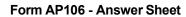


Oregon Title V Air Operating Permit Renewal Application

Facility name:			Application No:		
			Permit Number:		
1.	Contact Person:				
	Title:				
	Phone number:				
	Email address:				
	Fax number:				
2.	Permit cover page cha	nges:			
3.	Off-permit changes?				
	If yes, integrate chang [if no, explain]	es into renewal permit?			
4.	Section 502(b) (10) changes?				
	If yes, integrate chang [if no, explain]	es into renewal permit?			
5.	Process information:	a. Production:			
		b. Fuel usage:			
		c. Raw material usage			
6.	Operating schedule:	hours/day			
		days/week			
		weeks/year			
		Seasonal months			
7.	Number of employees:				
8.	Changes to the operating scenario(s)? [if yes, describe and submit form AP103]				
9.	Any new, modified, or reconstructed stationary sources or air pollution control equipment? [if yes, submit appropriate form(s)]		□ Yes □ No		
10.	Submit a complete list	of current emissions units	□ Yes □ No		
11.	. <u>CAM rule</u> apply to any of the emissions units? [if yes, list the pollutant-specific emissions units that the rules apply to and submit <u>form CP709</u>]		□ Yes □ No		





12.	TRI program applies? If yes, submit the most recent Toxic Release Inventory (TRI) report. If no, check appropriate box below:	□ Yes □	ı No
	□ Not one of the specific industry sectors required to report under the TRI program.	□ Yes □	No
	□ Does not employ 10 or more full-time employees.	□ Yes □	No
	□ Does not manufacture, process or use TRI-listed chemicals in quantities above threshold levels in a given year.	□ Yes □	No
13.	Accidental Release Prevention/Risk Management Plan regulation applies to the facility? [if yes, list the regulated substances present in processes at the facility on form ED607]	□ Yes □	ı No
14.	Other new applicable requirements? [if yes, list the new applicable requirements <u>AR401</u> , emissions units, and submit a <u>series CP700 form</u> that describes the proposed monitoring]	□ Yes □	ı No
15.	Submit an updated Form ED605A Requested Plant Site Emissions Limits (PSEL). Are there any changes other than those identified in item 9 above? [if yes answer the following]	□ Yes □	
	Are the changes a result of having better emissions information such as a new emission factor from a recent source test? If yes, complete and submit any applicable emissions forms from series <u>ED600</u> .	□ Yes □	i No
	Are the changes due to an increase/decrease in production? If yes, complete and submit the applicable emissions form from series <u>ED600</u> . If the emissions increases are greater than the <u>significant emission rate</u> (<u>SER</u>), the owner or operator will need to provide an assessment of the air quality impact in accordance with <u>OAR 340-222-0041(4)(b)</u> .	□ Yes □	ı No
16.	In compliance with all of the conditions of the current permit? [if no, submit a compliance schedule]	□ Yes □	No No
17.	Requested changes to monitoring conditions other than those being replaced by CAM? [if yes, identify the condition, the requested change, and the reason using redline strikeout]	□ Yes □	ı No
18.	Changes to:		
	Recordkeeping & Reporting conditions?	□ Yes □	ı No
	Non-applicable requirements?	□ Yes □	ı No
	Any condition? [if yes, identify the condition, the requested change, and the reason using redline strikeout]	□ Yes □	ı No



- 19. The application for renewal of a Title V Operating Permit must include Form ED606 for based on the most recent hazardous air pollutant information for the source. The information in Form ED606 should represent the source's potential to emit any pollutant listed in Table 1 of OAR 340-244-0040 and OA340-246-0090(3).
- 20. The application for renewal of a Title V Operating Permit must include ED602 Aggregate Insignificant Emissions based on the most recent list of emissions units included in aggregate insignificant emissions.

Sta	tem	ent	of (Certi	ficat	tion:

Statement of Certification:	
application, and all supporting documentation in the formed after reasonable inquiry, the statements an	d in addition to or in revision of the Oregon Title V Operating Permit eir entirety. To the best of my knowledge, information, and belief in information contained herein are true, accurate, and complete. I am itting false information, including the possibility of fine and/or
Name of Responsible Official	Title of Responsible Official
Signature of Responsible Official	Date
Submit completed form to the appropriate Reg and email a convenience copy to:	ional Office by selecting the County where the facility is located
	Select County: