

Application for Basic Air Contaminant Discharge PermitOther Sources Requesting Enforceable Limits

Form AQB-008 Application

DEQ Use Only								
Permit number:			Regional office:					
Application No:			Check number:					
New □ Renewal □			Amount (\$):	Date Received:				
Staff initials:			Approved date:					
1. Company informa	tion:							
Legal Name:			Other company name (if different from legal name):					
Mailing Address:			Site Address (if different than mailing address):					
City:	State:	Zip Code:	City:	County	(required):	Zip Code:		
Standard Industrial Classification (SIC)		Number of employees:						
 2. Review the list of 'Activities and Sources' (OAR 340-216-8010 Table 1). Is your source, facility, or operation subject to any category listed (other than Part B. #84 or #85)? Yes□ No□ a. If yes, the facility is not eligible for this Basic ACDP. b. List any categories from the table (Part A, B, or C and number; e.g. Part B.#53) that are performed (or planned to be performed on site) but that are below (or expected to be below) the thresholds established on the table: 								
3. Briefly describe all	activities, operations, a	nd equipment that	generates or can generate	rate air e	missions:			

4. For each activity, equipment, or process listed above, fill out the appropriate AQ200 series form. For any process that doesn't

Have you attached or otherwise included all necessary AQ200 series forms? Yes□ No□

5. Are you requesting that DEQ establish enforceable limits on your source, facility, or operations to below the following emission thresholds? Yes \subseteq No \subseteq

Actual emissions, if the source were to operate uncontrolled [8,760 hours of operation per year], of:

- 5 or more tons per year of direct PM2.5 or PM10 if located in a PM2.5 or PM10 nonattainment or maintenance area, or
- 10 or more tons per year of any single criteria pollutant if located in any part of the state.

have a specific form, use form AQ230.



Application for Basic Air Contaminant Discharge Permit Other Sources Requesting Enforceable Limits

Form AQB-008 Application

6. Can all of your equipment, activities, and air pollution generati that can be tracked or otherwise continuously recorded? Yes□ N	· · · · · · · · · · · · · · · · · · ·
7. Describe the hourly or production limits that may work best for	each activity or process:
8. Do your operations currently use any air pollution control device	ces? Yes□ No□
If yes, review $\underline{AQ300}$ series forms and submit the appropriate one series forms? Yes \Box No \Box	es with this application. Have you attached all necessary AQ300
Are any processes, activities, or equipment on site (or planned Performance Standards (NSPS) and National Emission Standard	· · · · · · · · · · · · · · · · · · ·
10. If you burn or use (or plan to burn or use) natural gas on site burned in a year: cu ft/yr.	list the projected or actual maximum cubic feet of natural gas
11. If you burn or use (or plan to burn or use) any other fuel(s) th amount of fuel use per year with units (e.g. Ultra Low Sulfur Diese	
12. Review the industries, operations, and activities listed in OAF these processes or activities on site or planned to be on site? Yes	·
If yes, your source is not eligible for this Basic ACDP.	
13. A Land Use Compatibility Statement <u>LUCS</u> must be submitted included an approved Land Use Compatibility Statement? Yes□	· · · · · · · · · · · · · · · · · · ·
14. Signature	
I certify that the information contained in this application, includir true and correct to the best of my knowledge and belief.	ng any schedules and exhibits attached to the application, are
Name of official (Printed or Typed)	Title of official and phone number
Signature of official	Date



Application for Basic Air Contaminant Discharge Permit Other Sources Requesting Enforceable Limits

Fee Information (Make checks payable to DEQ)

OAR 340-216-8020	New Permits	Permit Renewals
Initial permit application fee (Table 2, Part 1)	\$180.00	\$0.00
Annual fee (Table 2, Part 2)	\$1,469.00	\$0.00
Annual Cleaner Air Oregon fee	\$302.00	\$0.00
Total Fees	\$1,951.00	\$0.00

Submit two copies of the completed application to one of the following addresses

Submit two copies of the completed application to one of the following addresses					
New or Modified Permits (include fees)					
Oregon Department of Environmental Quality					
Financial Services – Revenue Section					
700 NE Multnomah St., Suite 600					
Portland, OR 97232 - 4100					
Permit Renewals (no fees) Select County:					
Oregon Department of Environmental Quality					



Application for Basic Air Contaminant Discharge Permit Other Sources Requesting Enforceable Limits

Form AQB-008 Contact Sheet

1. Company Informa	tion:			
Legal Name:		Other company name (if different from legal name):		
2. Site Contact Pers	on: (A person who deals with I	DEQ staff about equipment proble	ms.)	
First Name:	Last Name:	Telephone number:	Fax:	
Title:		Email address:		
Mailing address:		City, State, Zip Code		
	erson: (If other than the site color ey may be housed at a different Last Name:			
First Name:	Last Name:	Telephone number:	Fax:	
Title:		Email address:		
Mailing address:		City, State, Zip Code		
communications d	irected.)	ntact person, a person to whom th		
First Name:	Last Name:	Telephone number:	Fax:	
Title:		Email address:		
Mailing address:		City, State, Zip Code		
	erson: (If other than the site co g invoice questions can be dire	ntact person, a contact to which ir ected.)	voices and communications	
First Name:	Last Name:	Telephone number:	Fax:	
Title:		Email address:		
Mailing address:		City, State, Zip Code		