DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF AIR POLLUTION CONTROL 9TH FLOOR, L&C ANNEX 401 CHURCH STREET NASHVILLE, TN 37243-1531



MAJOR SOURCE OPERATING PERMIT APPLICATION COMPLIANCE DEMONSTRATION BY CONTINUOUS EMISSIONS MONITORING

1.	FACILITY NAME:		
2	CTACK ID OD ELOW DIA CDAM DOINT IDENTIFICATION (C)	2 PROCESS EMISSION SOURCE OR FUEL BURNING INSTALL ATION	
2.	STACK ID OR FLOW DIAGRAM POINT IDENTIFICATION (S):	3. PROCESS EMISSION SOURCE OR FUEL BURNING INSTALLATION OR INCINERATOR:	
4.	DESCRIPTION OF EQUIPMENT MONITORING POLLUTANT:		
4.			
	POLLUTANT BEING MONITORED:		
	4A. NAME OF MANUFACTURER:	4B. MODEL NUMBER:	
	4C. INSTALLATION YEAR: 4D. TYPE:		
	IN SITUEXTRACTIVEDILUTIONOTHER (SPECIFY):		
	4E. DESCRIBE HOW THE MONITOR WORKS:		
5.	DESCRIPTION OF EQUIPMENT MONITORING DILUENT:		
	DILUENT BEING MONITORED:		
	5A. NAME OF MANUFACTURER:	5B. MODEL NUMBER:	
	5C. INSTALLATION YEAR: 5D. TYPE:		
	IN SITUEXTRACTIVEO2CO2OTHER (SPECIFY):		
	5E. DESCRIBE HOW THE MONITOR WORKS:		
6.	6. DESCRIPTION OF EQUIPMENT MONITORING FLOW:		
	AMOUNT OF FLOW (DSCFM):		
	AMOUNT OF FLOW (DSCFM).		
	6A. NAME OF MANUFACTURER:	6B. MODEL NUMBER:	
	6C. INSTALLATION YEAR: 6D. TYPE:		
	DIFFERENTIAL PRESSURE THERMALOTHER (SPECIFY):		
7.	OPACITY (OR USE OF VISIBLE EMISSION EVALUATIONS IN LIEU OF OPACITY MONITORING):		
	7A. INDICATE WHICH IS USED.	* FOR "VISIBLE EMISSION EVALUATIONS" CHOICE,	
	MONITOR VISIBLE EMISSION EVALU	PROCEDURES WILL BE SPECIFIED AS A CONDITION IN THE SOURCE'S OPERATING PERMIT.	
	7B. OPACITY MONITOR (STATE THE NAME OF MANUFACTURER, MODEL NUMBER, AND YEAR OF INSTALLATION):		
8.	PAGE NUMBER: REVISION NUMBER:	DATE OF REVISION:	

CN-1007 RDA 1298

INSTRUCTIONS FOR APC FORM V.20 COMPLIANCE DEMONSTRATION BY CONTINUOUS EMISSION MONITORING

SOURCES THAT ARE REQUIRED TO OBTAIN A PERMIT UNDER PARAGRAPH 1200-3-9-.02(11) OF TENNESSEE AIR POLLUTION CONTROL REGULATIONS, MUST COMPLETE AND RETURN THIS FORM, IF APPLICABLE. APPLICATIONS ARE INCOMPLETE UNLESS ALL APPLICABLE INFORMATION REQUESTED HEREIN IS SUPPLIED. FAILURE TO SUPPLY ANY ADDITIONAL INFORMATION REQUESTED BY THE TECHNICAL SECRETARY TO ENABLE HIM TO ACT ON THE APPLICATION MAY RESULT IN DENIAL OF THIS APPLICATION. IF THERE IS ADDITIONAL INFORMATION THAT WILL NOT FIT ON A FORM, PLEASE DECLARE THE INFORMATION ON ADDITIONAL SHEET(S) AND ATTACH IT TO THE BACK OF THE ORIGINAL.

ONE FORM SHOULD BE INCLUDED WITH EACH STACK OR PROCESS THAT IS BEING MONITORED FOR COMPLIANCE.

IF YOU WISH TO PROVIDE ADDITIONAL INFORMATION TO DEFINE ALTERNATIVE OPERATING SCENARIOS OR DEFINE PERMIT TERMS AND CONDITIONS ALLOWING EMISSIONS TRADING UNDER A FEDERALLY ENFORCEABLE EMISSIONS CAP TO BE ESTABLISHED IN THE PERMIT, PLEASE DECLARE THE INFORMATION ON AN APC FORM(S) OR ON ADDITIONAL SHEET(S). UNLESS OTHERWISE REQUESTED AS A LIMITING CONDITION, PERMIT IS BASED ON 8,760 HRS/YR.

- ITEM 2 PROVIDE THE STACK IDENTIFICATION NUMBER OR ID OF THE STACK WHICH IS DIRECTLY ASSOCIATED WITH THE MONITOR. THIS NUMBER SHOULD ALSO APPEAR ON THE APC FORM V.3.
- ITEM 3 IDENTIFY THE EMISSION SOURCE.
- ITEM 4 IDENTIFY POLLUTANTS BEING MONITORED.
 - A. NAME OF MONITOR MANUFACTURER.
 - B. MODEL NUMBER OF MONITOR.
 - C. DATE NEW MONITOR WILL BE INSTALLED OR DATE EXISTING MONITOR WAS INSTALLED.
 - D. INDICATE THE TYPE OF MONITOR.
 - E. DESCRIBE HOW THE MONITOR WORKS.
- ITEM 5 IDENTIFY DILUENTS BEING MONITORED.
 - A. NAME OF MONITOR MANUFACTURER.
 - B. MODEL NUMBER OF MONITOR.
 - C. DATE NEW MONITOR WILL BE INSTALLED OR DATE EXISTING MONITOR WAS INSTALLED.
 - D. INDICATE THE TYPE OF MONITOR.
 - E. DESCRIBE HOW THE MONITOR WORKS.
- ITEM 6 STACK GAS FLOW SHOULD BE IN DRY STANDARD CUBIC FEET PER MINUTE.
 - A. NAME OF MONITOR MANUFACTURER.
 - B. MODEL NUMBER OF MONITOR.
 - C. DATE NEW MONITOR WILL BE INSTALLED OR DATE EXISTING MONITOR WAS INSTALLED.
 - D. INDICATE THE TYPE OF MONITOR.
- ITEM 7 STACK OPACITY SHOULD BE REPORTED USING THE VISIBLE EMISSIONS EVALUATION (VEE) METHOD APPLICABLE TO THIS SOURCE.
 - $A. \quad INDICATE\ THE\ CHOICE\ OF\ AN\ "OPACITY\ MONITOR"\ OR\ "VISIBLE\ EMISSION\ EVALUATIONS"\ IN\ LIEU\ OF\ AN\ OPACITY\ MONITOR.$
 - B. PLEASE INCLUDE THE NAME OF MONITOR MANUFACTURER, MODEL NUMBER OF MONITOR, AND THE YEAR OF INSTALLATION.
- ITEM 8 PAGE NUMBER MUST BE FILLED IN. REVISION NUMBER AND DATE OF REVISION ARE TO BE FILLED IN ONLY IF THE INFORMATION ON THIS FORM IS BEING REVISED.

IF ANY ITEM ON THIS APPLICATION IS NOT APPLICABLE TO THIS FACILITY, THE ITEM MUST BE FILLED IN WITH "NOT APPLICABLE" OR "N/A".