and control efficiencies.	
Pollutant	Capture Efficiency	Control Efficiency	
HCl	99.9%	99.9%	
Cl <sub>2</sub>	98.7%	98.7%	
CHCl <sub>3</sub>	99.58%	99.58%	
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).  • Pressure drop maximum 1.5 in. H <sub>2</sub> O. • Gas inflow temperature 50°F and pressure: 14.7 PSIA. • Liquor flow rate: 130 gpm and pressure: 14.7 PSIA.			
Is this device subject to the CAM requ	uirements of 40 C.F.R. 64? Ye	s <u>X</u> No	
If Yes, <b>Complete ATTACHMENT H</b> If No, <b>Provide justification.</b> Device en V Permit. Subject to 40CFR, Subpart M		eady established under existing Title	
Describe the parameters monitored an	nd/or methods used to indicate per	formance of this control device.	
time during each hour.	flow indicator was operating and what rations of all periods when the vent ting.	·	

ATTACHMENT G - Air Pollution Control Device Form			
Control device ID number: B-265	List all emission units associated with this control device. Storage Bins 4688 - 4699		
Manufacturer:	Model number:	Installation date:	
N/A	N/A	1962	
<b>Type of Air Pollution Control Device:</b>			
_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	1	Dry Plate Electrostatic Precipitator	
List the pollutants for which this device	ce is intended to control and the ca	pture and control efficiencies.	
Pollutant	Capture Efficiency	Control Efficiency	
Particulate Matter	99%	99%	
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).  • 140 ft² of cloth.			
Is this device subject to the CAM requirements of 40 C.F.R. 64? YesX_No  If Yes, Complete ATTACHMENT H  If No, Provide justification. Device emission limitations and standards already established under existing Title V Permit. Subject to 40CFR, Subpart MMM, PAI MACT.			
<ul> <li>Opacity must be &lt; 20 percent</li> <li>Monitor the pressure drop across</li> </ul>	_	formance of this control device.	

ATTACHMEN	VT G - Air Pollution Control	<b>Device Form</b>	
Control device ID number: C-242	List all emission units associated with this control device. Vent gas from MIC unit in emergency situations.		
Manufacturer:	Model number:	Installation date:	
Richmond Engineering Co.	NA	1976	
<b>Type of Air Pollution Control Device:</b>			
Baghouse/Fabric Filter	Venturi Scrubber	Multiclone	
Carbon Bed Adsorber X	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	1	Dry Plate Electrostatic Precipitator	
List the pollutants for which this device	ce is intended to control and the ca	pture and control efficiencies.	
Pollutant	Capture Efficiency	Control Efficiency	
None. This scrubber only functions as a collection device during a unit emergency that would require safety relief or destruction of liquid methyl isocyanate. As such, it is designed to act as a reactor and scrubber to destroy the gaseous or liquid MIC required to be fed to it.			
Explain the characteristic design para bags, size, temperatures, etc.).	meters of this control device (flow	rates, pressure drops, number of	
• Pressure drop maximum 6.3 in.	$H_2O$ .		
	ACFM at a pressure of 14.7 PSIA		
• Liquor flow rate to scrubber: 2,500 gpm			
Is this device subject to the CAM requ	irements of 40 C.F.R. 64? Ye	s <u>X</u> No	
If Yes, Complete ATTACHMENT H			
If No, <b>Provide justification.</b> Device en V Permit. Subject to 40CFR, Subpart M		eady established under existing Title	
Describe the parameters monitored ar	nd/or methods used to indicate per	formance of this control device.	
<ul> <li>Hourly records of whether the flow indicator was operating and whether diversion was detected at any time during each hour.</li> <li>Record and report times and durations of all periods when the vent stream is diverted through a bypass line or the monitor is not operating.</li> </ul>			

ATTACHMENT G - Air Pollution Control Device Form			
Control device ID number: C-471	List all emission units associated with this control device.		
Manufacturer: Alloy Fabricators Inc.	Model number: NA	Installation date: 1993	
<b>Type of Air Pollution Control Device:</b>			
Baghouse/Fabric Filter	Venturi Scrubber	Multiclone	
Carbon Bed Adsorber X	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	ce is intended to control and the ca	pture and control efficiencies.	
Pollutant	Capture Efficiency	Control Efficiency	
HCl	99.99%	99.99%	
Cl <sub>2</sub>	99.99%	99.99%	
Phosgene	99.99%	99.99%	
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).  • Pressure drop maximum 0.9 in. H <sub>2</sub> O.  • Gas inflow temperature 30°F and pressure: 18.7 PSIA.  • Liquor flow rate: 250 gpm and pressure: 19.7 PSIA.			
Is this device subject to the CAM requ	nirements of 40 C.F.R. 64? Ye	s <u>X</u> No	
If Yes, <b>Complete ATTACHMENT H</b> If No, <b>Provide justification.</b> Device er V Permit. Subject to 40CFR, Subpart M		eady established under existing Title	
Describe the parameters monitored an	nd/or methods used to indicate per	formance of this control device.	
<ul> <li>Hourly records of whether the flow indicator was operating and whether diversion was detected at any time during each hour.</li> <li>Record and report times and durations of all periods when the vent stream is diverted through a bypass line or the monitor is not operating.</li> </ul>			

ATTACHMENT G - Air Pollution Control Device Form				
Control device ID number: D-242	List all emission units associated Process Vents from SEVIN unit.	List all emission units associated with this control device. Process Vents from SEVIN unit.		
Manufacturer:	Model number:	Installation date:		
John Zink Co.	N/A	1989		
<b>Type of Air Pollution Control Device:</b>				
Baghouse/Fabric Filter	Venturi Scrubber I	Multiclone		
Carbon Bed Adsorber	Packed Tower Scrubber	Single Cyclone		
Carbon Drum(s)	Other Wet Scrubber	Cyclone Bank		
Catalytic Incinerator	Condenser	Settling Chamber		
_X_ Thermal Incinerator	Flare	Other (describe)		
Wet Plate Electrostatic Precipitator	1	Dry Plate Electrostatic Precipitator		
List the pollutants for which this device	List the pollutants for which this device is intended to control and the capture and control efficiencies.			
Pollutant	Capture Efficiency	Control Efficiency		
VOC's	99.58%	99.58%		
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).  • Temperature of feed: 104°F • Retention time of materials: 1.5 seconds • Operating temperature of combustion chamber: 1,800°F.				
Is this device subject to the CAM requirements of 40 C.F.R. 64? YesX_No  If Yes, Complete ATTACHMENT H  If No, Provide justification. Device emission limitations and standards already established under existing Title V Permit. Subject to 40CFR, Subpart MMM, PAI MACT.				
•	Describe the parameters monitored and/or methods used to indicate performance of this control device.			
<ul> <li>Continuous Records</li> <li>Record and report the firebox temperature over the full period of the performance test.</li> <li>Record the daily average firebox temperature for each operating day.</li> <li>Report all daily average temperatures that are outside the range established in the NCS or operating permit and all operating days when insufficient monitoring data are collected.</li> </ul>				

ATTACHMENT G - Air Pollution Control Device Form			
Control device ID number: E-242	List all emission units associated with this control device. Vent gas from D-242 Incinerator		
Manufacturer:	Model number:	Installation date:	
Frontier Plastic Fabricators, Inc.	NA	2001	
<b>Type of Air Pollution Control Device:</b>			
Baghouse/Fabric Filter	Venturi Scrubber	Multiclone	
Carbon Bed Adsorber X	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	ce is intended to control and the ca	pture and control efficiencies.	
Pollutant	Capture Efficiency	Control Efficiency	
HCl	99.9%	99.9%	
Cl <sub>2</sub>	98.7%	98.7%	
CHCl <sub>3</sub>	99.58%	99.58%	
Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).  • Pressure drop of 3 in. H <sub>2</sub> O • Gas flow rate into collector 1004 ACFM at 176°F and 14.2 PSIA • Liquor flow rate to scrubber; top: 34 gpm and bottom: 29 gpm • Liquor pressure to scrubber; top: 22.7 PSIA and bottom: 15.7 PSIA			
Is this device subject to the CAM required If Yes, Complete ATTACHMENT H  If No, Provide justification. Device er V Permit. Subject to 40CFR, Subpart M.	mission limitations and standards alro		
Describe the parameters monitored an	nd/or methods used to indicate per	formance of this control device.	
time during each hour.	flow indicator was operating and who durations of all periods when the vot operating.	•	

# Attachment H Compliance Assurance Monitoring

### **ATTACHMENT H - Compliance Assurance Monitoring (CAM) Plan Form**

For definitions and information about the CAM rule, please refer to 40 CFR Part 64. Additional information (including guidance documents) may also be found at  $\frac{\text{http://www.epa.gov/ttn/emc/cam.html}}{\text{http://www.epa.gov/ttn/emc/cam.html}}$ 

	CAM APPLICABILITY DETERMINATION
sep CF app	oes the facility have a PSEU (Pollutant-Specific Emissions Unit considered parately with respect to EACH regulated air pollutant) that is subject to CAM (40 R Part 64), which must be addressed in this CAM plan submittal? To determine olicability, a PSEU must meet all of the following criteria (If No, then the mainder of this form need not be completed):
a.	The PSEU is located at a major source that is required to obtain a Title V permit;
b.	The PSEU is subject to an emission limitation or standard for the applicable regulated air pollutant that is $\underline{\text{NOT}}$ exempt;
	LIST OF EXEMPT EMISSION LIMITATIONS OR STANDARDS:
	• NSPS (40 CFR Part 60) or NESHAP (40 CFR Parts 61 and 63) proposed after 11/15/1990.
	• Stratospheric Ozone Protection Requirements.
	Acid Rain Program Requirements.
	• Emission Limitations or Standards for which a WVDEP Division of Air Quality Title V permit specifies a continuous compliance determination method, as defined in 40 CFR §64.1.
	• An emission cap that meets the requirements specified in 40 CFR §70.4(b)(12).
c.	The PSEU uses an add-on control device (as defined in 40 CFR §64.1) to achieve compliance with an emission limitation or standard;
d.	The PSEU has potential pre-control device emissions of the applicable regulated air pollutant that are equal to or greater than the Title V Major Source Threshold Levels; AND
e.	The PSEU is NOT an exempt backup utility power emissions unit that is municipally-owned.
	BASIS OF CAM SUBMITTAL
	ark the appropriate box below as to why this CAM plan is being submitted as part of an application for a Title V mit:
	<u>RENEWAL APPLICATION</u> . <u>ALL</u> PSEUs for which a CAM plan has <u>NOT</u> yet been approved need to be addressed in this CAM plan submittal.
	<u>INITIAL APPLICATION</u> (submitted after 4/20/98). <u>ONLY</u> large PSEUs (i. e., PSEUs with potential post-control device emissions of an applicable regulated air pollutant that are equal to or greater than Major Source Threshold Levels) need to be addressed in this CAM plan submittal.
	SIGNIFICANT MODIFICATION TO LARGE PSEUs. ONLY large PSEUs being modified after 4/20/98 need to be addressed in this cam plan submittal. For large PSEUs with an approved CAM plan, Only address the appropriate monitoring requirements affected by the significant modification.

### 3) <sup>a</sup> BACKGROUND DATA AND INFORMATION

Complete the following table for <u>all</u> PSEUs that need to be addressed in this CAM plan submittal. This section is to be used to provide background data and information for each PSEU In order to supplement the submittal requirements specified in 40 CFR §64.4. If additional space is needed, attach and label accordingly.

PSEU DESIGNATION	40 CFR §64.4. If additional space is DESCRIPTION	POLLUTANT	CONTROL DEVICE	<sup>b</sup> EMISSION LIMITATION or STANDARD	° MONITORING REQUIREMENT
NA	NA	NA	NA	NA	NA
EXAMPLE Boiler No. 1	Wood-Fired Boiler	PM	Multiclone	45CSR§2-4.1.c.; 9.0 lb/hr	Monitor pressure drop across multiclone: Weekly inspection of multiclone

<sup>&</sup>lt;sup>a</sup> If a control device is common to more than one PSEU, one monitoring plan may be submitted for the control device with the affected PSEUs identified and any conditions that must be maintained or monitored in accordance with 40 CFR §64.3(a). If a single PSEU is controlled by more than one control device similar in design and operation, one monitoring plan for the applicable control devices may be submitted with the applicable control devices identified and any conditions that must be maintained or monitored in accordance with 40 CFR §64.3(a).

b Indicate the emission limitation or standard for any applicable requirement that constitutes an emission limitation, emission standard, or standard of performance (as defined in 40 CFR §64.1).

<sup>&</sup>lt;sup>c</sup> Indicate the monitoring requirements for the PSEU that are required by an applicable regulation or permit condition.

### CAM MONITORING APPROACH CRITERIA

Complete this section for <u>EACH</u> PSEU that needs to be addressed in this CAM plan submittal. This section may be copied as needed for each PSEU. This section is to be used to provide monitoring data and information for <u>EACH</u> indicator selected for <u>EACH</u> PSEU in order to meet the monitoring design criteria specified in 40 CFR §64.3 and §64.4. if more than two indicators are being selected for a PSEU or if additional space is needed, attach and label accordingly with the appropriate PSEU designation, pollutant, and indicator numbers.

4a) PSEU Designation:	4b) Pollutant:	4c) <sup>a</sup> Indicator No. 1:	4d) <sup>a</sup> Indicator No. 2:
5a) GENERAL CRITER  Describe the MONITO  used to measure the i	RING APPROACH		
<sup>b</sup> Establish the appropriate or the proceduthe indicator range wreasonable assurance	ares for establishing hich provides a		
5b) PERFORMANCE C Provide the SPECIFICA OBTAINING REPRESEN as detector location, s specifications, and m accuracy:	ATIONS FOR TATIVE DATA, such Installation		
<sup>c</sup> For new or modified equipment, provide <u>Verocedures</u> , includirecommendations, <u>Too Operational Status</u>	<u>'ERIFICATION</u> ng manufacturer's OCONFIRM THE		
Provide QUALITY ASSURANCE AND QUALITY CONTROL (QA/QC) PRACTICES that are adequate to ensure the continuing validity of the data, (i.e., daily calibrations, visual inspections, routine maintenance, RATA, etc.):			
<sup>d</sup> Provide the MONITORING FREQUENCY:			
Provide the <u>DATA CO</u> <u>PROCEDURES</u> that wil			
Provide the <u>DATA AV</u> the purpose of detern excursion or exceeda	nining whether an		

<sup>&</sup>lt;sup>a</sup> Describe all indicators to be monitored which satisfies 40 CFR §64.3(a). Indicators of emission control performance for the control device and associated capture system may include measured or predicted emissions (including visible emissions or opacity), process and control device operating parameters that affect control device (and capture system) efficiency or emission rates, or recorded findings of inspection and maintenance activities.

<sup>&</sup>lt;sup>b</sup> Indicator Ranges may be based on a single maximum or minimum value or at multiple levels that are relevant to distinctly different operating conditions, expressed as a function of process variables, expressed as maintaining the applicable indicator in a particular operational status or designated condition, or established as interdependent between more than one indicator. For CEMS, COMS, or PEMS, include the most recent certification test for the monitor.

<sup>&</sup>lt;sup>c</sup> The verification for operational status should include procedures for installation, calibration, and operation of the monitoring equipment, conducted in accordance with the manufacturer's recommendations, necessary to confirm the monitoring equipment is operational prior to the commencement of the required monitoring.

<sup>&</sup>lt;sup>d</sup> Emission units with post-control PTE ≥ 100 percent of the amount classifying the source as a major source (i.e., Large PSEU) must collect four or more values per hour to be averaged. A reduced data collection frequency may be approved in limited circumstances. Other emission units must collect data at least once per 24 hour period.

RATIONALE AND JUSTIFICATION						
Complete this section for <u>EACH</u> PSEU that needs to be addressed in this CAM plan submittal. This section may be copied as needed for each PSEU. This section is to be used to provide rationale and justification for the selection of <u>EACH</u> indicator and monitoring approach and <u>EACH</u> indicator range in order to meet the submittal requirements specified in 40 CFR §64.4.						
6a) PSEU Designation:	6b) Regulated Air Pollutant:					
indicators and the monitoring approach used to measure the indicator the reasons for any differences between the verification of ope	PROACH: Provide the rationale and justification for the selection of the cators. Also provide any data supporting the rationale and justification. Explain trational status or the quality assurance and control practices proposed, and the ded, attach and label accordingly with the appropriate PSEU designation and					
8) INDICATOR RANGES: Provide the rationale and justification for the selection of the indicator ranges. The rationale and justification shall indicate how EACH indicator range was selected by either a COMPLIANCE OR PERFORMANCE TEST. a TEST PLAN AND SCHEDULE, or by PRIGNEERING ASSESSMENTS. Depending on which method is being used for each indicator range, include the specific indicator range. (If additional space is needed, attach and label accordingly with the appropriate PSEU designation and pollutant):  - COMPLIANCE OR PERFORMANCE TEST (Indicator ranges determined from control device operating parameter data obtained during a compliance or performance test conducted under regulatory specified conditions or under conditions representative of maximum potential emissions under anticipated operating conditions. Such data may be supplemented by engineering assessments and manufacturer's recommendations). The rationale and justification shall INCLUDE a summary of the compliance or performance test results that were used to determine the indicator range, and documentation indicating that no changes have taken place that could result in a significant change in the control system performance or the selected indicator ranges since the compliance or performance test was conducted.  - TEST PLAN AND SCHEDULE (Indicator ranges will be determined from a proposed implementation plan and schedule for installing, testing, and performing any other appropriate activities prior to use of the monitoring.) The rationale and justification shall INCLUDE the proposed implementation plan and schedule that will provide for use of the monitoring. The rationale and justification shall INCLUDE to the type of monitoring, control device, or PSEU make completing installation and beginning operation of the monitoring exceed 180 days after approval.  - ENGINEERING ASSESSMENTS (Indicator Ranges or the procedures for establishing indicator ranges are determined from engineering assessments and other data, such as manufacturers' design criteria an						