



JEFFERSON COUNTY DEPARTMENT OF HEALTH
Environmental Health Services
Air and Radiation Protection Division
P.O. Box 2648, Birmingham, AL 35202 · (205) 930-1239

Permit Application for Facility Identification

Does this application contain Confidential Business Information (CBI)?

Yes No

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Do not write in this space

Facility Information

1. Name of Facility _____
Street Address _____
City _____ State _____ Zip _____
Mailing Address _____
City _____ State _____ Zip _____
Facility Phone Number _____

Owner Information

2. Name _____
Mailing Address _____
City _____ State _____ Zip _____
Telephone Number _____
Email Address _____

Responsible Official Information

3. Name _____ Title _____
Mailing Address _____
City _____ State _____ Zip _____
Telephone Number _____
Email Address _____

Plant Contact Information

4. Name _____ Title _____
Telephone Number _____
Email Address _____

Billing Address

5. Attention to _____
Mailing Address _____
City _____ State _____ Zip _____

6. Please check the type of permit application being submitted. Check all that apply.

Existing Source - Current Permit Number (if applicable): _____

Initial Application

Major Source

Minor Source

Synthetic Minor Source

Partial Application

Permit Renewal

Modification

Major Modification

Minor Modification

New Source (To Be Constructed)

Change of:

Facility Name

Ownership

Location

Early reductions demonstrations under Section 112(i)(5) of the Act

Other (specify) _____

If application is being made to construct or modify, please provide the name, address, and telephone number of the installer or contractor.

Date Construction/Modification to Begin _____ To Be Completed _____

7. Indicate the number of each form contained in your facility's application package. If a form does not apply to your operation indicate "N/A" in the space provided.

_____ JCDH-APCP-104 – Indirect Heating or Fuel Burning Unit

_____ JCDH-APCP-105 – Manufacturing or Processing Operation

_____ JCDH-APCP-106 – Waste Disposal

_____ JCDH-APCP-107 – Stationary Internal Combustion Engines

_____ JCDH-APCP-108 – Loading, Storage, & Dispensing of Organic Compounds

_____ JCDH-APCP-109 – Volatile Organic Compound (VOC) Surface Coating Emission Sources

_____ JCDH-APCP-110 – Air Pollution Control Device

_____ JCDH-APCP-111 – Coal Preparation Facility

_____ JCDH-APCP-112 – Solvent Metal Cleaning

_____ JCDH-APCP-113 – Continuous Emission Monitoring System (CEMS)

_____ JCDH-APCP-114 – Compliance Schedule

8. Describe the general nature of the business and list the appropriate Standard Industrial Classification (SIC) Codes:

SIC		DESCRIPTION
PRIMARY		
SECONDARY		
TERTIARY		

9. Please provide the emission rate for each pollutant and identify the emissions sources by Standard Classification Code (SCC) Numbers. In addition, list each pollutant's potential emissions and indicate if the potential to emit is greater than the major source thresholds. For Hazardous Air Pollutants (HAPs), please include each pollutant's Chemical Abstract (CAS) Number.

REGULATED POLLUTANT (CAS # FOR HAPS)	PROCESS & SCC NUMBER	TONS/YEAR (POTENTIAL)	MAJOR SOURCE (YES/NO)

10. Indicate the compliance status for each program below that you are subject to for each emission unit or source at your facility and the method used to determine compliance. Also cite the applicable regulations.

Emission Unit or Source (describe): _____

PROGRAM REQUIREMENT	COMPLIANCE STATUS	APPLICABLE REGULATIONS AND METHOD USED TO DETERMINE COMPLIANCE
PSD (TITLE I PART C)		
NON-ATTAINMENT NSR (TITLE I PART D)		
NSPS (40 CFR 60)		
NESHAP (40 CFR 61)		
NESHAP (40 CFR 63)		
ACCIDENTAL RELEASE (112(r), 40 CFR 68)		
TITLE I (PART B-OZONE PROTECTION)		
TITLE IV (ACID RAIN)*		
ENHANCED MONITORING (40 CFR 51, 52, 60, 61, 63, & 64)		
TITLE VI (STRATOSPHERIC OZONE)		
SIP (JCBH RULES & REGULATIONS)		
OTHER (SPECIFY):		

*Sources subject to Title IV must complete and submit Nationally Standardized Application Forms.

12. List and discuss any exemption from the applicable requirements your facility is claiming:

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____
- f. _____
- g. _____
- h. _____

13. List the supporting documentation your facility is including as a part of this application. All supporting engineering calculations must be included.

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____
- f. _____
- g. _____
- h. _____

14. Attach a facility plot plan including building dimensions & fence locations. Stack data, including latitude, longitude, grade elevation (in feet above mean sea level), stack height and orientation, and flow barriers should be provided.

I certify under penalty of law that, based on information and belief formed after reasonable inquiry, the statements and information contained in this application are true, accurate, and complete.

I also certify that the source will continue to comply with applicable requirements for which it is in compliance, and that the source will, in a timely manner, meet all applicable requirements that will become effective during the permit term and submit a detailed schedule, if needed, for meeting the requirements.

Signature of Responsible Official _____ *Date* _____