Verso Corporation
Luke Mill
300 Pratt Street
Luke, MD 21540

T 301 359 3311
W versoco.com

ES-17-107

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

August 9, 2017

Mr. William F. Durham, Director
WV Department of Environmental Protection
Division of Air Quality
601 57th Street SE
Charleston, WV 25304

Dear Mr. Durham:

Enclosed is the Verso Luke LLC Title V Permit Renewal Application. The application has been completed using the forms taken from the WV DEP website. Included with this submittal is one hard copy of the application including the area map, plot plan, process flow diagrams, and signature form. Two USB flash drives of the application are also included.

The application includes five operating scenarios for the Lime Kiln unit. The first is for burning natural gas. The second is for the unit burning No 2 fuel oil. The third is for burning No.6 fuel oil. The fourth is for burning No.4 fuel oil. The fifth is for the unit burning Petcoke. Emission values for the No. 2 / No. 6 fuel oil scenario are based on burning No. 6 fuel oil. No 6 values are included since we feel this oil represents the highest potential to emit values of all the oil types.

The chipper (No. 018) and screen house (No. 023) are both subject to CAM. They both currently have compliance determination methods in the existing Title V permit, which require daily visible emission checks.

We are requesting an application shield for this application. If you have any questions or require further information, please contact Ron Paugh or me at (301) 359-3311, Extension 3262 or 3446, respectively.

Sincerely,

J. Thomas Martin
Sr. Environmental Engineer

JTM:plt
Enclosures

WEST VIRGINIA
TITLE V
PERMIT TO OPERATE
RENEWAL APPLICATION

VERSO LUKE LLC
LUKE MILL FACILITY
WEST VIRGINIA OPERATIONS

R30-05700008-2013

AUGUST 2017

Verso Luke LLC

West Virginia Title V Permit Renewal Application

Table of Contents

TITLE V PERMIT APPLICATION CHECKLIST
FOR ADMINISTRATIVE COMPLETENESS

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

☒	Two signed copies of the application (at least one must contain the original "*Certification*" 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 SECTION 1, Facility Information
☒	Description of process and products, including NAICS and SIC codes, and including alternative operating scenarios SECTION 1, Process Products
☒	Area map showing plant location ATTACHMENT A
☒	Plot plan showing buildings and process areas ATTACHMENT B
☒	Process flow diagram(s), showing all emission units, control equipment, emission points, and their relationships ATTACHMENT C
☒	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 SECTION 2, Applicable Requirements
☒	Listing of all active permits and consent orders (if applicable) SECTION 2, Active Permits & Inactive Permits
☒	Facility-wide emissions summary SECTION 3, Facility-Wide Emissions
☒	Identification of Insignificant Activities SECTION 4, 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 **SECTION 6**, Certification
☐	Confidential Information submitted in accordance with 45CSR31

WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF AIR QUALITY
601 57th Street SE
Charleston, WV 25304
Phone: (304) 926-0475
www.dep.wv.gov/daq

INITIAL/RENEWAL TITLE V PERMIT APPLICATION - GENERAL FORMS

Section 1: General Information

1. **Name of Applicant (As registered with the WV Secretary of State's Office):** Verso Luke LLC	**2. Facility Name or Location:** Verso Luke LLC West Virginia Operations
3. DAQ Plant ID No.: R 3 0 — 0 5 7 0 0 0 0 8	**4. Federal Employer ID No. (FEIN):** 1 1 - 3 6 6 2 6 5

5. **Permit Application Type:**

☐ Initial Permit — When did operations commence? 01/01/1966
☒ Permit Renewal — What is the expiration date of the existing permit? 02/12/2018
☐ Update to Initial/Renewal Permit Application

6. Type of Business Entity: ☒ Corporation ☐ Governmental Agency ☐ LLC ☐ Partnership ☐ Limited Partnership	**7. Is the Applicant the:** ☐ Owner ☐ Operator ☒ Both If the Applicant is not both the owner and operator, please provide the name and address of the other party. _____ _____ _____
8. Number of onsite employees:	

9. Governmental Code:

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

10. Business Confidentiality Claims

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

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

11. Mailing Address		
Street or P.O. Box: 300 Pratt Street		
City: Luke	**State:** MD	**Zip: 21540-**
Telephone Number: (301) 359-3311	**Fax Number:** (301) 359-2040	

12. Facility Location		
Street: Old Beryl road	**City:** Beryl	**County:** Mineral
UTM Easting: 667.00 km	**UTM Northing:** 4,371.00 km	**Zone:** ☒ 17 or ☐ 18
Directions: From U.S. Interstate 68, at Frostburg, MD tale MD Route 36 south to Westernport, MD. Turn right onto MD Route 135 at Westernport and Travel approximately 1.7 miles. Turn left onto the Potomac River Bridge, this becomes WV route 46. Travel Approximately 150 yards and facility is on left side of State Route 46.		
Portable Source? ☐ Yes ☒ No		
Is facility located within a nonattainment area? ☐ Yes ☒ No		**If yes, for what air pollutants?**
Is facility located within 50 miles of another state? ☒ Yes ☐ No		**If yes, name the affected state(s).** Maryland Pennsylvania
Is facility located within 100 km of a Class I Area[1]? ☒ Yes ☐ No **If no, do emissions impact a Class I Area[1]?** ☐ Yes ☐ No		**If yes, name the area(s).** Dolly Sods Otter Creek Wilderness Area

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

13. Contact Information		
Responsible Official: Todd Downey		**Title:** Interim Mill Manager
Street or P.O. Box: 300 Pratt Street		
City: Luke	**State:** MD	**Zip: 21540-**
Telephone Number: (301) 359-3311	**Fax Number:** (301) 359-2040	
E-mail address: todd.downey@versoco.com		
Environmental Contact: Ronald E. Paugh		**Title:** Environmental Manager
Street or P.O. Box: 300 Pratt Street		
City: Luke	**State:** MD	**Zip: 21540-**
Telephone Number: (301) 359-3311	**Fax Number:** (301) 359-2040	
E-mail address: Ronald.paugh@versoco.com		
Application Preparer: J. Thomas Martin		**Title:** Sr. Environmental Engineer
Company: Verso Luke LLC		
Street or P.O. Box: 300 Pratt Street		
City: Luke	**State:** MD	**Zip: 21540-**
Telephone Number: (301) 359-3311	**Fax Number:** (301) 359-2040	
E-mail address: tom.martin@versoco.com		

14. Facility Description

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

Process	Products	NAICS	SIC
Pulp and Paper Manufacturing	Paper-allied Products	322121	2621
Lime Kiln	Lime and Gypsum Products Manufacturing	327410	3274

Provide a general description of operations.

Supporting Operations for Pulp and Paper Mill.

Woodyard Operations and Lime Kiln.

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

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

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

Section 2: Applicable Requirements

18. Applicable Requirements Summary	
Instructions: Mark all applicable requirements.	
☒ SIP	☐ FIP
☒ Minor source NSR (45CSR13)	☐ PSD (45CSR14)
☒ NESHAP (45CSR34)	☐ Nonattainment NSR (45CSR19)
☐ Section 111 NSPS	☒ Section 112(d) MACT standards
☐ Section 112(g) Case-by-case MACT	☐ 112(r) RMP
☐ Section 112(i) Early reduction of HAP	☐ Consumer/commercial prod. reqts., section 183(e)
☐ Section 129 Standards/Reqts.	☒ Stratospheric ozone (Title VI)
☐ Tank vessel reqt., section 183(f)	☐ Emissions cap 45CSR§30-2.6.1
☐ NAAQS, increments or visibility (temp. sources)	☐ 45CSR27 State enforceable only rule
☒ 45CSR4 State enforceable only rule	☐ Acid Rain (Title IV, 45CSR33)
☐ Emissions Trading and Banking (45CSR28)	☒ **C**ompliance **A**ssurance **M**onitoring (40CFR64)
☐ CAIR NO_x Annual Trading Program (45CSR39)	☐ CAIR NO_x Ozone Season Trading Program (45CSR40)
☐ CAIR SO_2 Trading Program (45CSR41)	

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.

a. 40 CFR 60 Subpart BB – *Standards of Performance for Kraft Pulp Mills:* The Lime Kiln was installed in 1966. It has not been modified since. Since it was not constructed or modified after September 24, 1976, it is not subject to the requirements of this subpart 60.280 (b).

b. 45 CSR 27 – *To Prevent and control the Emissions of Toxic Air Pollutants:* The total amounts of toxic air pollutants estimated to be emitted from the West Virginia operations are as follows: benzene – 626 lb/yr (threshold 1,000 lb/yr); Chloroform – 888 lb/yr (threshold 1,000 lb/yr); formaldehyde – 608 lb/yr (threshold 1,000 lb/yr); Methylene Chloride – 32 lb/yr (threshold 5,000 lb/yr). Since the estimated emission rates of all toxic air pollutants are below the respective emission thresholds, the regulations in 45 CSR 27 are not applicaqble.

☒ 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*).

Emission Point ID	Applicable Requirement	Permit Condition Number	Pollutant/ Parameter	Limit/ Standard	Compliance Method	Demonstratio Condition Number
Facility-Wide	C.S.R. § 45-6-3.1	3.1.1	Refuse	Open Burning Prohibited	N/A	N/A
Facility-Wide	C.S.R. § 45-6-3.2.a	3.1.2	N/A	Open Burning Prohibited	N/A	N/A
Facility Wide	40 C.F.R. §§ 61.145, 61.148, and 61.150	3.1.3	Asbestos	N/A	N/A	N/A
Facility-Wide	C.S.R. § 45-30-4.3.h.1.B	3.5.9	Any Newly Applicable Requirement	Notify and Submit Compliance Schedule	N/A	N/A
Facility-Wide	WV Code § 22-5-(a)(15)	3.3.1	Testing	Conduct as required	N/A	3.3.1
Facility-Wide	C.S.R. § 45-7-5.1.	4.1.8	PM	Minimize Fugitive Emissions	Recordkeeping	4.2.2
Facility-Wide	C.S.R. § 45-7-5.2	4.1.9	PM	Dust Control	Recordkeeping	4.2.1
Facility-Wide	C.S.R § 45-4-3.1	3.1.4	Any Air Pollutant	Objectionable Odor Prohibited	Recordkeeping	3.4.3
Facility-Wide	C.S.R. § 45-11-5.2	3.1.5	Any Regulated Air Pollutant	Submit Standby Plan if Requested	N/A	N/A
Facility-Wide	C.S.R. § 45-7-3.1	4.2.2	PM, Smoke	20% Opacity	Visual Inspection and Recordkeeping	4.2.2.a,b.
Facility-Wide	C.S.R. § 40 Part 82 subpart F	3.1.7	Ozone-depleting Substances	Comply with standards	Recordkeeping	3.1.7a.,b.,c
Facility-Wide	WV Code § 22-5-4(a)(14)	3.1.6	Criteria Air Pollutants	Submit Annual Emission Inventory	Reporting	3.1.6

☒ Permit Shield

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

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

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

21. Active Permits/Consent Orders		
Permit or Consent Order Number	Date of Issuance MM/DD/YYYY	List any Permit Determinations that Affect the Permit *(if any)*
R13-511A	09/03/2008	
R30-05700008-2007	08/27/2007	
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22. Inactive Permits/Obsolete Permit Conditions		
Permit Number	Date of Issuance	Permit Condition Number
429	08/07/1978	
R13-752	02/19/1998	
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Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(Gas Fired)**	
Criteria Pollutants	Potential Emissions
Carbon Monoxide (CO)	47.12
Nitrogen Oxides (NO_X)	120.59
Lead (Pb)	0.02
Particulate Matter ($PM_{2.5}$)[1]	718.75
Particulate Matter (PM_{10})[1]	718.75
Total Particulate Matter (TSP)	949.29
Sulfur Dioxide (SO_2)	0.484
Volatile Organic Compounds (VOC)	38.76
Hazardous Air Pollutants[2]	Potential Emissions
Acetaldehyde	4.669
Acrolein	0.08
Arsenic	0.0002
Benzene	0.075
Carbon Disulfide	0.028
Chloroform	0.0186
Chloromethane	0.12
Chromium	0.054
Cumene	0.00004
Formaldehyde	0.56

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(Gas Fired)**	
Hazardous Air Pollutants[2]	Potential Emissions
Hexane	0.02
Mercury Compounds	0.026
Methanol	36.2
Methylene Chloride	0.4
Methyl Isobutyl Ketone	0.058
Naphthalene	0.033
Nickle Compounds	0.006
Phenol	0.787
Polycyclic Aromatics	0.003
Propionaldehyde	0.414
Styrene	0.023
Tetrachloroethylene	0.107
Toluene	0.129
1,2,4 - Trichlorobenzene	0.059
1,1,1 - Trichloroethane	0.182
Trichloroethylene	0.012
Xylene	0.064
Zinc Compounds	0.0074

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(Gas Fired)**	
Regulated Pollutants other than Criteria and HAP	Potential Emissions
Ammonia	51.88
Barium	0.03
Benzo(g,h,i)perylene	0.0011
Copper	0.0047
Manganese	0.028
Sulfuric Acid	0.000048
Vanadium Compounds	0.00014

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(#2/#6 Oil Fired)**	
Criteria Pollutants	Potential Emissions
Carbon Monoxide (CO)	38.55
Nitrogen Oxides (NO_X)	84.47
Lead (Pb)	0.02
Particulate Matter ($PM_{2.5}$)[1]	718.75
Particulate Matter (PM_{10})[1]	718.75
Total Particulate Matter (TSP)	949.29
Sulfur Dioxide (SO_2)	0.256
Volatile Organic Compounds (VOC)	38.76
Hazardous Air Pollutants[2]	Potential Emissions
Acetaldehyde	4.669
Acrolein	0.08
Arsenic	0.0002
Benzene	0.075
Carbon Disulfide	0.028
Chloroform	0.0186
Chloromethane	0.12
Chromium	0.054
Cumene	0.00004
Formaldehyde	0.56

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year]	**(#2/#6 Oil Fired)**
Hazardous Air Pollutants[2]	Potential Emissions
Hexane	0.02
Mercury Compounds	0.026
Methanol	36.2
Methylene Chloride	0.4
Methyl Isobutyl Ketone	0.058
Naphthalene	0.033
Nickle Compounds	0.006
Phenol	0.787
Polycyclic Aromatics	0.003
Propionaldehyde	0.414
Styrene	0.023
Tetrachloroethylene	0.107
Toluene	0.129
1,2,4 - Trichlorobenzene	0.059
1,1,1 - Trichloroethane	0.182
Trichloroethylene	0.012
Xylene	0.064
Zinc Compounds	0.0074

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year]	**(#2/#6 Oil Fired)**
Regulated Pollutants other than Criteria and HAP	Potential Emissions
Ammonia	51.88
Barium	0.03
Benzo(g,h,i)perylene	0.0011
Copper	0.0047
Manganese	0.028
Sulfuric Acid	1.487
Vanadium Compounds	0.00014

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(#4 Recycle Oil Fired)**	
Criteria Pollutants	Potential Emissions
Carbon Monoxide (CO)	35.88
Nitrogen Oxides (NO_X)	84.46
Lead (Pb)	0.02
Particulate Matter ($PM_{2.5}$)[1]	718.75
Particulate Matter (PM_{10})[1]	718.75
Total Particulate Matter (TSP)	949.29
Sulfur Dioxide (SO_2)	0.484
Volatile Organic Compounds (VOC)	20.88
Hazardous Air Pollutants[2]	Potential Emissions
Acetaldehyde	2.51
Acrolein	0.11
Arsenic	0.0002
Benzene	0.31
Carbon Disulfide	0.0378
Chloroform	0.079
Chloromethane	0.12
Chromium	0.054
Cumene	0.0187
Formaldehyde	0.3953

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(#4 Recycle Oil Fired)**	
Hazardous Air Pollutants[2]	Potential Emissions
Hexane	0.02
Mercury Compounds	0.0261
Methanol	36.2
Methylene Chloride	0.4671
Methyl Isobutyl Ketone	0.0474
Naphthalene	0.0568
Nickle Compounds	0.006
Phenol	1.46
Polycyclic Aromatics	0.003
Propionaldehyde	0.891
Styrene	0.032
Tetrachloroethylene	0.132
Toluene	0.099
1,2,4 - Trichlorobenzene	0.11
1,1,1 - Trichloroethane	0.23
Trichloroethylene	0.052
Xylene	0.072
Zinc Compounds	0.0074

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(#4 Recycle Oil Fired)**	
Regulated Pollutants other than Criteria and HAP	Potential Emissions
Ammonia	51.88
Barium	0.03
Benzo(g,h,i)perylene	0.0011
Copper	0.0047
Manganese	0.028
Sulfuric Acid	1.487
Vanadium Compounds	0.00014

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(Petcoke Fired)**	
Criteria Pollutants	Potential Emissions
Carbon Monoxide (CO)	52.78
Nitrogen Oxides (NO_X)	156.49
Lead (Pb)	0.0093
Particulate Matter ($PM_{2.5}$)[1]	718.75
Particulate Matter (PM_{10})[1]	718.75
Total Particulate Matter (TSP)	949.29
Sulfur Dioxide (SO_2)	7.067
Volatile Organic Compounds (VOC)	3.26
Hazardous Air Pollutants[2]	Potential Emissions
Acetaldehyde	4.162
Acrolein	0.039
Arsenic	0.0001
Benzene	0.0033
Carbon Disulfide	0.0261
Chloroform	0.563
Chloromethane	0.12
Chromium	0.028
Cumene	1.2E-05
Formaldehyde	0.335

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(Petcoke Fired)**	
Hazardous Air Pollutants[2]	Potential Emissions
Hexane	0.16
Mercury Compounds	0.002
Methanol	34.83
Methylene Chloride	0.39
Methyl Isobutyl Ketone	0.054
Naphthalene	0.0326
Nickle Compounds	5.69
Phenol	0.166
Polycyclic Aromatics	0.003
Propionaldehyde	0.8912
Styrene	0.0227
Tetrachloroethylene	0.0458
Toluene	0.094
1,2,4 - Trichlorobenzene	0.0592
Trichloroethylene	0.052
Xylene	0.0278
Zinc Compounds	2.1E-05

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

Section 3: Facility-Wide Emissions

23. Facility-Wide Emissions Summary [Tons per Year] **(Petcoke Fired)**	
Regulated Pollutants other than Criteria and HAP	Potential Emissions
Ammonia	51.88
Barium	0.03
Benzo(g,h,i)perylene	3.72E-04
Copper	0.124
Manganese	0.00001
Sulfuric Acid	1.487
Vanadium Compounds	23.35

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

Section 4: Insignificant Activities

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

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

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

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

25. Equipment Table
Fill out the **Title V Equipment Table** and provide it as **ATTACHMENT D**.
26. Emission Units
For each emission unit listed in the **Title V Equipment Table**, fill out and provide an **Emission Unit Form** as **ATTACHMENT E**.
For each emission unit not in compliance with an applicable requirement, fill out a **Schedule of Compliance Form** as **ATTACHMENT F**.
27. Control Devices
For each control device listed in the **Title V Equipment Table**, fill out and provide an **Air Pollution Control Device Form** as **ATTACHMENT G**.
For any control device that is required on an emission unit in order to meet a standard or limitation for which the potential pre-control device emissions of an applicable regulated air pollutant is greater than or equal to the Title V Major Source Threshold Level, refer to the **Compliance Assurance Monitoring (CAM) Form(s)** for CAM applicability. Fill out and provide these forms, if applicable, for each Pollutant Specific Emission Unit (PSEU) as **ATTACHMENT H**.

Section 6: Certification of Information

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

*Note: This Certification must be signed by a responsible official. The **original**, signed in **blue ink**, must be 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)

Name: Todd Downey	Title: Interim Mill Manager

Responsible official's signature:

Signature: Todd Downey (Must be signed and dated in blue ink) Signature Date: 8/10/17

Note: Please check all applicable attachments included with this permit application:	
☒	ATTACHMENT A: Area Map
☒	ATTACHMENT B: Plot Plan(s)
☒	ATTACHMENT C: Process Flow Diagram(s)
☒	ATTACHMENT D: Equipment Table
☒	ATTACHMENT E: Emission Unit Form(s)
☐	ATTACHMENT F: Schedule of Compliance Form(s)
☒	ATTACHMENT G: Air Pollution Control Device Form(s)
☒	ATTACHMENT H: Compliance Assurance Monitoring (CAM) Form(s)

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

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WEST VIRGINIA
STATE TAX DEPARTMENT

BUSINESS REGISTRATION CERTIFICATE

ISSUED TO:
VERSO LUKE LLC
1 JONES ST
PIEDMONT, WV 26750-1009

BUSINESS REGISTRATION ACCOUNT NUMBER: **2337-2006**

This certificate is issued on: 03/10/2017

This certificate is issued by
the West Virginia State Tax Commissioner
in accordance with Chapter 11, Article 12, of the West Virginia Code

The person or organization identified on this certificate is registered to conduct business in the State of West Virginia at the location above.

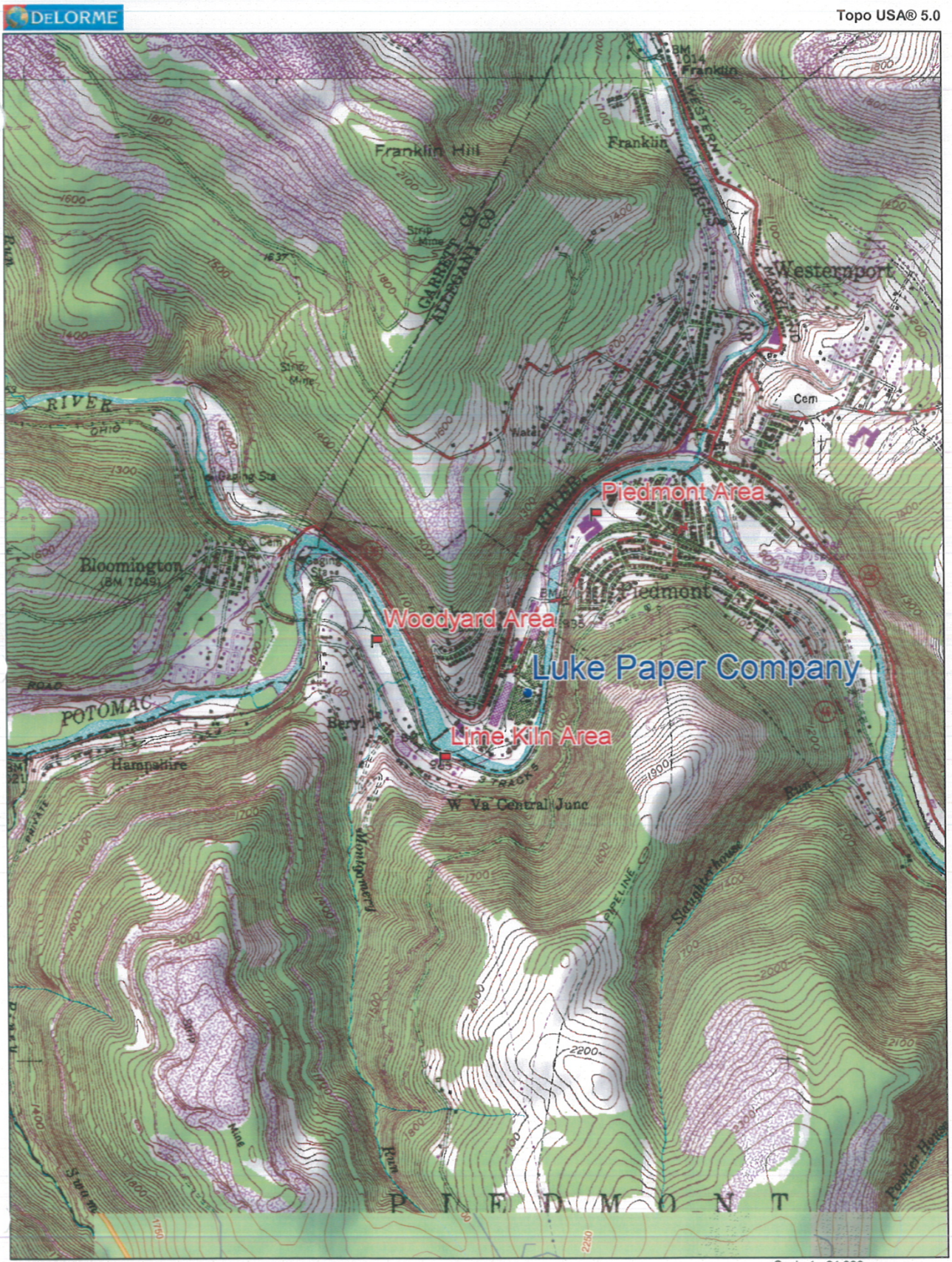
This certificate is not transferrable and must be displayed at the location for which issued

This certificate shall be permanent until cessation of the business for which the certificate of registration was granted or until it is suspended, revoked or cancelled by the Tax Commissioner.

Change in name or change of location shall be considered a cessation of the business and a new certificate shall be required.

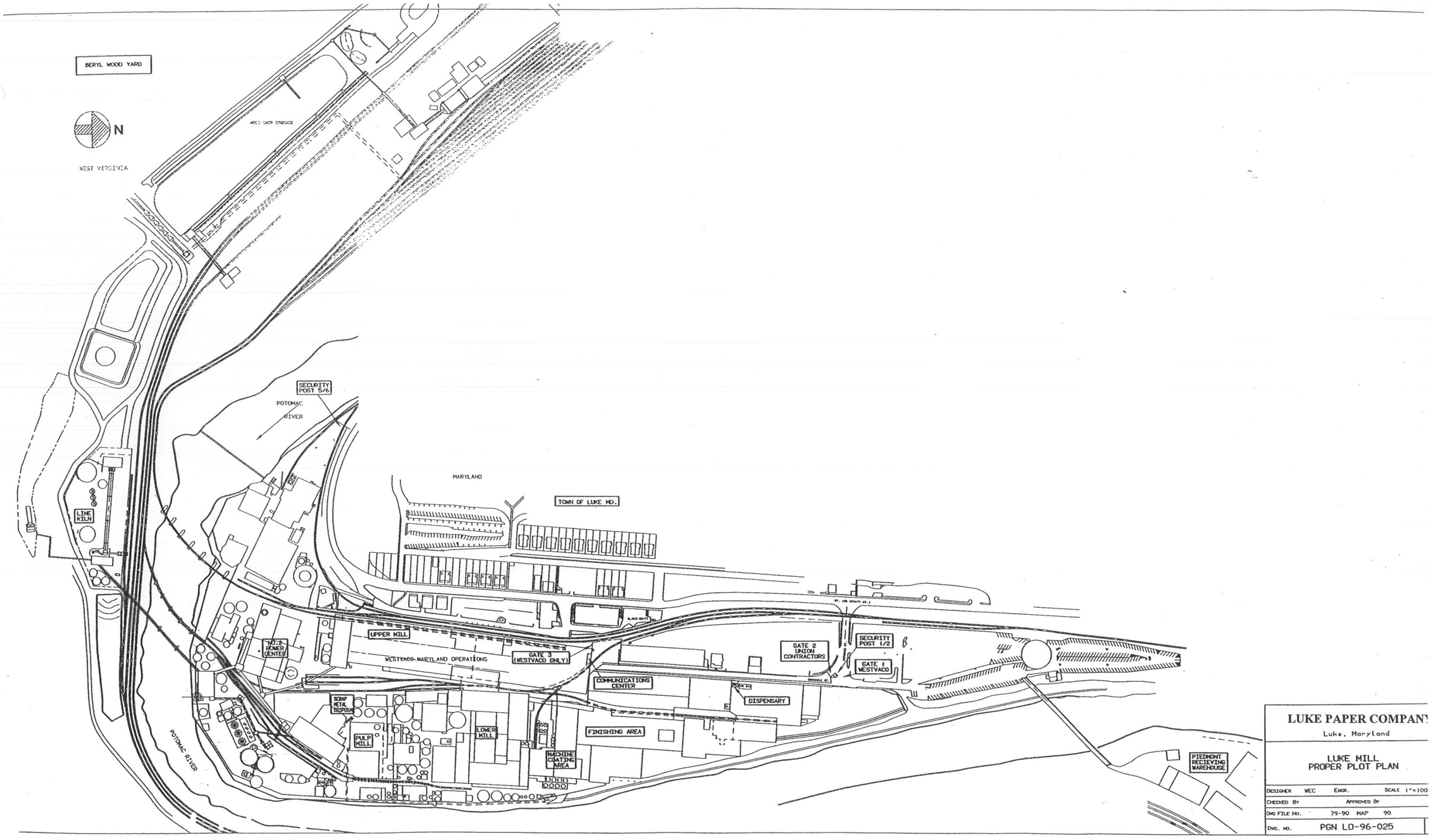
TRAVELING/STREET VENDORS: Must carry a copy of this certificate in every vehicle operated by them. CONTRACTORS, DRILLING OPERATORS, TIMBER/LOGGING OPERATIONS: Must have a copy of this certificate displayed at every job site within West Virginia.

atL006 v.4
L1934210240

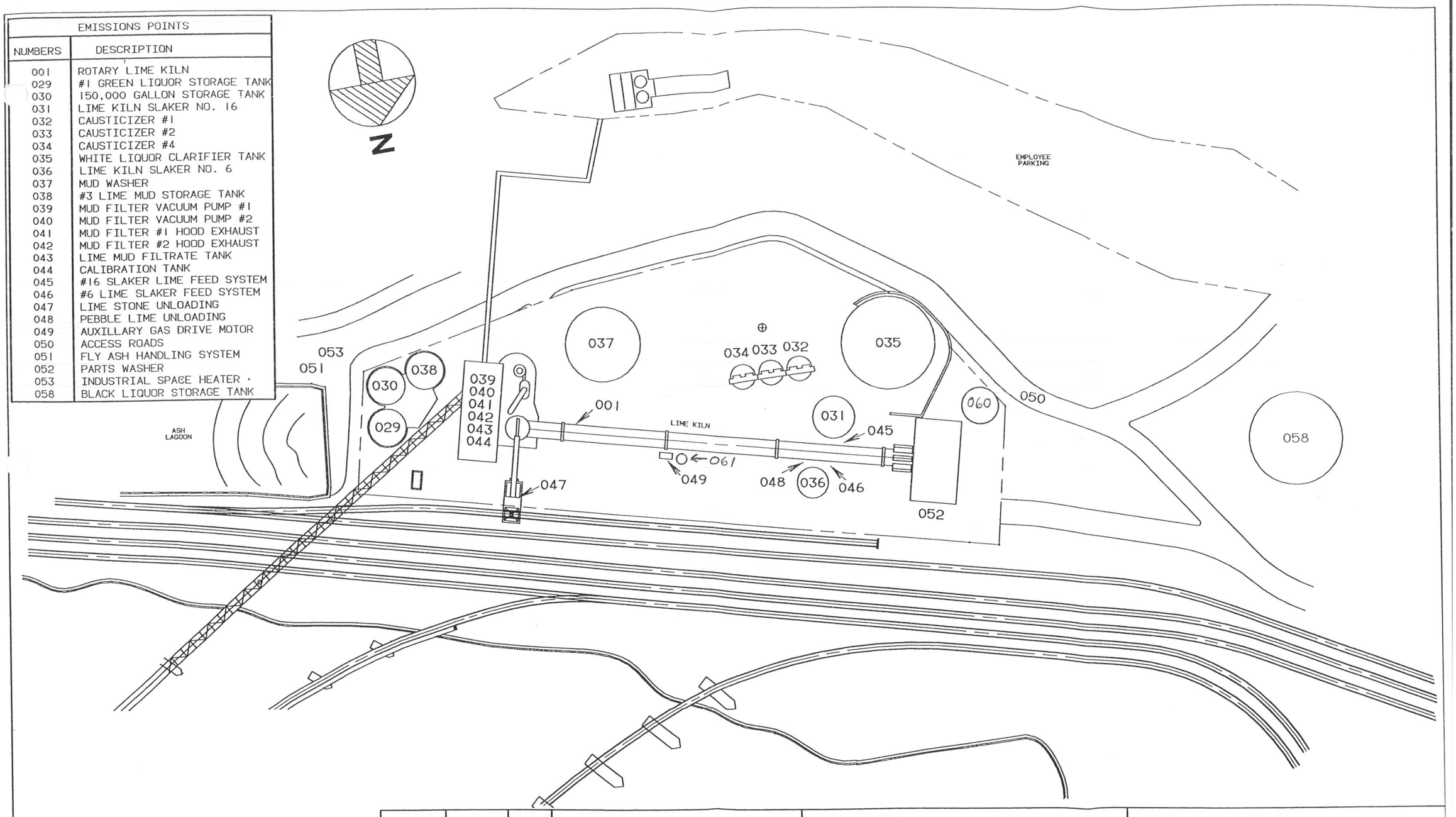

DeLORME
Topo USA® 5.0
Piedmont Area
Woodyard Area
Luke Paper Company
Lime Kiln Area
Franklin Hill
Westernport
Bloomington
Piedmont
POTOMAC
RIVER
Hampshire
W Va Central Junc
Data use subject to license.
© 2004 DeLorme. Topo USA® 5.0.
www.delorme.com
TN
MN (0.0°E)
Scale 1 : 24,000
1" = 2,000.0 ft
Data Zoom 13-1

Google Earth

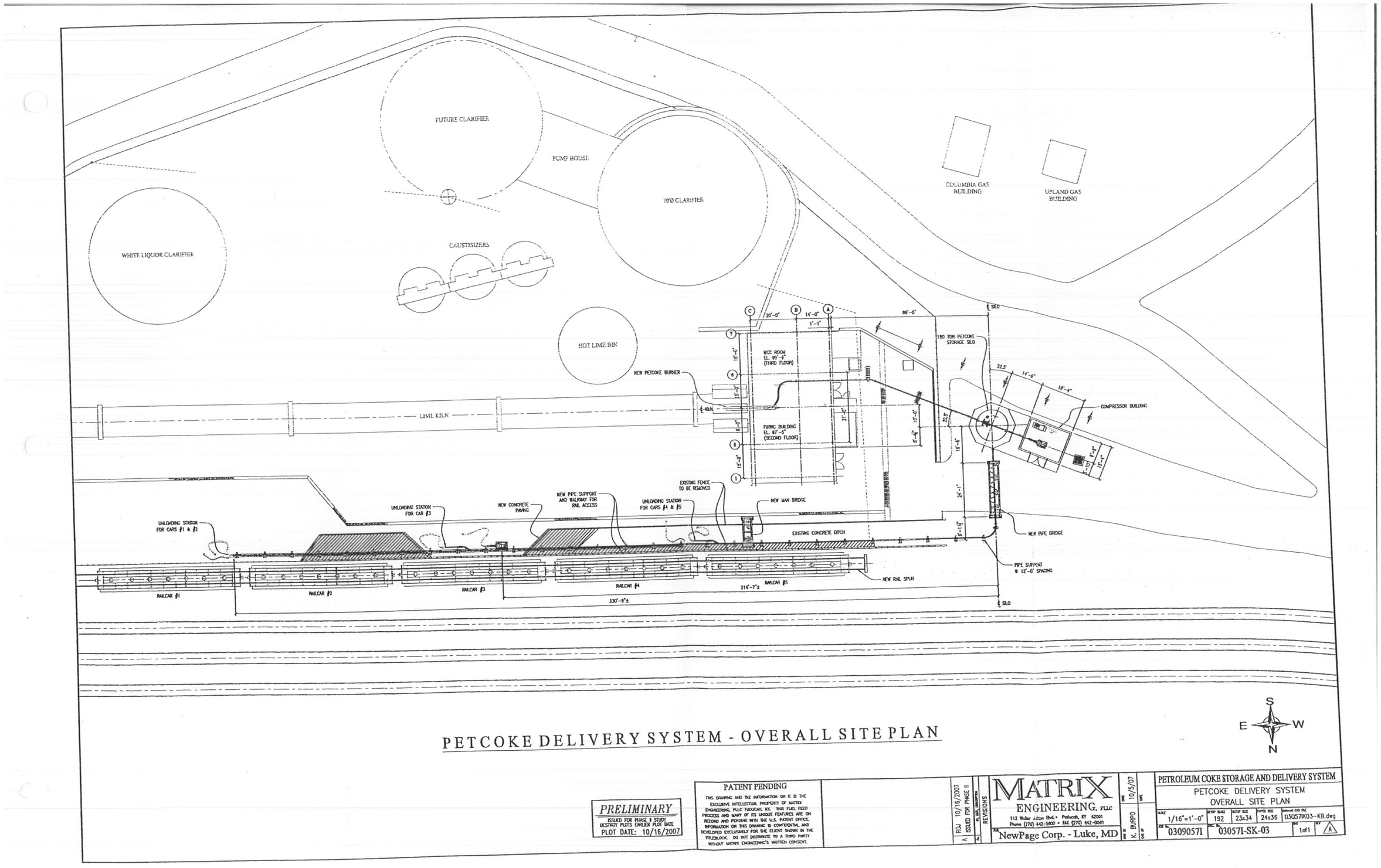
feet 4000
km 1


BERYL WOOD YARD
N
WEST VIRGINIA
WOOD CHIP STORAGE
SECURITY POST 5/6
POTOMAC RIVER
MARYLAND
TOWN OF LUKE MD.
LIME KILN
NO. 2 POWER CENTER
UPPER MILL
WESTVACO-MARYLAND OPERATIONS
GATE 3 (WESTVACO ONLY)
GATE 2 UNION CONTRACTORS
SECURITY POST 1/2
GATE 1 WESTVACO
COMMUNICATIONS CENTER
DISPENSARY
SCRAP METAL DISPOSAL
PULP MILL
LOWER MILL
FINISHING AREA
MACHINE COATING AREA
PIEDMONT RECIEVING WAREHOUSE
POTOMAC RIVER
LUKE PAPER COMPANY
Luke, Maryland
LUKE MILL
PROPER PLOT PLAN
DESIGNER WEC ENGR. SCALE 1"=100
CHECKED BY APPROVED BY
DWG FILE No. 79-90 MAP 90
DWG. NO. PGN LO-96-025

EMISSIONS POINTS	
NUMBERS	DESCRIPTION
001	ROTARY LIME KILN
029	#1 GREEN LIQUOR STORAGE TANK
030	150,000 GALLON STORAGE TANK
031	LIME KILN SLAKER NO. 16
032	CAUSTICIZER #1
033	CAUSTICIZER #2
034	CAUSTICIZER #4
035	WHITE LIQUOR CLARIFIER TANK
036	LIME KILN SLAKER NO. 6
037	MUD WASHER
038	#3 LIME MUD STORAGE TANK
039	MUD FILTER VACUUM PUMP #1
040	MUD FILTER VACUUM PUMP #2
041	MUD FILTER #1 HOOD EXHAUST
042	MUD FILTER #2 HOOD EXHAUST
043	LIME MUD FILTRATE TANK
044	CALIBRATION TANK
045	#16 SLAKER LIME FEED SYSTEM
046	#6 LIME SLAKER FEED SYSTEM
047	LIME STONE UNLOADING
048	PEBBLE LIME UNLOADING
049	AUXILLARY GAS DRIVE MOTOR
050	ACCESS ROADS
051	FLY ASH HANDLING SYSTEM
052	PARTS WASHER
053	INDUSTRIAL SPACE HEATER
058	BLACK LIQUOR STORAGE TANK



				LIME KILN AREA EMISSIONS POINTS LOCATIONS GENERAL ARRANGEMENT	LUKE PAPER COMPANY LUKE MARYLAND
A	5/3/96	JCL	INFORMATION		DWG. NO. PGN0000P34862 1/4 REV A
REV.	DATE	BY	ISSUED FOR	SCALE: 1" = 100' CHARGE	



PETCOKE DELIVERY SYSTEM - OVERALL SITE PLAN

PRELIMINARY
ISSUED FOR PHASE II STUDY
DESIGNED PLOTS EARLIER PLOT DATE
PLOT DATE: 10/16/2007

PATENT PENDING

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REVISIONS			
A	ISSUED FOR PHASE II	RDJ	10/16/2007

MATRIX ENGINEERING, PLLC
112 Walker Allen Blvd.• Paducah, KY 42001
Phone (270) 442-5800 • FAX (270) 442-0041

NewPage Corp. - Luke, MD

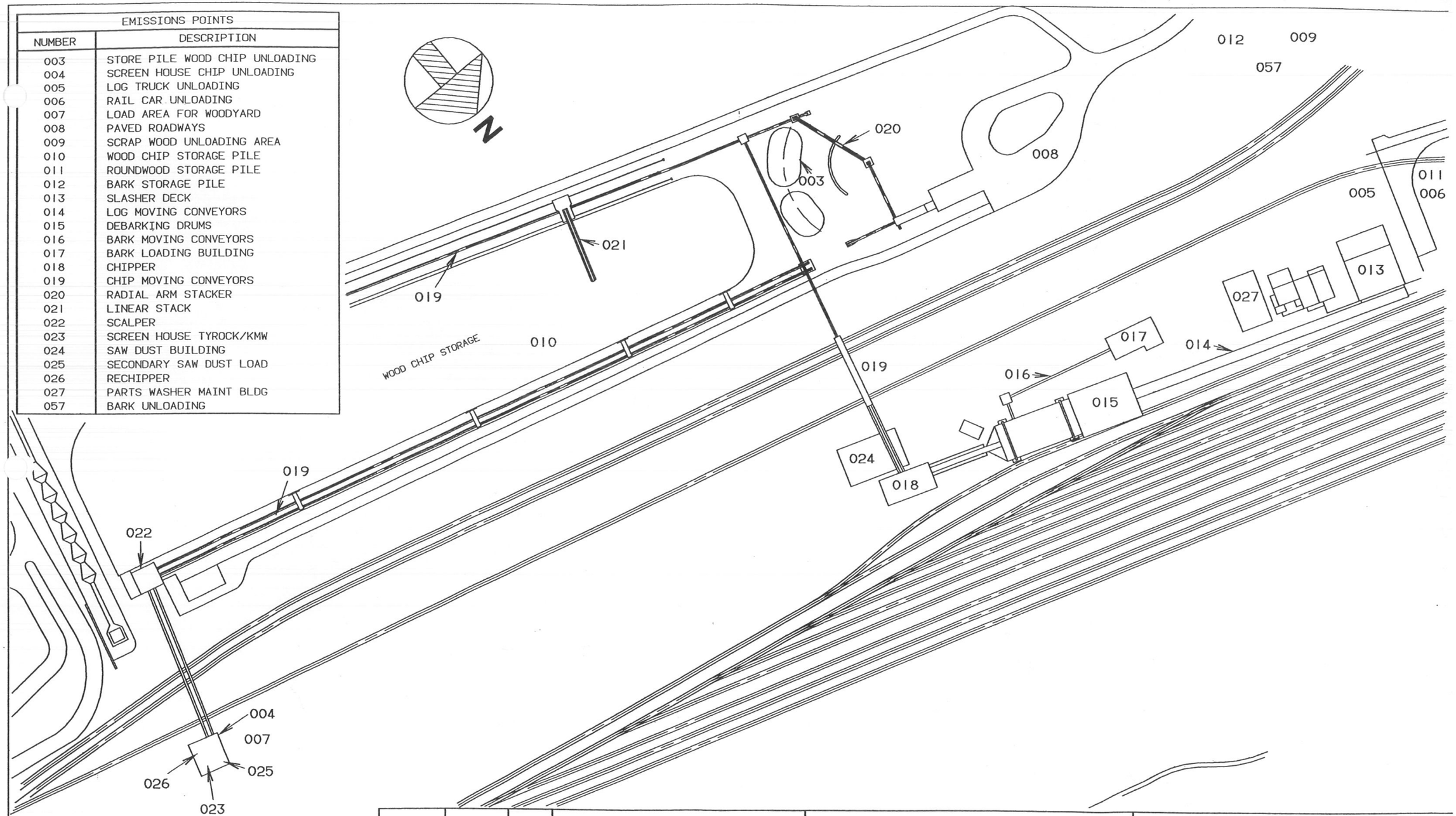
DRN: K. BURPO DATE: 10/5/07

PETROLEUM COKE STORAGE AND DELIVERY SYSTEM
PETCOKE DELIVERY SYSTEM
OVERALL SITE PLAN

SCALE	RECAP SCALE	RECAP SIZE	PAPER SIZE	Autocad DWG FILE
1/16"=1'-0"	192	23x34	24x36	030571K03-KB.dwg

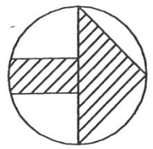
JOB No.	DWG No.	SHT	REV
03090571	03057I-SK-03	1of1	A

EMISSIONS POINTS	
NUMBER	DESCRIPTION
003	STORE PILE WOOD CHIP UNLOADING
004	SCREEN HOUSE CHIP UNLOADING
005	LOG TRUCK UNLOADING
006	RAIL CAR UNLOADING
007	LOAD AREA FOR WOODYARD
008	PAVED ROADWAYS
009	SCRAP WOOD UNLOADING AREA
010	WOOD CHIP STORAGE PILE
011	ROUNDWOOD STORAGE PILE
012	BARK STORAGE PILE
013	SLASHER DECK
014	LOG MOVING CONVEYORS
015	DEBARKING DRUMS
016	BARK MOVING CONVEYORS
017	BARK LOADING BUILDING
018	CHIPPER
019	CHIP MOVING CONVEYORS
020	RADIAL ARM STACKER
021	LINEAR STACK
022	SCALPER
023	SCREEN HOUSE TYROCK/KMW
024	SAW DUST BUILDING
025	SECONDARY SAW DUST LOAD
026	RECHIPPER
027	PARTS WASHER MAINT BLDG
057	BARK UNLOADING

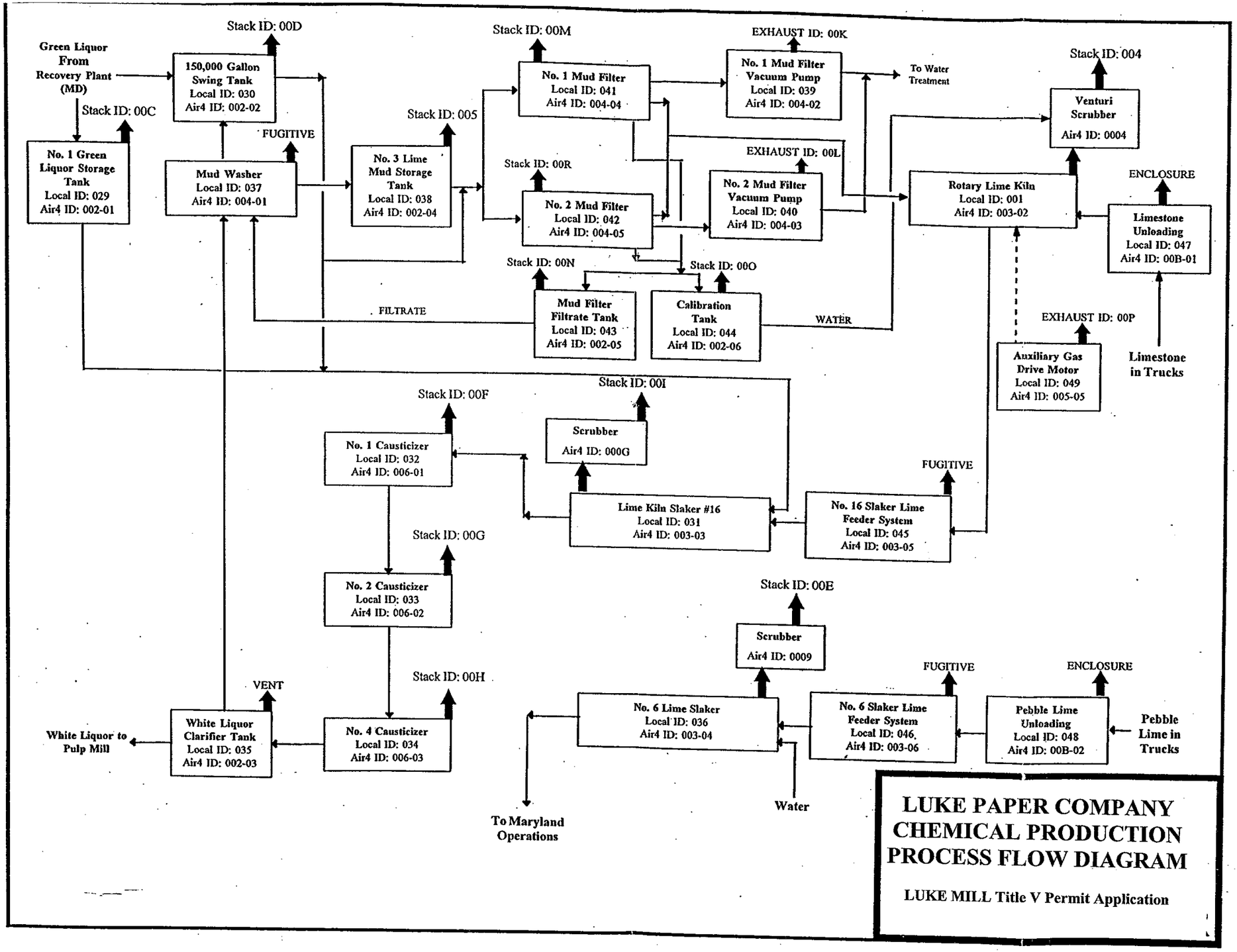


				BERYL WOODYARD AREA EMISSIONS POINTS LOCATIONS GENERAL ARRANGEMENT	LUKE PAPER COMPANY
					LUKE MARYLAND
A	5/3/96	JCL	INFORMATION		DWG. NO. PGN0000P34863 1/4 REV A
REV.	DATE	BY	ISSUED FOR	SCALE: 1" = 100' CHARGE	

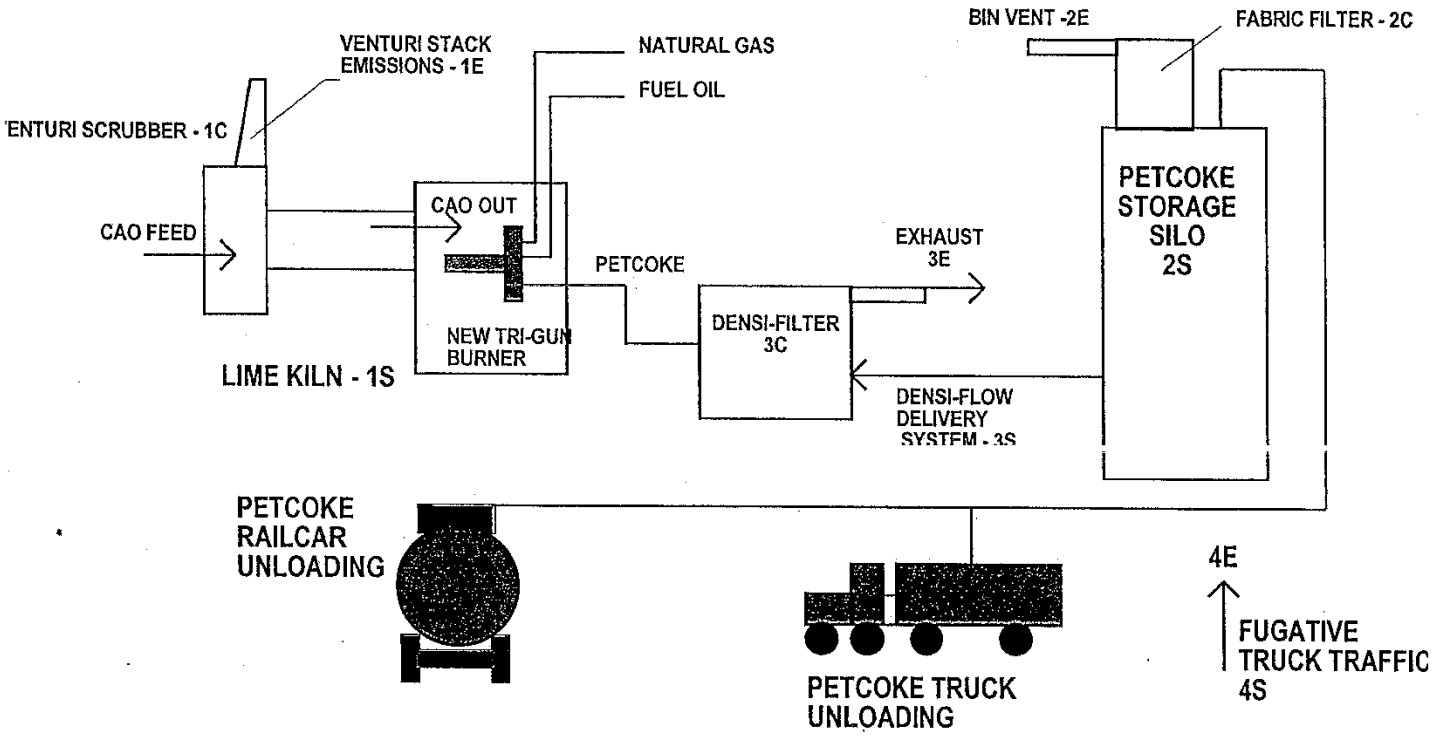
EMISSIONS POINTS	
NUMBER	DESCRIPTION
054	COTTON ROLL GRINDER
055	PAVED ROADS
056	PARTS WASHERS

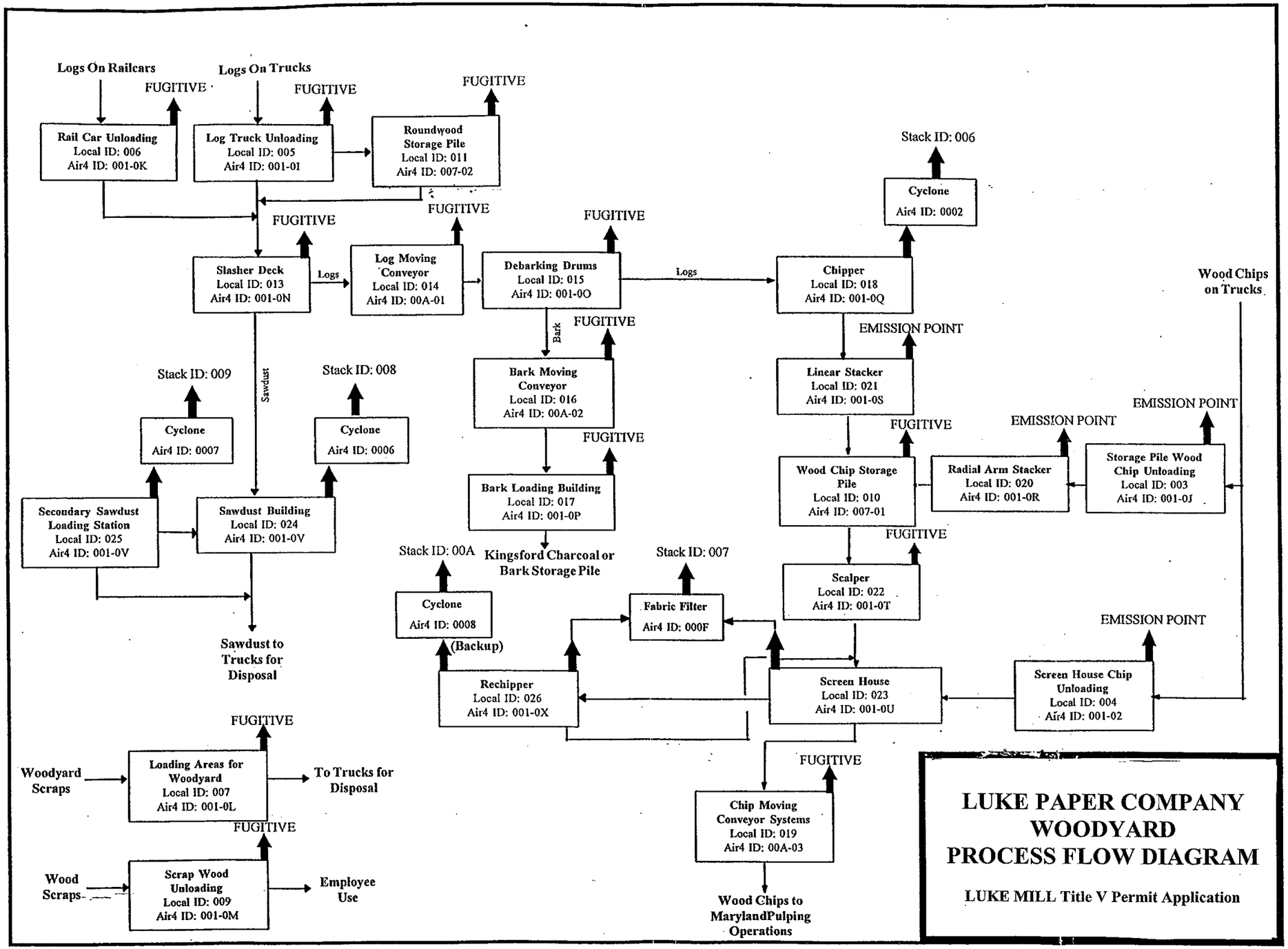


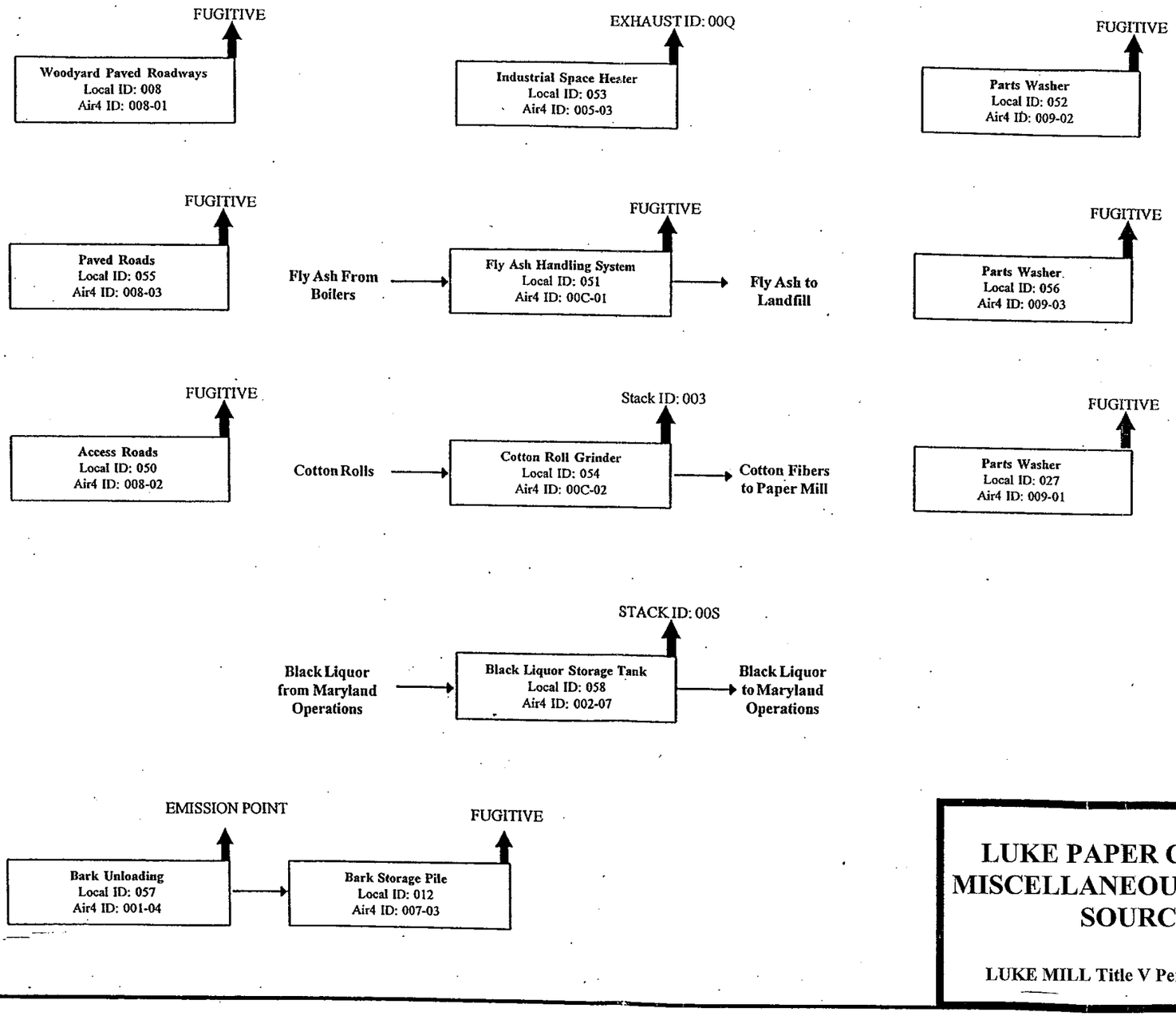
				PIEDMONT AREA EMISSIONS POINTS LOCATIONS GENERAL ARRANGEMENT	LUKE PAPER COMPANY
					LUKE MARYLAND
A	5/3/96	JCL	INFORMATION		DWG. NO. PGN0000P34864 1/4 REV A
REV.	DATE	BY	ISSUED FOR	SCALE: 1" = 100' CHARGE	


Green Liquor From Recovery Plant (MD)
Stack ID: 00C
No. 1 Green Liquor Storage Tank
Local ID: 029
Air4 ID: 002-01
Stack ID: 00D
150,000 Gallon Swing Tank
Local ID: 030
Air4 ID: 002-02
FUGITIVE
Mud Washer
Local ID: 037
Air4 ID: 004-01
Stack ID: 005
No. 3 Lime Mud Storage Tank
Local ID: 038
Air4 ID: 002-04
Stack ID: 00M
No. 1 Mud Filter
Local ID: 041
Air4 ID: 004-04
EXHAUST ID: 00K
No. 1 Mud Filter Vacuum Pump
Local ID: 039
Air4 ID: 004-02
To Water Treatment
Stack ID: 00R
No. 2 Mud Filter
Local ID: 042
Air4 ID: 004-05
EXHAUST ID: 00L
No. 2 Mud Filter Vacuum Pump
Local ID: 040
Air4 ID: 004-03
Stack ID: 004
Venturi Scrubber
Air4 ID: 0004
ENCLOSURE
Rotary Lime Kiln
Local ID: 001
Air4 ID: 003-02
Limestone Unloading
Local ID: 047
Air4 ID: 00B-01
Stack ID: 00N
Stack ID: 00O
FILTRATE
Mud Filter Filtrate Tank
Local ID: 043
Air4 ID: 002-05
Calibration Tank
Local ID: 044
Air4 ID: 002-06
WATER
EXHAUST ID: 00P
Auxiliary Gas Drive Motor
Local ID: 049
Air4 ID: 005-05
Limestone in Trucks
Stack ID: 00I
Stack ID: 00F
No. 1 Causticizer
Local ID: 032
Air4 ID: 006-01
Scrubber
Air4 ID: 000G
Lime Kiln Slaker #16
Local ID: 031
Air4 ID: 003-03
FUGITIVE
No. 16 Slaker Lime Feeder System
Local ID: 045
Air4 ID: 003-05
Stack ID: 00G
No. 2 Causticizer
Local ID: 033
Air4 ID: 006-02
Stack ID: 00E
Scrubber
Air4 ID: 0009
VENT
Stack ID: 00H
White Liquor to Pulp Mill
White Liquor Clarifier Tank
Local ID: 035
Air4 ID: 002-03
No. 4 Causticizer
Local ID: 034
Air4 ID: 006-03
No. 6 Lime Slaker
Local ID: 036
Air4 ID: 003-04
FUGITIVE
No. 6 Slaker Lime Feeder System
Local ID: 046
Air4 ID: 003-06
ENCLOSURE
Pebble Lime Unloading
Local ID: 048
Air4 ID: 00B-02
Pebble Lime in Trucks
To Maryland Operations
Water
LUKE PAPER COMPANY
CHEMICAL PRODUCTION
PROCESS FLOW DIAGRAM
LUKE MILL Title V Permit Application

PROCESS FLOW DIAGRAM - PETCOKE SYSTEM




Logs On Railcars
Logs On Trucks
FUGITIVE
FUGITIVE
FUGITIVE
Rail Car Unloading
Local ID: 006
Air4 ID: 001-0K
Log Truck Unloading
Local ID: 005
Air4 ID: 001-0I
Roundwood Storage Pile
Local ID: 011
Air4 ID: 007-02
FUGITIVE
FUGITIVE
FUGITIVE
Slasher Deck
Local ID: 013
Air4 ID: 001-0N
Logs
Log Moving Conveyor
Local ID: 014
Air4 ID: 00A-01
Debarking Drums
Local ID: 015
Air4 ID: 001-0O
Logs
Stack ID: 006
Cyclone
Air4 ID: 0002
Chipper
Local ID: 018
Air4 ID: 001-0Q
Wood Chips on Trucks
Bark
FUGITIVE
EMISSION POINT
Stack ID: 009
Stack ID: 008
Sawdust
Bark Moving Conveyor
Local ID: 016
Air4 ID: 00A-02
Linear Stacker
Local ID: 021
Air4 ID: 001-0S
EMISSION POINT
EMISSION POINT
Cyclone
Air4 ID: 0007
Cyclone
Air4 ID: 0006
FUGITIVE
Bark Loading Building
Local ID: 017
Air4 ID: 001-0P
FUGITIVE
Wood Chip Storage Pile
Local ID: 010
Air4 ID: 007-01
Radial Arm Stacker
Local ID: 020
Air4 ID: 001-0R
Storage Pile Wood Chip Unloading
Local ID: 003
Air4 ID: 001-0J
Secondary Sawdust Loading Station
Local ID: 025
Air4 ID: 001-0V
Sawdust Building
Local ID: 024
Air4 ID: 001-0V
Stack ID: 00A
Kingsford Charcoal or Bark Storage Pile
Stack ID: 007
FUGITIVE
Scalper
Local ID: 022
Air4 ID: 001-0T
Cyclone
Air4 ID: 0008
Fabric Filter
Air4 ID: 000F
EMISSION POINT
(Backup)
Sawdust to Trucks for Disposal
Rechipper
Local ID: 026
Air4 ID: 001-0X
Screen House
Local ID: 023
Air4 ID: 001-0U
Screen House Chip Unloading
Local ID: 004
Air4 ID: 001-02
FUGITIVE
FUGITIVE
Woodyard Scraps
Loading Areas for Woodyard
Local ID: 007
Air4 ID: 001-0L
To Trucks for Disposal
FUGITIVE
Chip Moving Conveyor Systems
Local ID: 019
Air4 ID: 00A-03
Wood Scraps
Scrap Wood Unloading
Local ID: 009
Air4 ID: 001-0M
Employee Use
Wood Chips to MarylandPulping Operations
LUKE PAPER COMPANY
WOODYARD
PROCESS FLOW DIAGRAM
LUKE MILL Title V Permit Application



LUKE PAPER COMPANY MISCELLANEOUS EMISSION SOURCES

LUKE MILL Title V Permit Application

ATTACHMENT D - Title V Equipment Table

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

Emission Point ID[1]	Control Device[1]	Emission Unit ID[1]	Emission Unit Description	Design Capacity	Year Installed/ Modified
001		1	Rotary Lime Kiln – Production of Lime	103,083 lbs/hr	1966
	001		Kiln Venturi Scrubber – control particulate emissions from operation of lime kiln	60,000 ft³/min	1966
	001		Kiln SO_2 - Inherent control of SO_2 by lime absorption	60,000 ft³/min	1966
003		003	Storage Pile Chip Unloading – Wood chip truck unloading operation	132 tph	1985
004		004	Screen House Chip Unloading - operation	150 tph	1960
005		005	Log Truck Unloading Operation	300 tph	1960
006		006	Rail Car unloading operation	300 tph	1960
007		007	Loading Areas – Sawdust waste clean up and loaded at various areas	16 tph	1960
008		008	Woodyard Roads – Roadways used for raw material transfers and access	5.65 veh-mi	1985
009		009	Scrap Wood Unloading – scrap wood is unloaded in pile for employees	16 tph	1960
010		010	Wood Chip Storage – Storage pile for wood chips	550 tph	1985
011		011	Roundwood storage – Log storage	500 tph	1960
012		012	Bark Storage	84 tph	1960
013		013	Slasher Deck – Saws logs to 4 ft.	460 tph	1985
014		014	Log Moving Conveyors – move logs through process	600 tph	1985
015		015	Debarking Drums – Log debarking operation	600 tph	1985
016		016	Bark Moving Conveyors – Transporting bark through process	84 tph	1985
017		017	Bark Loading Building – Bark and sawdust loaded into trucks	84 tph	1985
018		018	Chipper – Wood chipping operation	370 tph	1985
	018		Chipper Cyclone – Control particulate emissions from wood chipping operation	75,000 ft³/min	1985
019		019	Chip Moving Conveyors – Moving chips through process	550 tph	1985
020		020	Radial Arm Stacker – Transfers wood chips to storage pile	150 tph	1985

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

ATTACHMENT D - Title V Equipment Table

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

Emission Point ID[1]	Control Device[1]	Emission Unit ID[1]	Emission Unit Description	Design Capacity	Year Installed/ Modified
021		021	Linear Stacker – Transfers wood chips to storage pile	550 tph	1985
022		022	Scalper – Separates chips from reject knots and shives	600 tph	1985
023		023	Screen House – wood chip screening operation	300 tph	1985
	023		Screening Fabric Filter – Control particulate emissions from screening and rechipping of wood chips	80,000 ft³/min	1966
024		024	Sawdust building – Building for transfer chute for sawdust collection	10 tph	1960
	024		Sawdust building cyclone- Control particulate emissions from collection of sawdust	8,436 ft³/min	1985
025		025	Sawdust Loading – secondary sawdust loading station	10 tph	1960
	025		Sawdust Loading Cyclone – Control particulate emissions from loading sawdust into trucks	N/A	1985
026		026	Rechipper- Rechipping oversized chips	12 tph	1960
	026		Rechipper cyclone – control particulate emissions from rechipping operations	8,000 ft³/min	1966
031		031	Lime Slacker #16 – Slaking of lime w/t green liquor	16.17 tph	1966
	031		No. 16 Slaker Scrubber – control particulate emissions from slaking of lime with green liquor	7,100 ft³/min	1966
036		036	#6 Lime Slaker – slaking of lime w/t water	16.17 tph	1966
	036		No. 6 Slaker Scrubber – Control particulate emissions from slaking of lime with water	7,400 ft³/min	1966
045		045	#16 Slaker Feeder – Feeder system for lime slaker	20 tph	1966
	045		No. 16 Slaker Feeder Enclosure – Control particulate emissions from discharge of lime kiln to slaker	N/A	1966
046		046	#6 Slaker Feeder – Feed system for lime slaker	3 tph	1966
	046		No. 6 Slaker Feeder Enclosure – Control particulate emissions from discharge of lime to slaker	N/A	1966
047		047	Limestone Unloading	50 tph	1966
	047		Limestone Unloading Enclosure – Control particulate emissions during unloading of limestone trucks	N/A	1966
048		048	Pebble Lime Unloading	20 tph	1966
	048		Pebble Lime Unloading Enclosure – Control particulate matter emissions during unloading of pebble lime trucks	N/A	1966

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

ATTACHMENT D - Title V Equipment Table

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

Emission Point ID[1]	Control Device[1]	Emission Unit ID[1]	Emission Unit Description	Design Capacity	Year Installed/ Modified
050		050	Access Roads – Roads used to haul waste. Fly ash, etc.	4.25 veh-mi	1966
051		051	Fly Ash Handling – Boiler fly ash handling system	60 tph	1966
055		055	Paved Roads – Paved access roads to receiving	2.4 veh-mi	1966
057		057	Bark Unloading – Unloading of bark onto storage pile	84 tph	1966
029		029	No. 1 Green Liquor Tank	150,000 Gals.	1966
030		030	150,000 Gal. Tank	150,000 Gals.	1966
032		032	No. 1 Causticizer	35,000 Gals.	1966
033		033	No. 2 Causticizer	35,000 Gals.	1966
034		034	No. 3 Causticizer	35,000 Gals.	1966
035		035	White Liquor Clarifier	1,065,000 Gals	1966
037		037	Mud Washer	350,000 Gals.	1966
038		038	No. 3 Mud filter	150,000 Gals.	1966
039		039	No. 1 Vacuum Pump	16.17 Tons/hr	1966
040		040	No. 2 Vacuum Pump	16.17 Tons/hr	1966
041		041	No. 1 Mud Filter Tank	250 Gals.	1966
042		042	No. 2 Mud Filter Tank	250 Gals.	1966
043		043	Mud Filter Filtrate Tank	3,770 Gals.	1966
044		044	Calibration Tank	1,500 Gals.	1966
049		049	Auxiliary Gas Drive Motor	0.16 mm Btu/hr	1966
054		054	Cotton Roll Grinding	3 rolls/day	1989
058		058	Liquor Storage Tank	700,000 Gals.	1965
060		060	No. 2 fuel Oil Tank	1,500 Gals.	1966
061		061	Auxiliary Gas Drive Fuel Tank	150 Gals.	1966

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number:	**Emission unit name:**	**List any control devices associated with this emission unit.**
001	Rotary Lime Kiln	Kiln Venturi Scrubber Kiln SO_2

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Produces lime for recovery of pulping chemicals

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

Construction date:	**Installation date:**	**Modification date(s):**
MM/DD/YYYY	01/01/1966	MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:**
16.17 tons/hr	141,649.2 Tons/yr	8,760 hours per year

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

Does this emission unit combust fuel? _X_ Yes ___ No	**If yes, is it?** ___ Indirect Fired _X_ Direct Fired
Maximum design heat input and/or maximum horsepower rating: 120 mm BTU/hr	**Type and Btu/hr rating of burners:** Natural Gas/Oil 120 mm BTU/hr

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.
Gas – Normal Operation, 120,000 ft^3/hr - 1,051,200,000 ft^3
Fuel Oil – alternate Fuel - 812.5 gallons/hr - 7,117,500 gallons (No. 2, 4, or 6 Oil)

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

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
Gas			1,030
Fuel Oil	2.0%		146,000/gallon
Petcoke	10.0%		120M Btu/hr

Emissions Data ***(Gas Fired)***		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	2.93	12.82
Nitrogen Oxides (NO_X)	27.33	119.69
Lead (Pb)	4.566E-03	0.02
Particulate Matter ($PM_{2.5}$)	31.58	138.32
Particulate Matter (PM_{10})	31.58	138.32
Total Particulate Matter (TSP)	31.58	138.32
Sulfur Dioxide (SO_2)	0.1	0.434
Volitile Organic Compounds (VOC)	4.18	18.31
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	0.1038	0.4547
Acrolein	8.9E-03	0.039
Arsenic	4.52-05	1.98-04
Benzene	1.4902	0.0652
Carbon Disulfide	4.566E-02	0.02
Carbon Tetrachloride	1.86	8.14
Chlorobenzene	7.53E-03	0.033
Chloroform	1.621E-03	7.1E-03
Chloromethane	0.0274	0.12
Chromium	2.283E-03	0.01
Cumene	2.7E-08	01.2E-07
Formaldehyde	7.99E-02	0.35
Hexane	1.5E-03	6.59E-03
Hydrochloric Acid	3.07E-02	0.135
Mercury Compounds	5.96E-03	0.0261
Methanol	3.69E-01	1.62
Methylene Chloride	2.055E-03	9.0E-03
Methyl Isobutyl Ketone	4.11E-03	0.018
Naphthalene	7.47E-03	0.0327
Nickel Compounds	1.393E-02	0.061

Emissions Data ***(Gas Fired)***		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Phenol	1.44E-01	0.6303
Polycyclic Aromatics	7.75E-04	.0034
Propionaldehyde	7.92E-02	0.347
Styrene	1.03E-03	4.5E-03
Tetrachloroethylene	1.81E-02	0.0793
Toluene	8.2E-03	0.0359
1,2,4 - Trichlorobenzene	2.1E-03	9.2E-03
Trichloroethylene	6.849E-04	.003
Xylene	1.18E-02	5.16E-02
Zinc compounds	1.69E-03	7.4E-03

Emissions Data ***(Gas Fired)***

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Barium	7.1E-03	0.031
Benz0(g,h,i)perylene	2.5E-04	1.1E-03
Copper	1.073E-03	4.7E-03
Manganese Compounds	6.32E-03	0.0277
Sulfuric Acid	1.1E-05	4.82E-05
Vanadium compounds	3.196E-05	1.4E-04

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.).

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Emissions Data	***(#2 / #6 Fuel Oil)***	
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	2.93	12.82
Nitrogen Oxides (NO_X)	27.33	119.69
Lead (Pb)	4.566E-03	0.02
Particulate Matter ($PM_{2.5}$)	31.58	138.32
Particulate Matter (PM_{10})	31.58	138.32
Total Particulate Matter (TSP)	31.58	138.32
Sulfur Dioxide (SO_2)	0.05	0.21
Volitile Organic Compounds (VOC)	4.18	18.31
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	0.1038	0.4547
Acrolein	8.9E-03	0.039
Arsenic	4.52-05	1.98-04
Benzene	1.4902	0.0652
Carbon Disulfide	4.566E-02	0.02
Carbon Tetrachloride	1.86	8.14
Chlorobenzene	7.53E-03	0.033
Chloroform	1.621E-03	7.1E-03
Chloromethane	0.0274	0.12
Chromium	2.283E-03	0.01
Cumene	2.7E-08	01.2E-07
Formaldehyde	7.99E-02	0.35
Hexane	1.5E-03	6.59E-03
Hydrochloric Acid	3.07E-02	0.135
Mercury Compounds	5.96E-03	0.0261
Methanol	3.69E-01	1.62
Methylene Chloride	2.055E-03	9.0E-03
Methyl Isobutyl Ketone	4.11E-03	0.018
Naphthalene	7.47E-03	0.0327
Nickel Compounds	1.393E-02	0.061

Emissions Data ***(#2/ #6 Fuel Oil)***		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Phenol	1.44E-01	0.6303
Polycyclic Aromatics	7.75E-04	.0034
Propionaldehyde	7.92E-02	0.347
Styrene	1.03E-03	4.5E-03
Tetrachloroethylene	1.81E-02	0.0793
Toluene	8.2E-03	0.0359
1,2,4 - Trichlorobenzene	2.1E-03	9.2E-03
Trichloroethylene	6.849E-04	.003
Xylene	1.18E-02	5.16E-02
Zinc compounds	1.69E-03	7.4E-03

Emissions Data ***(#2/ #6 Fuel Oil)***

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Barium	7.1E-03	0.031
Benz0(g,h,i)perylene	2.5E-04	1.1E-03
Copper	1.073E-03	4.7E-03
Manganese Compounds	6.32E-03	0.0277
Selenium	1.86E-04	8.147E-04
Sulfuric acid	0.339	1.487
Vanadium compounds	3.196E-05	1.4E-04

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.).

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Emissions Data ***(#4 Fuel Oil)***		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	2.93	12.82
Nitrogen Oxides (NO_X)	27.33	119.69
Lead (Pb)	4.566E-03	0.02
Particulate Matter ($PM_{2.5}$)	31.58	138.32
Particulate Matter (PM_{10})	31.58	138.32
Total Particulate Matter (TSP)	31.58	138.32
Sulfur Dioxide (SO_2)	0.1	0.438
Volitile Organic Compounds (VOC)	0.098	0.43
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	0.1038	0.4547
Acrolein	8.9E-03	0.039
Arsenic	4.52-05	1.98-04
Benzene	1.4902	0.0652
Carbon Disulfide	4.566E-02	0.02
Carbon Tetrachloride	1.86	8.14
Chlorobenzene	7.53E-03	0.033
Chloroform	1.621E-03	7.1E-03
Chloromethane	0.0274	0.12
Chromium	2.283E-03	0.01
Cumene	2.7E-08	01.2E-07
Formaldehyde	7.99E-02	0.35
Hexane	1.5E-03	6.59E-03
Hydrochloric Acid	3.07E-02	0.135
Mercury Compounds	5.96E-03	0.0261
Methanol	3.69E-01	1.62
Methylene Chloride	2.055E-03	9.0E-03
Methyl Isobutyl Ketone	4.11E-03	0.018
Naphthalene	7.47E-03	0.0327
Nickel Compounds	1.393E-02	0.061

Emissions Data ***(#4 Fuel Oil)***		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Phenol	1.44E-01	0.6303
Polycyclic Aromatics	7.75E-04	.0034
Propionaldehyde	7.92E-02	0.347
Styrene	1.03E-03	4.5E-03
Tetrachloroethylene	1.81E-02	0.0793
Toluene	8.2E-03	0.0359
1,2,4 - Trichlorobenzene	2.1E-03	9.2E-03
Trichloroethylene	6.849E-04	.003
Xylene	1.18E-02	5.16E-02
Zinc compounds	1.69E-03	7.4E-03

Emissions Data ***(#4 Fuel Oil)***

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Barium	7.1E-03	0.031
Benz0(g,h,i)perylene	2.5E-04	1.1E-03
Copper	1.073E-03	4.7E-03
Manganese Compounds	6.32E-03	0.0277
Selenium compounds	1.74	7.616E-04
Vanadium compounds	3.196E-05	1.4E-04

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.).

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Emissions Data ***(Petcoke)***		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	2.93	12.82
Nitrogen Oxides (NO_X)	27.33	119.69
Lead (Pb)	4.566E-03	0.02
Particulate Matter ($PM_{2.5}$)	31.58	138.32
Particulate Matter (PM_{10})	31.58	138.32
Total Particulate Matter (TSP)	31.58	138.32
Sulfur Dioxide (SO_2)	1.6	7.02
Volitile Organic Compounds (VOC)	0.744	3.26
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	0.1038	0.4547
Acrolein	3.4E-04	1.49E-03
Arsenic	4.52-05	1.98-04
Benzene	5.3E-03	0.0234
Carbon Disulfide	4.566E-02	0.02
Carbon Tetrachloride	1.86	8.14
Chlorobenzene	1.8E-04	7.79E-04
Chloroform	0.126	0.552
Chloromethane	0.0274	0.12
Chromium	2.283E-03	0.01
Cumene	3.24E-08	01.5E-07
Formaldehyde	7.99E-02	0.35
Hexane	3.4E-04	1.49E-03
Hydrochloric Acid	3.07E-02	0.135
Mercury Compounds	1.0E-08	4.38E-08
Methanol	9.2E-02	0.402
Methylene Chloride	6.78E-05	2.79E-04
Methyl Isobutyl Ketone	3.24E-03	1.42E-02
Naphthalene	7.44E-02	0.0326
Nickel Compounds	1.3	5.690

Emissions Data ***(Petcoke)***		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Phenol	4.36E-03	1.91E-02
Polycyclic Aromatics	6.849E-04	.003
Propionaldehyde	7.92-02	0.347
Styrene	9.13E-04	4.5E-03
Tetrachloroethylene	4.2E-03	1.84E-02
Toluene	3.65E-04	1.06E-03
1,2,4 - Trichlorobenzene	2.1E-03	9.2E-03
Trichloroethylene	6.849E-04	.003
Xylene	3.56E-02	1.56E-02
Zinc compounds	4.79E-06	2. 1E-05

Emissions Data ***(Petcoke)***

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Barium	6.849E-03	0.03
Benz0(g,h,i)perylene	9.132E-05	4.0E-04
Copper	2.83E-02	0.124
Manganese Compounds	0.146	0.6395
Selenium	2.24E-03	9.811E-03
Sulfuric Acid	1.415E-05	5.00E-05
Vanadium compounds	5.33	23.345

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.).

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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.

All Facility Wide applicable requirements are listed in Section 2: No. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard lbs/hr
001	C.S.R. 45-7-4.1	4.1.4	PM	31.58
	C.S.R. 45-10-4.1	4.1.4	SO_2	0.1(gas, #4), 0.05 (#2) 0.97(petcoke)
	C.S.R. 45-13	4.1.20	SO_2	2000 ppmv
		4.1.4	CO	2.93(gas), 0.97(#2, #4) 4.22(petcoke)
		4.1.4	NO_x	27.33(gas), 19.08(#2, #4) 35.53 (petcoke)
		4.1.4	VOC	0.75(gas, Petcoke) 0.1(#2, #4)
001	C.S.R. 45-7-4.3	4.1.7	Stack Gas	Cannot be diluted by adding additional gas
001	C.S.R. 45-10-8.3a	4.4.3	All	Monitoring Data
001	C.S.R. 45-10-8.3b	4.5.1	All	Exception Report
001	40 CFR 63, Subpart MM	4.1.11	PM	0.064 gr/dscf (corr. 10% O_2
		4.2.3	Oper. Req/Test	Operation of CMS, Testing
		4.4.8, 4.4.9	Record Keeping	SSM Plan, CaO prod. rates
		4.5.3, 4.5.4	Reporting Req.	Quart. Or Semiannual excess Emissions report

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.)

All Facility Wide applicable requirements are listed in Section 2: No. 20

Emission Point	Permit Condition Number	Method	Condition Number
001	4.1.5,4.1.15, 4.1.16	Visual Inspection and recordkeeping	4.2.2, 4.4.2, 4.4.4, 4.4.5
001	4.1.7	Conduct as required	4.1.7
001	4.4.3	Recordkeeping	4.4.4
001	4.5.1	Conduct as required	4.4.4
001	4.1.11	Testing (initial Method 5 or 29 Test)	4.2.3
	4.2.3	Operating requirements, Testing	4.2.3
	4.4.7	Record Keeping	4.4.7
	4.5.2, 4.5.3, 4.5.4	Reporting	4.5.2, 4.5.3, 4.5.4

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 2S	**Emission unit name:** Silo Bin Vent Filter Fan	**List any control devices associated with this emission unit.** 2C Silo Bin filter Vent

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
180 ton Storage Silo for petcoke

Manufacturer:	**Model number:**	**Serial number:**
Construction date: 07/01/2008	**Installation date:** 09/01/2008	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 180 tons of Petcoke

Maximum Hourly Throughput: 2.67 tons/hr	**Maximum Annual Throughput:** 23,389 Tons	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
None			

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	0.04	0.01
Particulate Matter (PM_{10})	0.04	0.01
Total Particulate Matter (TSP)	0.08	0.02
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Title V Permit R30-05700008-2007
Condition 4.1.16

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 003	**Emission unit name:** Storage Pile Chip Unloading	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Wood chip truck unloading operation

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 132.00 tons/hr

Maximum Hourly Throughput: 132.00 tons/hr	**Maximum Annual Throughput:** 727,584 Tons/Yr	**Maximum Operating Schedule:** 5,512 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	1.81E-04	5.0E-04
Particulate Matter (PM_{10})	1.04E-03	2.87E-03
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

_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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? _X_Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 3S	**Emission unit name:** Densi-Filter Exhaust Fan	**List any control devices associated with this emission unit.** 3C Densi-Filter (Baghouse)

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Densi-Feed Petroleum Coke Burner Feed system

Manufacturer:	**Model number:**	**Serial number:**
Construction date: 07/01/2008	**Installation date:** 09/01/2008	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 2.67 tons/hr

Maximum Hourly Throughput: 2.67 tons/hr	**Maximum Annual Throughput:** 23,389.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	0.01	0.01
Particulate Matter (PM_{10})	0.01	0.01
Total Particulate Matter (TSP)	0.02	0.01
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Title V Permit R30-05700008-2007

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 004	**Emission unit name:** Screen House Chip Unloading	**List any control devices associated with this emission unit.** None
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Screen House chip unloading		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 150.00 Tons/hr		
Maximum Hourly Throughput: 150.00	**Maximum Annual Throughput:** 826,800 Tons/yr	**Maximum Operating Schedule:** 5,512 hours per year

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 rating of burners:** 0.00
List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.	

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	9.83E-05	2.71E-04
Particulate Matter (PM_{10})	5.62E-04	1.55E-03
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 005	**Emission unit name:** Log Truck Unloading	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Log truck unloading operations
There are trace amounts of TSP and PM10 emitted from this operation.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 300.00 tons/hr

Maximum Hourly Throughput: 300.00 tons/hr	**Maximum Annual Throughput:** 2,628,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

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

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 006	**Emission unit name:** Rail Car Unloading	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Rail Car unloading operations
There are trace amounts of TSP and PM10 emitted from this operation.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 300.00 tons/hr

Maximum Hourly Throughput: 300.00 tons/hr	**Maximum Annual Throughput:** 2,628,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

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

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 007	**Emission unit name:** Loading Areas	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Loading Areas for woodyard cleanup.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.00 tons/hr

Maximum Hourly Throughput: 16.00 tons/hr	**Maximum Annual Throughput:** 140,160 Tons/yr	**Maximum Operating Schedule:** 5,512 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	1.04E-05	2.89E-05
Particulate Matter (PM_{10})	6.44E-04	1.65E-04
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)
Factor from NCASI Special Report No. 15-01 January 2015

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 008	**Emission unit name:** Woodyard Roads	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Roadways used for raw material transfers and access.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 5.65 veh-mi

Maximum Hourly Throughput: 5.65 veh-mi	**Maximum Annual Throughput:** 49,494 veh-mi	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	0.48858	2.14
Particulate Matter (PM_{10})	0.48858	2.14
Total Particulate Matter (TSP)	1.87443	8.21
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Table 10.3-1 AP 42

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 009	**Emission unit name:** Scrap Wood Unloading	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Scrap wood unloading operation.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.00 tons/hr

Maximum Hourly Throughput: 16.00 tons/hr	**Maximum Annual Throughput:** 140,160 Tons/yr	**Maximum Operating Schedule:** 5,512 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	4.3E-04	1.19E-03
Particulate Matter (PM_{10})	2.44E-03	6.73E-03
Total Particulate Matter (TSP)	2.48E-04	2.17
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 010	**Emission unit name:** Wood Chip Storage	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Storage pile for wood chips.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 500.00 Tons/hr

Maximum Hourly Throughput: 500.00 Tons/hr	**Maximum Annual Throughput:** 4,380,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	4.34E-04	1.9E-03
Particulate Matter (PM_{10})	2.49E-03	1.09E-02
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
010	C.S.R. 45-7-3.7	4.1.3	PM	Visible Emissions

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
010	4.1.3	Visible Emissions and Recordkeeping	4.2.2

Are you in compliance with all applicable requirements for this emission unit? _X_ Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 011	**Emission unit name:** Roundwood Storage	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Log Storage.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 500.00 Tons/hr

Maximum Hourly Throughput: 500.00 Tons/hr	**Maximum Annual Throughput:** 4,380,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	4.34E-04	1.9E-03
Particulate Matter (PM_{10})	2.49E-03	1.09E-02
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
011	C.S.R. 45-7-3.7	4.1.3	PM	Visible Emissions

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
011	4.1.3	Visible Emissions and Recordkeeping	4.2.2

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 012	**Emission unit name:** Bark storage	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Bark Storage Pile.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 84.00 Tons/hr

Maximum Hourly Throughput: 84.00 Tons/hr	**Maximum Annual Throughput:** 735,840 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

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

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
012	C.S.R. 45-7-3.7	4.1.3	PM	Visible Emissions

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
012	4.1.3	Visible Emissions and Recordkeeping	4.2.2

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 013	**Emission unit name:** Slasher Deck	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Saw logs to 4 foot lengths

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 400.00 tons/hr

Maximum Hourly Throughput: 400.00 tons/hr	**Maximum Annual Throughput:** 3,504,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	0.219	0.96
Particulate Matter (PM_{10})	1.24	5.43
Total Particulate Matter (TSP)	50.0	219.0
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Table 10.3-1 AP 42

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
013	C.S.R. 45-7-4.1	4.1.6	PM	50.0 lbs/hr

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
013	4.1.6	Recordkeeping	4.2.2, 4.4.6

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 014	**Emission unit name:** Log Moving Conveyors	**List any control devices associated with this emission unit.**
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Move logs through process		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 600.00 Tons/yr		
Maximum Hourly Throughput: 600.00 Tons/yr	**Maximum Annual Throughput:** 5,256,000Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00
List the primary fuel type(s) and if applicable, the secondary fuel type(s). For each fuel type listed, provide the maximum hourly and annual fuel usage for each.	

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

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

Emissions Data

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

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 015	**Emission unit name:** Debarking Drum	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Log debarking operation
.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 600.00 tons/hr

Maximum Hourly Throughput: 600.00 tons/hr	**Maximum Annual Throughput:** 5,256,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	0.33	1.45
Particulate Matter (PM_{10})	1.86	8.15
Total Particulate Matter (TSP)	50.0	219
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Table 10.3-1 AP 42

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
015	C.S.R. 45-7-4.1	4.1.6	PM	50.0 lbs/hr

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
015	4.1.6	Recordkeeping	4.2.2, 4.4.6

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 016	**Emission unit name:** Bark Moving Conveyors	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Transporting Bark through process

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 84.00 Tons/yr

Maximum Hourly Throughput: 84.00 Tons/yr	**Maximum Annual Throughput:** 735,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

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

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 017	**Emission unit name:** Bark Loading Building	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Bark and sawdust loaded into trucks.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 93.30 tons/hr

Maximum Hourly Throughput: 93.30 tons/hr	**Maximum Annual Throughput:** 817,308 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	0.018	0.08
Particulate Matter (PM_{10})	0.12	0.53
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 018	**Emission unit name:** Chipper	**List any control devices associated with this emission unit.** Chipper Cyclone
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Wood chipping operation		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 375.00 Tons/hr		
Maximum Hourly Throughput: 375.00	**Maximum Annual Throughput:** 3,285,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	6.39E-03	2.8E-02
Particulate Matter (PM_{10})	3.6E-03	0.0158
Total Particulate Matter (TSP)	50	219
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
018	C.S.R. 45-7-4.1	4.1.6	PM	50.0 lbs/hr

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
018	4.1.6	Recordkeeping	4.2.2, 4.4.6

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 019	**Emission unit name:** Chip Moving Conveyors	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Moving Chips through process

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 550.00 Tons/yr

Maximum Hourly Throughput: 550.00 Tons/yr	**Maximum Annual Throughput:** 4,818,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	9.38E-03	4.11E-02
Particulate Matter (PM_{10})	5.3E-02	2.32E-01
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 020	**Emission unit name:** Radial Arm Stacker	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Transfer wood chips to storage pile.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 150.00 Tons/hr

Maximum Hourly Throughput: 150.00	**Maximum Annual Throughput:** 1,314,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter (PM_{10})	2.3E-03	0.01
Particulate Matter (PM_{10})	0.014	0.06
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 021	**Emission unit name:** Linear Stacker	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Transfer wood chips to storage pile.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 550.00 Tons/hr

Maximum Hourly Throughput: 550.00	**Maximum Annual Throughput:** 4,818,000Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	9.1E-03	0.04
Particulate Matter (PM_{10})	0.05	0.23
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 022	**Emission unit name:** Scalper	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Separates chips from rejects knots and shives.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 300.00 Tons/hr

Maximum Hourly Throughput: 300.00	**Maximum Annual Throughput:** 2,628,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	4.57E-03	0.02
Particulate Matter (PM_{10})	2.97E-02	0.13
Total Particulate Matter (TSP)	50	219
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
022	C.S.R. 45-7-4.1	4.1.6	PM	50.0 lbs/hr

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
022	4.1.6	Recordkeeping	4.2.2, 4.4.6

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 023	**Emission unit name:** Screen House	**List any control devices associated with this emission unit.** Screening Fabric Filter

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Wood chip screening operation.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 300.00 Tons/hr

Maximum Hourly Throughput: 300.00	**Maximum Annual Throughput:** 2,628,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	4.57E-03	0.02
Particulate Matter (PM_{10})	2.97E-02	0.13
Total Particulate Matter (TSP)	50	219
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
023	C.S.R. 45-7-4.1	4.1.6	PM	50.0 lbs/hr

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
023	4.1.6	Recordkeeping	4.2.2, 4.4.6

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 024	**Emission unit name:** Sawdust Building	**List any control devices associated with this emission unit.** Sawdust Building Cyclone
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Building for transfer chute for sawdust collection.		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 10.00 Tons/hr		
Maximum Hourly Throughput: 9.30	**Maximum Annual Throughput:** 81,468 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	1.59E-04	6.95E-04
Particulate Matter (PM_{10})	8.9E-04	3.91E-03
Total Particulate Matter (TSP)	0.28767	1.26
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 025	**Emission unit name:** Sawdust Loading	**List any control devices associated with this emission unit.** Sawdust Loading Cyclone
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Secondary sawdust loading station – used on weekends only.		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 10.00 Tons/hr		
Maximum Hourly Throughput: 9.30	**Maximum Annual Throughput:** 81,468 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	1.59E-04	6.95E-04
Particulate Matter (PM_{10})	8.9E-04	3.91E-03
Total Particulate Matter (TSP)	0.28767	1.26
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42
Factor 3.1% (product vs sawdust)

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 026	**Emission unit name:** Rechipper	**List any control devices associated with this emission unit.** Rechipper Cyclone

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Rechipping of oversize chips

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1960	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 12.00 Tons/hr

Maximum Hourly Throughput: 12.00	**Maximum Annual Throughput:** 105,120 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	3.3E-04	1.45E-03
Particulate Matter (PM_{10})	2.28E-03	0.01
Total Particulate Matter (TSP)	18.4	80.59
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Factor 1.0 lb/Ton
Factor from NCASI Special Report No. 15-01 January 2015
Table 10.3-1 AP 42

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
026	C.S.R. 45-7-4.1	4.1.6	PM	18.4 lbs/hr

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
026	4.1.6	Recordkeeping	4.2.2, 4.4.6

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 027	**Emission unit name:** Parts Washer – Maint. Bld.	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Maintenance building parts washer.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1985	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 1.00 Gal/hr

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.011	0.05

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

NCASI Bulletins
884 (Aug./2004)
175
646 (Feb 1993)
NCASI SARA 313 Emission Factor Summary

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 029	**Emission unit name:** No. 1 Green Liquor Tank	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Storage of green liquor

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	1.07	4.67
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	1.62E-03	7.1E-03
Benzene	4.52E-04	1.98E-03
Carbon Tetrachloride	5.91E-04	2.59E-03
Methanol	2.1	9.21
Methyl isobutyl Ketone	1.77E-04	7.79E-04
Styrene	1.77E-03	7.79E-03
Toluene	1.62E-04	7.08E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

NCASI Bulletins
884 (Aug./2004)
175
646 (Feb 1993)
NCASI SARA 313 Emission Factor Summary
AP42 Tables
11.17-4
13.2.2
13.2.4
10.3-1

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 030	**Emission unit name:** 150,000 Gal. Tank	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Swing tank for gren liquor or lime mud washer underflow

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.0228	0.1
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	9.13E-04	4.0E-03
Benzene	7.53E-05	3.3E-04
Chloroform	3.24E-05	1.42E-04
Hexane	1.78E-05	7.79E-05
Methanol	1.78E-02	7.79E-02
Methyl isobutyl Ketone	4.68E-05	2.05E-04
Tetrachloroethylene	2.26E-05	9.92E-05
Toluene	5.18E-05	2.27E-04
1,1, 1Trichloroethane	1.44E-05	6.3E-05
1,1,2-Trichloroethane	1.05E-04	4.6E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 031	**Emission unit name:** Lime Slaker #16	**List any control devices associated with this emission unit.** No. 16 Slaker Scrubber

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Slaking of lime with green liquor

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	3.42	14.96
Particulate Matter (PM_{10})	6.73	29.48
Total Particulate Matter (TSP)	6.73	29.48
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.18	0.81
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	4.7E-02	.206
Acrolein	8.17E-04	3.58E-03
Benzene	5.022E-05	2.2E-04
Hexane	3.68E-05	1.61E-04
Methanol	0.87	3.82
Methylene Chloride	2.05E-02	9.0E-02
Methyl Isobutyl Ketone	1.42E-04	6.2E-04
Phenol	4.0E-03	1.75E-02
Propionaldehyde	1.0E-03	4.4E-03
Styrene	1.67E-04	7.3E-04
Tetrachloroethylene	1.2E-03	5.27E-3
Toluene	2.9E-03	1.27E-02
1,2,4 - Trichlorobenzene	1.62E-04	7.1E-04
Xylene	1.33E-04	5.84E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Ammonia	4.84	21.18
Formaldehyde	1.19E-04	5.21E-04

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.).

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
031	C.S.R. 45-7-4.1	4.1.6	PM	6.83 lbs/hr

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
031	4.1.6	Recordkeeping	4.2.2, 4.4.6

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 032	**Emission unit name:** No. 1 Causticizer	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Converts sodium Carbonate to sodium Hydroxide

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	3.42	14.96
Particulate Matter (PM_{10})	6.73	29.48
Total Particulate Matter (TSP)	6.73	29.48
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.18	0.81
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	4.7E-02	.206
Acrolein	8.17E-04	3.58E-03
Benzene	5.022E-05	2.2E-04
Hexane	3.68E-05	1.61E-04
Methanol	0.87	3.82
Methylene Chloride	2.05E-02	9.0E-02
Methyl Isobutyl Ketone	1.42E-04	6.2E-04
Phenol	4.0E-03	1.75E-02
Propionaldehyde	1.0E-03	4.4E-03
Styrene	1.67E-04	7.3E-04
Tetrachloroethylene	1.2E-03	5.27E-3
Toluene	2.9E-03	1.27E-02
1,2,4 - Trichlorobenzene	1.62E-04	7.1E-04
Xylene	1.33E-04	5.84E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Ammonia	4.84	21.18
Formaldehyde	1.19E-04	5.21E-04

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.).

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 033	**Emission unit name:** No. 2 Causticizer	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Converts sodium Carbonate to sodium Hydroxide

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	3.42	14.96
Particulate Matter (PM_{10})	6.73	29.48
Total Particulate Matter (TSP)	6.73	29.48
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.18	0.81
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	4.7E-02	.206
Acrolein	8.17E-04	3.58E-03
Benzene	5.022E-05	2.2E-04
Hexane	3.68E-05	1.61E-04
Methanol	0.87	3.82
Methylene Chloride	2.05E-02	9.0E-02
Methyl Isobutyl Ketone	1.42E-04	6.2E-04
Phenol	4.0E-03	1.75E-02
Propionaldehyde	1.0E-03	4.4E-03
Styrene	1.67E-04	7.3E-04
Tetrachloroethylene	1.2E-03	5.27E-3
Toluene	2.9E-03	1.27E-02
1,2,4 - Trichlorobenzene	1.62E-04	7.1E-04
Xylene	1.33E-04	5.84E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Ammonia	4.84	21.18
Formaldehyde	1.19E-04	5.21E-04

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.).

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 034	**Emission unit name:** No. 3 Causticizer	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Converts sodium Carbonate to sodium Hydroxide

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	3.42	14.96
Particulate Matter (PM_{10})	6.73	29.48
Total Particulate Matter (TSP)	6.73	29.48
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.18	0.81
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	4.7E-02	.206
Acrolein	8.17E-04	3.58E-03
Benzene	5.022E-05	2.2E-04
Hexane	3.68E-05	1.61E-04
Methanol	0.87	3.82
Methylene Chloride	2.05E-02	9.0E-02
Methyl Isobutyl Ketone	1.42E-04	6.2E-04
Phenol	4.0E-03	1.75E-02
Propionaldehyde	1.0E-03	4.4E-03
Styrene	1.67E-04	7.3E-04
Tetrachloroethylene	1.2E-03	5.27E-3
Toluene	2.9E-03	1.27E-02
1,2,4 - Trichlorobenzene	1.62E-04	7.1E-04
Xylene	1.33E-04	5.84E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Ammonia	4.84	21.18
Formaldehyde	1.19E-04	5.21E-04

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.).

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 035	**Emission unit name:** White Liquor Clarifier	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Separate white liquor from lime mud

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.28	1.22
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Benzene	4.68E-04	2.05E-03
Formaldehyde	0.036	0.156
Methanol	0.242	1.06
Styrene	7.92E-04	3.47E-03
Regulated Pollutants other than Criteria and HAP		
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 036	**Emission unit name:** Lime Slaker #6	**List any control devices associated with this emission unit.** No. 6 Slaker Scrubber
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Slaking of lime with water		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr		
Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	3.42	14.96
Particulate Matter (PM_{10})	6.73	29.48
Total Particulate Matter (TSP)	6.73	29.48
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.18	0.81
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	4.7E-02	.206
Acrolein	8.17E-04	3.58E-03
Benzene	5.022E-05	2.2E-04
Hexane	3.68E-05	1.61E-04
Methanol	0.87	3.82
Methylene Chloride	2.05E-02	9.0E-02
Methyl Isobutyl Ketone	1.42E-04	6.2E-04
Phenol	4.0E-03	1.75E-02
Propionaldehyde	1.0E-03	4.4E-03
Styrene	1.67E-04	7.3E-04
Tetrachloroethylene	1.2E-03	5.27E-3
Toluene	2.9E-03	1.27E-02
1,2,4 - Trichlorobenzene	1.62E-04	7.1E-04
Xylene	1.33E-04	5.84E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY
Ammonia	4.84	21.18
Formaldehyde	1.19E-04	5.21E-04

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.).

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
031	C.S.R. 45-7-4.1	4.1.6	PM	6.83 lbs/hr

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
031	4.1.6	Recordkeeping	4.2.2, 4.4.6

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 037	**Emission unit name:** Mud Washer	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Separate lime mud from weak liquor

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.03	0.13
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Benzene	7.44E-05	3.26E-04
Methanol	0.03	0.13
Methyl isobutyl Ketone	7.76E-06	3.4E-05
Styrene	7.44E-06	3.26E-05
Tetrachloroethylene	4.6E-05	2.05E-04
Toluene	9.2E-06	4.04E-05
1,2, 4 Trichlorobenzene	1.9E-04	8.5E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 038	**Emission unit name:** No. 3 Mud Filter Tank	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Lime Mud storage

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.03	0.13
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Benzene	7.44E-05	3.26E-04
Methanol	0.03	0.13
Methyl isobutyl Ketone	7.76E-06	3.4E-05
Styrene	7.44E-06	3.26E-05
Tetrachloroethylene	4.6E-05	2.05E-04
Toluene	9.2E-06	4.04E-05
1,2, 4 Trichlorobenzene	1.9E-04	8.5E-04

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 039	**Emission unit name:** No. 1 Vacuum Pump	**List any control devices associated with this emission unit.**
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Extracts water from lime mud		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr		
Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.71	3.1
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	1.23E-01	5.4E-01
Benzene	6.39E-05	2.8E-04
Carbon Disulfide	6.14E-04	2.69E-03
Hexane	1.08E-03	4.75E-03
Methanol	0.566	2.48
Methylene Chloride	4.02E-04	1.76E-03
Methyl isobutyl Ketone	2.26E-03	9.92E-03
Phenol	8.4E-03	3.68E-02
Propionaldehyde	5.5E-03	2.41E-02
Styrene	2.24E-04	9.8E-04
Toluene	1.62E-04	7.08E-04
1,2,4 Trichlorobenzene	4.91E-03	2.15E-02
Xylene	3.72E-04	1.63E-03

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 040	**Emission unit name:** No. 2 Vacuum Pump	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Extracts water from lime mud

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.71	3.1
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	1.23E-01	5.4E-01
Benzene	6.39E-05	2.8E-04
Carbon Disulfide	6.14E-04	2.69E-03
Hexane	1.08E-03	4.75E-03
Methanol	0.566	2.48
Methylene Chloride	4.02E-04	1.76E-03
Methyl isobutyl Ketone	2.26E-03	9.92E-03
Phenol	8.4E-03	3.68E-02
Propionaldehyde	5.5E-03	2.41E-02
Styrene	2.24E-04	9.8E-04
Toluene	1.62E-04	7.08E-04
1,2,4 Trichlorobenzene	4.91E-03	2.15E-02
Xylene	3.72E-04	1.63E-03

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 041	**Emission unit name:** No. 1 Mud Filter	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
No. 1 mud wash filter hood exhaust

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.2	0.87
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	0.025	0.11
Acrolein	8.61E-04	3.77E-03
Benzene	1.94E-04	8.5E-04
Formaldehyde	2.3E-03	0.01
Hexane	2.35E-04	1.03E-03
Methanol	0.16	0.72
Methylene Chloride	6.78E-04	2.97E-03
Methyl isobutyl Ketone	9.22E-04	4.04E-03
Styrene	1.33E-04	5.81E-04
Tetrachloroethylene	2.7E-04	1.2E-03
Toluene	2.1E-03	9.21E-03
1,2, 4 Trichlorobenzene	1.39E-04	6.09E-04
1,1,1 Trichloroethane	9.6E-04	4.2E-03
Trichloroethylene	1.0E-04	4.39E-04
Xylene	5.5E-04	2.41E-03

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 042	**Emission unit name:** No. 2 Mud Filter	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
No. 2 mud wash filter hood exhaust

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.2	0.87
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	0.025	0.11
Acrolein	8.61E-04	3.77E-03
Benzene	1.94E-04	8.5E-04
Formaldehyde	2.3E-03	0.01
Hexane	2.35E-04	1.03E-03
Methanol	0.16	0.72
Methylene Chloride	6.78E-04	2.97E-03
Methyl isobutyl Ketone	9.22E-04	4.04E-03
Styrene	1.33E-04	5.81E-04
Tetrachloroethylene	2.7E-04	1.2E-03
Toluene	2.1E-03	9.21E-03
1,2, 4 Trichlorobenzene	1.39E-04	6.09E-04
1,1,1 Trichloroethane	9.6E-04	4.2E-03
Trichloroethylene	1.0E-04	4.39E-04
Xylene	5.5E-04	2.41E-03

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 043	**Emission unit name:** Mud Filter Filtrate Tank	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Storage Tank for lime mud filtration

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.2	0.87
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	0.025	0.11
Acrolein	8.61E-04	3.77E-03
Benzene	1.94E-04	8.5E-04
Formaldehyde	2.3E-03	0.01
Hexane	2.35E-04	1.03E-03
Methanol	0.16	0.72
Methylene Chloride	6.78E-04	2.97E-03
Methyl isobutyl Ketone	9.22E-04	4.04E-03
Styrene	1.33E-04	5.81E-04
Tetrachloroethylene	2.7E-04	1.2E-03
Toluene	2.1E-03	9.21E-03
1,2, 4 Trichlorobenzene	1.39E-04	6.09E-04
1,1,1 Trichloroethane	9.6E-04	4.2E-03
Trichloroethylene	1.0E-04	4.39E-04
Xylene	5.5E-04	2.41E-03

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 044	**Emission unit name:** Calibration Tank	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Storage Tank for lime mud filter belt wash

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.2	0.87
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	0.025	0.11
Acrolein	8.61E-04	3.77E-03
Benzene	1.94E-04	8.5E-04
Formaldehyde	2.3E-03	0.01
Hexane	2.35E-04	1.03E-03
Methanol	0.16	0.72
Methylene Chloride	6.78E-04	2.97E-03
Methyl isobutyl Ketone	9.22E-04	4.04E-03
Styrene	1.33E-04	5.81E-04
Tetrachloroethylene	2.7E-04	1.2E-03
Toluene	2.1E-03	9.21E-03
1,2, 4 Trichlorobenzene	1.39E-04	6.09E-04
1,1,1 Trichloroethane	9.6E-04	4.2E-03
Trichloroethylene	1.0E-04	4.39E-04
Xylene	5.5E-04	2.41E-03

Emissions Data

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 045	**Emission unit name:** No. 16 Slaker Feeder	**List any control devices associated with this emission unit.**
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Feeder System for lime slaker		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr		
Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (pb)		
Particulate Matter ($PM_{2.5}$)	0.62	2.73
Particulate Matter (PM_{10})	1.98	8.68
Total Particulate Matter (TSP)	9.86	43.2
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP		
	PPH	TPY

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 046	**Emission unit name:** No. 6 Slaker Feeder	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Feeder System for lime slaker

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 16.17 tons/hr

Maximum Hourly Throughput: 16.17 tons/hr	**Maximum Annual Throughput:** 141,649.2 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (pb)		
Particulate Matter ($PM_{2.5}$)	0.62	2.73
Particulate Matter (PM_{10})	1.98	8.68
Total Particulate Matter (TSP)	9.86	43.2
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP		
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 047	**Emission unit name:** Limestone Unloading	**List any control devices associated with this emission unit.**
Provide a description of the emission unit (type, method of operation, design parameters, etc.): Limestone unloading		
Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY
Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 50.00 tons/hr		
Maximum Hourly Throughput: 50.00 tons/hr	**Maximum Annual Throughput:** 438,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (pb)		
Particulate Matter ($PM_{2.5}$)	1.0	4.38
Particulate Matter (PM_{10})	1.0	4.38
Total Particulate Matter (TSP)	3.0	13.14
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP		
	PPH	TPY

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 048	**Emission unit name:** Pebble Lime Unloading	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Pebble Lime unloading

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 20.00 tons/hr

Maximum Hourly Throughput: 20.00 tons/hr	**Maximum Annual Throughput:** 175,000 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (pb)		
Particulate Matter ($PM_{2.5}$)	0.17	0.74
Particulate Matter (PM_{10})	1.7	7.44
Total Particulate Matter (TSP)	24.2557	106.24
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP		
	PPH	TPY

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 049	**Emission unit name:** Auxiliary Gas Drive Motor	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Gasoline-fired engine used to drive the lime kiln in the event of a power outage. Only used in an emergency.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 0.16 mm Btu/hr

Maximum Hourly Throughput: 0.228 gals/hr	**Maximum Annual Throughput:** 2,000 gals/yr	**Maximum Operating Schedule:** 8,760 hours per year

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

Does this emission unit combust fuel? _X_ Yes ___ No	**If yes, is it?** ___ Indirect Fired _X_ Direct Fired
Maximum design heat input and/or maximum horsepower rating: 0.16 mm BTU/hr	**Type and Btu/hr rating of burners:** Gasoline 135 mm BTU/hr per 1,000 gals burned

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.
Gasoline

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

Fuel Type	Max. Sulfur Content	Max. Ash Content	BTU Value
Gasoline			135 mm Btu/hr
			per 1,000 gals burned

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)	7.831	34.3
Nitrogen Oxides (NO_X)	0.20319	0.89
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})	0.0114155	0.05
Total Particulate Matter (TSP)	0.0114155	0.05
Sulfur Dioxide (SO_2)	0.0114155	0.05
Volatile Organic Compounds (VOC)	0.20319	0.89
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP		
	PPH	

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.).

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 050	**Emission unit name:** Access Roads	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Roads used to haul fly ash and miscellaneous raw materials.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 4.25 tons/hr

Maximum Hourly Throughput: 4.25 tons/hr	**Maximum Annual Throughput:** 37,230 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	2.84	12.44
Particulate Matter (PM_{10})	2.84	12.44
Total Particulate Matter (TSP)	9.56	41.88
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP		
	PPH	

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.).

Factor 1.0 lb/Ton
Table 10.3-1 AP 42

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 051	**Emission unit name:** Fly Ash Handling	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Boiler fly ash handling system

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 60.00 tons/hr

Maximum Hourly Throughput: 65.00 tons/hr	**Maximum Annual Throughput:** 162,240 Tons/yr	**Maximum Operating Schedule:** 2,496 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	1.6E-02	1.95E-02
Particulate Matter (PM_{10})	1.6E-02	1.95E-02
Total Particulate Matter (TSP)	1.6E-02	1.95E-02
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP		
	PPH	

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.).

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Applicable Requirement	Permit Condition Number	Pollutant Parameter	Limit/ Standard
051	C.S.R. 45-2-5.1	4.1.10	Fugitive Emissions	Control Device

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Emission Point	Permit Condition Number	Method	Condition Number
051	4.1.10	Conduct as Required	4.1.10

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 052	**Emission unit name:** Parts Washer	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Parts degreasing.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 1.00 Gal/hr

Maximum Hourly Throughput: 1.00 Gal/hr	**Maximum Annual Throughput:** 8,760 Gal/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.011	0.05

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

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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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 054	**Emission unit name:** Cotton Roll Grinding	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Grinding lathe removes defects on cotton rolls used in papermaking

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1989	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 3 rolls/day

Maximum Hourly Throughput: 3 rolls/day	**Maximum Annual Throughput:** 1,095 rolls/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	0.03	0.15
Particulate Matter (PM_{10})	0.03	0.15
Total Particulate Matter (TSP)	0.03	0.15
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP		
	PPH	

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.).

Factor 1.0 lb/Ton
Table 10.3-1 AP 42

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 055	**Emission unit name:** Paved Roads	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Paved access roads to receiving warehouse.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 2.396 tons/hr

Maximum Hourly Throughput: 2.396 tons/hr	**Maximum Annual Throughput:** 20,988.96 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)	0.27	1.19
Particulate Matter (PM_{10})	0.27	1.19
Total Particulate Matter (TSP)	1.41	6.2
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)		
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Regulated Pollutants other than Criteria and HAP		
	PPH	

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.).

Factor 1.0 lb/Ton
Table 10.3-1 AP 42

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 057	**Emission unit name:** Bark Unloading	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Unloading of bark onto storage pile.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 93.30 tons/hr

Maximum Hourly Throughput: 93.30 tons/hr	**Maximum Annual Throughput:** 817,308 Toms/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

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

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

Applicable Requirements

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

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 056	**Emission unit name:** Parts Washer	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Parts degreasing.

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1989	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 1.00 Gal/hr

Maximum Hourly Throughput: 1.00 Gal/hr	**Maximum Annual Throughput:** 8,760 Gal/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:** 0.00

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.011	0.05

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

NCASI Bulletins
884 (Aug./2004)
175
646 (Feb 1993)
NCASI SARA 313 Emission Factor Summary

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 058	**Emission unit name:** Liquor Storage Tank	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Storage of black or white liquor from MD pulping operations

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1965	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 20.00 tons/hr

Maximum Hourly Throughput: 20.00 tons/hr	**Maximum Annual Throughput:** 175,200 Tons/yr	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data		
Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Lead (Pb)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	0.669	2.93
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY
Acetaldehyde	1.8E-03	7.88E-03
Acrolein	5.89E-05	2.58E-04
Benzene	6.1E-05	2.67E-04
Methanol	3.2E-02	0.14
Methyl Isobutyl Ketone	3.9E-05	1.71E-04
Styrene	4.2E-05	1.84E-04
Toluene	1.5E-05	6.57E-05

Emissions Data

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

Regulated Pollutants other than Criteria and HAP	Potential Emissions	
	PPH	TPY

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

NCASI Bulletins
884 (Aug./2004)
175
646 (Feb 1993)
NCASI SARA 313 Emission Factor Summary
AP42 Tables
11.17-4
13.2.2
13.2.4
10.3-1

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 060	**Emission unit name:** No. 2 Fuel Oil Tank	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
No. 2 Fuel oil storage tank for Kiln

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 1,500 gallons

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	5.7E-03	0.025
Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).
NCASI Bulletins
884 (Aug./2004)
175
646 (Feb 1993)
NCASI SARA 313 Emission Factor Summary

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT E - Emission Unit Form

Emission Unit Description

Emission unit ID number: 061	**Emission unit name:** Auxiliary Gas Drive Motor Fuel Tank	**List any control devices associated with this emission unit.**

Provide a description of the emission unit (type, method of operation, design parameters, etc.):
Gasoline fuel tank for auxiliary Gas drive Motor

Manufacturer:	**Model number:**	**Serial number:**
Construction date: MM/DD/YYYY	**Installation date:** 01/01/1966	**Modification date(s):** MM/DD/YYYY

Design Capacity (examples: furnaces - tons/hr, tanks - gallons): 150 gallons

Maximum Hourly Throughput:	**Maximum Annual Throughput:**	**Maximum Operating Schedule:** 8,760 hours per year

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 rating of burners:**

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

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

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

Emissions Data

Criteria Pollutants	Potential Emissions	
	PPH	TPY
Carbon Monoxide (CO)		
Nitrogen Oxides (NO_X)		
Particulate Matter ($PM_{2.5}$)		
Particulate Matter (PM_{10})		
Total Particulate Matter (TSP)		
Sulfur Dioxide (SO_2)		
Volatile Organic Compounds (VOC)	5.7E-03	0.025

Hazardous Air Pollutants	Potential Emissions	
	PPH	TPY

List the method(s) used to calculate the potential emissions (include dates of any stack tests conducted, versions of software used, source and dates of emission factors, etc.).
NCASI Bulletins
884 (Aug./2004)
175
646 (Feb 1993)
NCASI SARA 313 Emission Factor Summary

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.

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

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.)

All Facility Wide applicable requirements are listed in Section 2: Number. 20.

Are you in compliance with all applicable requirements for this emission unit? X Yes ___No

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

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 001 Kiln SO2 Control	**List all emission units associated with this control device.** Rotary Lime Kiln	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber ___ Single Cyclone

___ Carbon Drum(s) ___ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare _X_ Other (describe) Inherently scrubs SO2

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
SO_2	100%	97%
		Process inherently scrubs SO_2
		By lime absorption

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

Inlet parameters
Average – 33,5001 ft^3/min, Temp – 400°F
Maximum – 60,000 ft^3/min, Temp – 550°F
Outlet parameters
Average – 33,5001 ft^3/min, Temp – 400°F
Maximum – 60,000 ft^3/min, Temp – 550°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Describe the parameters monitored and/or methods used to indicate performance of this control device.

N/A

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 001 Kiln Venturi Scrubber	**List all emission units associated with this control device.** Rotary Lime Kiln	
Manufacturer: AirPol	**Model number:**	**Installation date:** 01/01/1997

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter	_X_ Venturi Scrubber	___ Multiclone
___ Carbon Bed Adsorber	___ Packed Tower Scrubber	___ Single Cyclone
___ Carbon Drum(s)	___ Other Wet Scrubber	___ Cyclone Bank
___ Catalytic Incinerator	___ Condenser	___ Settling Chamber
___ Thermal Incinerator	___ Flare	___ Other (describe)
___ Wet Plate Electrostatic Precipitator		___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
particulate	100%	99.88%
SO_2	100%	95.0% *
		Process inherently scrubs SO_2
lead compounds	100%	99.88%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Gas flow rate – 70,000ft^3/min,
Temp – 500^oF,
16PSIA
Pressure Drop – 18-30 inches H_2O

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions Limitations or Standards for - post 11/15/90 NSPS or NESHAP standards, since those standards have been and will be designed with monitoring that provides a reasonable assurance of compliance.

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.1.13

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 2C Silo Bin Filter Vent	**List all emission units associated with this control device.** Particulate matter	
Manufacturer: Nol-Tec	**Model number:** 84HPRC32	**Installation date:** 09/1/2008

Type of Air Pollution Control Device:

__X Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber __ Single Cyclone

___ Carbon Drum(s) ___ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare __ Other (describe)

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	99.9%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Gas flow ratw
Average – 1,100 ACFM Temp – ambient ^{o}F
Presure Drop
High 6 in. H2O
Low 0.5 in. H2O
Number of bags – 32(cartridges)

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
This source does not have potential pre-control emissions that exceed or are equivalent to the major source threshold.

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 3C Densi-Filter	**List all emission units associated with this control device.** Particulate matter	
Manufacturer: Matrix	**Model number:** **FDCGX26**	**Installation date:** 09/1/2008

Type of Air Pollution Control Device:

__X Baghouse/Fabric Filter	___ Venturi Scrubber	___ Multiclone
___ Carbon Bed Adsorber	___ Packed Tower Scrubber	__ Single Cyclone
___ Carbon Drum(s)	___ Other Wet Scrubber	___ Cyclone Bank
___ Catalytic Incinerator	___ Condenser	___ Settling Chamber
___ Thermal Incinerator	___ Flare	__ Other (describe)
___ Wet Plate Electrostatic Precipitator		___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	99.9%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Gas flow ratw
Average – 200 ACFM Temp – ambient ^{o}F
Presure Drop
High 8 in. H2O
Low 1.0 in. H2O
Number of bags – 6(cartridges)

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
This source does not have potential pre-control emissions that exceed or are equivalent to the major source threshold.

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 018 Chipper Cyclone	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1985

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter	___ Venturi Scrubber	___ Multiclone
___ Carbon Bed Adsorber	___ Packed Tower Scrubber	_X_ Single Cyclone
___ Carbon Drum(s)	___ Other Wet Scrubber	___ Cyclone Bank
___ Catalytic Incinerator	___ Condenser	___ Settling Chamber
___ Thermal Incinerator	___ Flare	___ Other (describe)
___ Wet Plate Electrostatic Precipitator		___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	95.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Inlet parameters
Average – 39,760 ft^3/min, Temp – 75°F
Maximum –75,000 ft^3/min, Temp – 120°F
Outlet parameters
Average – 39,760 ft^3/min, Temp – 75°F
Maximum –75,000 ft^3/min, Temp – 120°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? _X__ Yes __ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a daily Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 023 Screening Fabric Filter	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter
___ Venturi Scrubber
___ Multiclone
___ Carbon Bed Adsorber
___ Packed Tower Scrubber
___ Single Cyclone
___ Carbon Drum(s)
___ Other Wet Scrubber
___ Cyclone Bank
___ Catalytic Incinerator
___ Condenser
___ Settling Chamber
___ Thermal Incinerator
___ Flare
_X_ Other (describe) Fabric filter: low temp
___ Wet Plate Electrostatic Precipitator
___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	99.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Inlet parameter
Average – 40,000 ft^3/min, Temp – 75°F
Maximum – 80,000 ft^3/min, Temp – 120°F
Outlet parameters
Average – 40,000 ft^3/min, Temp – 75°F
Maximum – 80,000 ft^3/min, Temp – 120°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? _X__ Yes __ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a daily Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 024 Sawdust Building Cyclones	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1985

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter	___ Venturi Scrubber	___ Multiclone
___ Carbon Bed Adsorber	___ Packed Tower Scrubber	_X_ Single Cyclone
___ Carbon Drum(s)	___ Other Wet Scrubber	___ Cyclone Bank
___ Catalytic Incinerator	___ Condenser	___ Settling Chamber
___ Thermal Incinerator	___ Flare	__ Other (describe)
___ Wet Plate Electrostatic Precipitator		___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	80.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

Inlet parameters
Average – 3,938 ft^3/min, Temp – 75°F
Maximum – 8,436 ft^3/min, Temp – 120°F
Outlet parameters
Average – 3,938 ft^3/min, Temp – 75°F
Maximum – 8,436 ft^3/min, Temp – 120°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 025 Sawdust Loading Cyclones	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1985

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber _X_ Single Cyclone

___ Carbon Drum(s) ___ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare __ Other (describe)

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, $PM_{10,}$ $PM_{2.5}$	100%	80.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

Inlet parameters
Average – 2,039 ft^3/min, Temp – 75°F
Maximum – 8,436 ft^3/min, Temp – 120°F
Outlet parameters
Average – 2,039 ft^3/min, Temp – 75°F
Maximum – 8,436 ft^3/min, Temp – 120°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 026 Rechipper Cyclone	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber _X Single Cyclone

___ Carbon Drum(s) ___ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare __ Other (describe)

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	95.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Inlet parameters
Average – 4,000 ft^3/min, Temp – 75°F
Maximum – 8,000 ft^3/min, Temp – 120°F
Outlet parameters
Average – 4,000 ft^3/min, Temp – 75°F
Maximum – 8,000 ft^3/min, Temp – 120°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 031 No. 16 Slaker Scrubber	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber ___ Single Cyclone

___ Carbon Drum(s) _X_ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare __ Other (describe)

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	90.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

Inlet parameter

Average – 3,535 ft^3/min, Temp – 285°F Scrubbing Agent flow rate: 20 gal/min -Average

Maximum – 7,100 ft^3/min, Temp – 345°F Scrubbing Agent flow rate: 30 gal/min - Maximum

Outlet parameters

Average – 3,535 ft^3/min, Temp – 161°F

Maximum – 7,100 ft^3/min, Temp – 210°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission

Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.

WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 036 No. 6 Slaker Scrubber	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter	___ Venturi Scrubber	___ Multiclone
___ Carbon Bed Adsorber	___ Packed Tower Scrubber	___ Single Cyclone
___ Carbon Drum(s)	_X_ Other Wet Scrubber	___ Cyclone Bank
___ Catalytic Incinerator	___ Condenser	___ Settling Chamber
___ Thermal Incinerator	___ Flare	__ Other (describe)
___ Wet Plate Electrostatic Precipitator		___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	90.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).

Inlet parameter
Average – 3,685 ft^3/min, Temp – 315^oF
Maximum – 7,400 ft^3/min, Temp – 380^oF
Outlet parameters
Average – 2,948 ft^3/min, Temp – 160^oF
Maximum – 5,900 ft^3/min, Temp – 210^oF

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 045 No. 16 Slaker Feeder Enclosure	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber ___ Single Cyclone

___ Carbon Drum(s) ___ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare _X_ Other (describe)process Enclosed

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	60.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Inlet parameter
Average – 0.0 ft^3/min, Temp – 68°F
Maximum – 0.0 ft^3/min, Temp – 210°F
Outlet parameters
Average – 0.0 ft^3/min, Temp – 68°F
Maximum – 0.0 ft^3/min, Temp – 210°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 046 No. 6 Slaker Feeder Enclosure	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber ___ Single Cyclone

___ Carbon Drum(s) ___ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare _X_ Other (describe)process Enclosed

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	60.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Inlet parameter
Average – 0.0 ft^3/min, Temp – 68°F
Maximum – 0.0 ft^3/min, Temp – 210°F
Outlet parameters
Average – 0.0 ft^3/min, Temp – 68°F
Maximum – 0.0 ft^3/min, Temp – 210°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 047 Limestone Unloading Enclosure	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber ___ Single Cyclone

___ Carbon Drum(s) ___ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare _X_ Other (describe)process Enclosed

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	95.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Inlet parameter
Average – 0.0 ft^3/min, Temp – 68°F
Maximum – 0.0 ft^3/min, Temp – 210°F
Outlet parameters
Average – 0.0 ft^3/min, Temp – 68°F
Maximum – 0.0 ft^3/min, Temp – 210°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

ATTACHMENT G - Air Pollution Control Device Form

Control device ID number: 048 Pebble Lime Unloading Enclosure	**List all emission units associated with this control device.** Particulate matter	
Manufacturer:	**Model number:**	**Installation date:** 01/01/1966

Type of Air Pollution Control Device:

___ Baghouse/Fabric Filter ___ Venturi Scrubber ___ Multiclone

___ Carbon Bed Adsorber ___ Packed Tower Scrubber ___ Single Cyclone

___ Carbon Drum(s) ___ Other Wet Scrubber ___ Cyclone Bank

___ Catalytic Incinerator ___ Condenser ___ Settling Chamber

___ Thermal Incinerator ___ Flare _X_ Other (describe)process Enclosed

___ Wet Plate Electrostatic Precipitator ___ Dry Plate Electrostatic Precipitator

List the pollutants for which this device is intended to control and the capture and control efficiencies.

Pollutant	Capture Efficiency	Control Efficiency
TSP, PM_{10}, $PM_{2.5}$	100%	95.0%

Explain the characteristic design parameters of this control device (flow rates, pressure drops, number of bags, size, temperatures, etc.).
Inlet parameter
Average – 0.0 ft^3/min, Temp – 68°F
Maximum – 0.0 ft^3/min, Temp – 210°F
Outlet parameters
Average – 0.0 ft^3/min, Temp – 68°F
Maximum – 0.0 ft^3/min, Temp – 210°F

Is this device subject to the CAM requirements of 40 C.F.R. 64? ___ Yes _X_ No

If Yes, **Complete ATTACHMENT H**

If No**, Provide justification.**

Exempt Emission
Emissions 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 70.4(b)(12).

Describe the parameters monitored and/or methods used to indicate performance of this control device.
WV Title V permit condition 4.2.2 Requires a weekly Visual Emissions check.

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 http://www.epa.gov/ttn/emc/cam.html

CAM APPLICABILITY DETERMINATION

1) Does the facility have a PSEU (Pollutant-Specific Emissions Unit considered separately with respect to **EACH** regulated air pollutant) that is subject to CAM (40 CFR Part 64), which must be addressed in this CAM plan submittal? To determine applicability, a PSEU must meet **all** of the following criteria (*If No, then the remainder of this form need not be completed*): ☒ YES ☐ NO

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 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

2) Mark the appropriate box below as to why this CAM plan is being submitted as part of an application for a Title V permit:

☒ RENEWAL APPLICATION. **ALL** PSEUs for which a CAM plan has NOT yet been approved need to be addressed in this CAM plan submittal.

☐ INITIAL APPLICATION (submitted after 4/20/98). **ONLY** 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) [a] BACKGROUND DATA AND INFORMATION					
Complete the following table for **all** 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	DESCRIPTION	POLLUTANT	CONTROL DEVICE	[b] EMISSION LIMITATION or STANDARD	[c] MONITORING REQUIREMENT
018 Chipper	Wood Chipping Operation	PM	Cyclone	45CSR 7A 50lbs/hr	Visible emissions Daily check for visible emissions
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

[a] 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).

[c] 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 **EACH** 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 EACH indicator selected for EACH 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: **018 Chipper**	**4b) Pollutant:** **PM**	**4c) [a] Indicator No. 1:** Visible Emissions	**4d) [a] Indicator No. 2:**
5a) GENERAL CRITERIA Describe the MONITORING APPROACH used to measure the indicators:		Observation for Visible Emissions	
[b] Establish the appropriate INDICATOR RANGE or the procedures for establishing the indicator range which provides a reasonable assurance of compliance:		Any visible emissions	
5b) PERFORMANCE CRITERIA Provide the SPECIFICATIONS FOR OBTAINING REPRESENTATIVE DATA, such as detector location, installation specifications, and minimum acceptable accuracy:		Operator will perform a daily visible inspection of the cyclone	
[c] For new or modified monitoring equipment, provide VERIFICATION PROCEDURES, including manufacturer's recommendations, TO CONFIRM THE OPERATIONAL STATUS of the monitoring:		N/A	
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.):		Visible Emissions Training	
[d] Provide the MONITORING FREQUENCY:		Once per 24-hour period	
Provide the DATA COLLECTION PROCEDURES that will be used:		Viisible Emission Observation Forms	
Provide the DATA AVERAGING PERIOD for the purpose of determining whether an excursion or exceedance has occurred:		Daily	

[a] 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.

[b] 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.

[c] 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.

[d] 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 **EACH** 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 EACH indicator and monitoring approach and EACH indicator range in order to meet the submittal requirements specified in 40 CFR §64.4.

6a) PSEU Designation:	6b) Regulated Air Pollutant:
018 Chipper	PM

7) **INDICATORS AND THE MONITORING APPROACH**: Provide the rationale and justification for the selection of the indicators and the monitoring approach used to measure the indicators. Also provide any data supporting the rationale and justification. Explain the reasons for any differences between the verification of operational status or the quality assurance and control practices proposed, and the manufacturer's recommendations. (If additional space is needed, attach and label accordingly with the appropriate PSEU designation and pollutant):

Visible Emissions are an indicator of particulate emissions.
If visible emissions are present, operations will be contacted to correct problem.

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 ENGINEERING ASSESSMENTS. Depending on which method is being used for each indicator range, include the specific information required below for that 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 as expeditiously as practicable after approval of this CAM plan, except that in no case shall the schedule for 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 and historical monitoring data, because factors specific to the type of monitoring, control device, or PSEU make compliance or performance testing unnecessary). The rationale and justification shall INCLUDE documentation demonstrating that compliance testing is not required to establish the indicator range.

RATIONALE AND JUSTIFICATION:

Visible Emissions Observations are an appropriate indicator to a PM source

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 http://www.epa.gov/ttn/emc/cam.html

CAM APPLICABILITY DETERMINATION

1) Does the facility have a PSEU (Pollutant-Specific Emissions Unit considered separately with respect to **EACH** regulated air pollutant) that is subject to CAM (40 CFR Part 64), which must be addressed in this CAM plan submittal? To determine applicability, a PSEU must meet **all** of the following criteria (*If No, then the remainder of this form need not be completed*): ☒ YES ☐ NO

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 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

2) Mark the appropriate box below as to why this CAM plan is being submitted as part of an application for a Title V permit:

☒ RENEWAL APPLICATION. **ALL** PSEUs for which a CAM plan has NOT yet been approved need to be addressed in this CAM plan submittal.

☐ INITIAL APPLICATION (submitted after 4/20/98). **ONLY** 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) [a] BACKGROUND DATA AND INFORMATION					
Complete the following table for **all** 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	DESCRIPTION	POLLUTANT	CONTROL DEVICE	[b] EMISSION LIMITATION or STANDARD	[c] MONITORING REQUIREMENT
023 Screen House	Wood Chip Screening Operation	PM	Screening Fabric Filter	45CSR 7A 50lbs/hr	Visible emissions Daily check for visible emissions
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

[a] 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).

[c] 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 **EACH** 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 EACH indicator selected for EACH 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: **023 Screen House**	**4b) Pollutant:** **PM**	**4c) [a] Indicator No. 1:** Visible Emissions	**4d) [a] Indicator No. 2:**
5a) GENERAL CRITERIA Describe the MONITORING APPROACH used to measure the indicators:		Observation for Visible Emissions	
[b] Establish the appropriate INDICATOR RANGE or the procedures for establishing the indicator range which provides a reasonable assurance of compliance:		Any visible emissions	
5b) PERFORMANCE CRITERIA Provide the SPECIFICATIONS FOR OBTAINING REPRESENTATIVE DATA, such as detector location, installation specifications, and minimum acceptable accuracy:		Operator will perform a daily visible inspection of the cyclone	
[c] For new or modified monitoring equipment, provide VERIFICATION PROCEDURES, including manufacturer's recommendations, TO CONFIRM THE OPERATIONAL STATUS of the monitoring:		N/A	
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.):		Visible Emissions Training	
[d] Provide the MONITORING FREQUENCY:		Once per 24-hour period	
Provide the DATA COLLECTION PROCEDURES that will be used:		Viisible Emission Observation Forms	
Provide the DATA AVERAGING PERIOD for the purpose of determining whether an excursion or exceedance has occurred:		Daily	

[a] 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.

[b] 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.

[c] 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.

[d] 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 **EACH** 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 EACH indicator and monitoring approach and EACH indicator range in order to meet the submittal requirements specified in 40 CFR §64.4.

6a) PSEU Designation:	6b) Regulated Air Pollutant:
023 Screen House	PM

7) **INDICATORS AND THE MONITORING APPROACH**: Provide the rationale and justification for the selection of the indicators and the monitoring approach used to measure the indicators. Also provide any data supporting the rationale and justification. Explain the reasons for any differences between the verification of operational status or the quality assurance and control practices proposed, and the manufacturer's recommendations. (If additional space is needed, attach and label accordingly with the appropriate PSEU designation and pollutant):

Visible Emissions are an indicator of particulate emissions.
If visible emissions are present, operations will be contacted to correct problem.

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 ENGINEERING ASSESSMENTS. Depending on which method is being used for each indicator range, include the specific information required below for that 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 as expeditiously as practicable after approval of this CAM plan, except that in no case shall the schedule for 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 and historical monitoring data, because factors specific to the type of monitoring, control device, or PSEU make compliance or performance testing unnecessary). The rationale and justification shall INCLUDE documentation demonstrating that compliance testing is not required to establish the indicator range.

RATIONALE AND JUSTIFICATION:

Visible Emissions Observations are an appropriate indicator to a PM source