|  |
| --- |
| **1. Facility Information** |
| Agency Interest Name**Agency Interest Name** | Agency Interest (AI) Number **000000** |
| Owner**Company Name** | Permit Number (If Applicable)**0000-000000-00** |
| Operator (If Operator Is The Responsible Party)**ABC123** |

 **2. Applicability Questions –** This completed form shall be included with the air permit application. If **yes** is checked for any of the following questions, the facility may **not** apply for a general permit.

|  |
| --- |
| Is this facility located in an ozone non-attainment area and have emissions exceeding those listed below: |
|  | Pollutant | Emissions |  |
|  | PM10 | 15 |  |
|  | SO2 | 40 |  |
|  | NOX | 20 |  |
|  | CO | 90 |  |
|  | Total VOC | 20 |  |
|  | Total TAPs | 20 |  |
| [ ]  Yes | [ ]  No |  |
| Is this facility located in a parish **other than** an ozone non-attainment area and have emissions exceeding those listed below: |
|  | Pollutant | Emissions |  |
|  | PM10 | 15 |  |
|  | SO2 | 40 |  |
|  | NOX | 90 |  |
|  | CO | 90 |  |
|  | Total VOC | 90 |  |
|  | Total TAPs | 20 |  |
| [ ]  Yes | [ ]  No |  |  |
| Are any of the following true?1. The facility emits any single toxic air pollutant (TAP) and the amount is greater than eight (8) tons per year.
2. The facility emits any single TAP and the amount is greater than the value listed in Table 1 of Section III of the Facility Wide Emission Limitations of the Surface Coating and Fabrication General Permit.
3. The facility emits a TAP **NOT** listed in Table 1 of Section III and the amount is greater than the minimum emission rate listed in Table 51.1 and 51.2 of LAC 33:III.Chapter 51.
 |
| [ ]  Yes | [ ]  No |  |
| Does this facility strip paint using chloromethane (MeCL)? |
| [ ]  Yes | [ ]  No |  |  |
| Does this facility have any stationary internal combustion engines fueled by gasoline, natural gas, or liquefied petroleum gas? |
| [ ]  Yes | [ ]  No |  |
| Does the facility have any storage vessels with a capacity greater than 10,000 gallons? |
| [ ]  Yes | [ ]  No |  |
|  |
| Is this facility a Part 70 Source as defined in LAC 33:III.502? |
| [ ]  Yes | [ ]  No |  |
| Is this facility subject to LAC 33:III.Chapter 59 – Chemical Accident Prevention or 40 CFR 68 – Chemical Accident Prevention Provisions? |
| [ ]  Yes | [ ]  No |  |
| Did this facility formerly operate as a major source which has Best Available Control Technology (BACT) or Lowest Achievable Emission Rate (LAER) controls installed? |
| [ ]  Yes | [ ]  No |  |
| Is this facility a portable facility requesting a portable source permit? |
| [ ]  Yes | [ ]  No |  |
| Does this facility have any sources which do not qualify as an Insignificant Activity per LAC 33:III.501.B.5 or a General Condition XII Activity and are not listed below? |
|  | * Abrasive Blasting
 | * Surface Coating
 | * Diesel Engines
 |  |
|  | * Welding
 | * Cutting
 | * Grinding
 |  |
|  | * Polishing
 | * Machining
 | * Dryers
 |  |
|  | * Unpaved Roads
 | * Storage Vessels
 | * Heaters
 |  |
|  | * Carbon Absorbers
 | * Thermal Oxidizers
 |  |  |
|  |  |  |  |  |
| [ ]  Yes | [ ]  No |  |  |  |
|  |

**3. Person Who Prepared this Form**

|  |
| --- |
| **Name**      |
| **Title** |
|       |
| **Company** |
|       |
| **Suite, mail drop, or division** |
|       |
| **Street or P.O. Box** |
|       |
| **City** | **State** | **Zip** |
|       |       |       |
| **Business phone** |
|       |
| **Email address** |
|       |