



**DIVISION OF ENVIRONMENTAL PROTECTION**

CECIL H. UNDERWOOD  
GOVERNOR

1558 Washington Street East  
Charleston, WV 25311-2599

JOHN E. CAFFREY  
DIRECTOR

**OFFICE OF AIR QUALITY**

**APPLICATION FOR AN EMERGENCY PERMIT  
TO CONSTRUCT AND OPERATE A HAZARDOUS WASTE  
TREATMENT, STORAGE, AND DISPOSAL FACILITY**

Pursuant to the Hazardous Waste Management Act (W.VA. Code §§22-18-1 et seq.), the West Virginia Air Pollution Control Law (W.VA. Code §§22-5-1 et seq.) and 45CSR25.

**SECTION I. GENERAL**

A. Name of Person, corporation or partnership applying for permit:

\_\_\_\_\_

If subsidiary corporation, name of parent corporation:

\_\_\_\_\_

EPA Handler ID number: \_\_\_\_\_

Is the applicant a domestic corporation; i.e., created by or organized under the laws of the State of West Virginia, and in "good standing" with the Secretary of State's Office of West Virginia?  Yes  No

If a foreign entity, is the applicant authorized to do business in the State of West Virginia?  Yes  No

If you answer no to both questions, STOP, your application will be considered incomplete.

Is the applicant of the proposed facility the:

Owner,  Operator, or  Both

B. Plant Address<sup>1</sup>

Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Individual to contact regarding this application:

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Relationship to Permittee (i.e. employed by, contracted by, etc.) \_\_\_\_\_

D. Type of treatment, storage, and or disposal (TSD) unit to be constructed and/or operated under this permit:

\_\_\_\_\_

E. Give present or proposed location of TSD unit(s):

Nearest Post Office: \_\_\_\_\_ County: \_\_\_\_\_

Magisterial District: \_\_\_\_\_

UTM Coordinates of proposed plant or facility<sup>2</sup>

Easting: \_\_\_\_\_ Northing: \_\_\_\_\_

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<sup>1</sup> Application will be considered incomplete and returned to applicant if West Virginia plant address is not supplied.

<sup>2</sup> Please note UTM's are requested as easting and northing values relative to Zone 17, **NOT** latitude and longitude. UTM coordinates can be obtained from US Geological Survey topographical maps.

F. Directions to facility from the nearest state road: \_\_\_\_\_  
\_\_\_\_\_

G. Applicant's relationship to the site of proposed project:  
 Own       Lease       Option to buy     

Other: \_\_\_\_\_

Lessor name and address: \_\_\_\_\_  
\_\_\_\_\_

H. (a) Date upon which construction is planned to commence: \_\_\_\_\_

(b) Date upon which construction/operation did commence: \_\_\_\_\_

I. Projected startup date if a permit for construction/operation permit is granted.  
\_\_\_\_\_

## **SECTION II. EMERGENCY TSD PROTOCOL**

Submit a Work Plan or Corrective Action Protocol that contains the following:

- I. Site History
  - a. explain necessity of clean-up or emergency TSD action
  - b. describe level of contamination
  - c. provide any feasibility studies conducted to justify the chosen TSD equipment
  
- located. II. Site Description- include a scaled map(s) and/or sketch(es) showing :
  - a. the location of the property on which the TSD unit(s) is or is to be
  - b. the locations of adjacent property streets, residential areas, and facility fence line
  - c. identify commercial, and institutional buildings
  - d. identify any significant topographic features (rivers, mountains, etc.)
  
- III. Site Remediation Goals
  - a. include clean-up level goals

- b. expected length of project
- IV. Types of Raw Materials used
- a. amount and type of fuel used (if applicable)
  - b. chemical analysis including BTU content, ash %, Cl and Sulfur and/ or any other constituent that may contribute to air pollutant emissions
- V. Hazardous wastes to be treated, stored or disposed of
- a. hazardous waste codes and/or chemical analysis of wastes to be TSD.
  - b. waste sampling procedures and frequency
  - c. waste blending procedures (if applicable)
  - d. amounts to be treated
  - e. Toxicological information or Material Safety Data Sheets
- VI. Process diagram or drawing
- a. identify each source, air pollution control device and emission points.
  - b. sizing and design specifications of equipment should be shown as appropriate
- VII. TSD unit(s) Process Information
- a. Storage
    - 1. storage capacity and type
    - 2. number of units
    - 3. structural integrity and compatibility with waste to be stored in it
    - 4. containment area and construction
    - 5. transfer equipment and/or handling procedures
  - b. Treatment
    - 1. Maximum and normal operating conditions
    - 2. operating parameters to be monitored and/or recorded
    - 3. monitoring equipment (CEM's, flow meters, thermocouples, etc.)
    - 4. loading or firing procedures (if applicable)
    - 5. Automatic Waste Feed Cut-off parameters (if applicable)
  - c. Disposal
    - 1. chemical analysis on waste to be disposed
    - 2. manifest information (where will it be disposed of, EPA ID #, etc)
    - 3. type of disposal facility
- VIII. Air Pollution Control Equipment
- a. type of air pollution control equipment
  - b. design parameters
  - c. expected maximum and normal operating conditions
  - d. operating parameters to be monitored and/ or recorded
  - e. expected removal efficiency of the criteria pollutants and any other relevant air pollutant at normal and max operating conditions
- IX. Inspection and Reports (as applicable)
- a. daily inspection logs
  - b. daily operation logs
  - c. calibration reports

- d. leak inspection and repair reports
  - e. updates to OAQ
- X. Emission Estimates
- a. of the six criteria pollutants (SO<sub>x</sub>, NO<sub>x</sub>, CO, Ozone, Lead, and PM<sub>10</sub>)
  - b. any other air pollutant that may result due to the TSD of hazardous waste or raw materials
  - c. method of calculation used and examples (i.e. engineering calculations, hours of operation- max and normal, stack test data, material balances, etc.)
- XI. Accidental and Spill Procedures
- XII. Personnel Training
- XIII. Additional Environmental Permits
- a. permit type and number
  - b. brief description

**SECTION III. FUGITIVE PARTICULATE MATTER SOURCES**

If not otherwise provided in the work plan, describe here in detail all potential sources of fugitive particulate generation (e.g., stockpiles, roadways to and from the job site, haulways inside plant, truck loading sites, conveying transfer points, etc.). Also describe methods of and equipment for dust control which will be utilized for each potential source of fugitive particulate matter for each.

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**SECTION IV. CERTIFICATION OF INFORMATION**

- (a) This form shall be signed by a "Responsible Official." The "Responsible Official" is the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit and either (i) the facilities employ more than 250 persons or have a gross annual sales or expenditures exceeding \$25 million (in second quarter 1980 dollars), or (ii) the delegation of authority to such representative is approved in advance by the Chief.

I, the undersigned, hereby certify that all information contained in this application, and any supporting documents appended hereto, is true and correct to the best of my knowledge and that all reasonable efforts have been made to provide the most comprehensive information possible.

Name (Type or Print): \_\_\_\_\_

Signature (a): \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

Enclosures: \_\_\_\_\_