



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR QUALITY

APPLICATION FOR AUTHORIZATION TO USE
GENERAL PLAN APPROVAL & GENERAL OPERATING PERMIT

General Permit BAQ-GPA/GP-5
Natural Gas, Coal Bed Methane or Gob Gas Production or Recovery Facilities

SECTION A APPLICATION USAGE INFORMATION	
<p>This application is for:</p> <p> <input type="checkbox"/> A new authorization <input type="checkbox"/> Renewal of an existing authorization <input type="checkbox"/> General Plan Approval & General Operating Permit (Both) </p> <p> <input type="checkbox"/> A General Plan Approval Only <input type="checkbox"/> A General Operating Permit Only </p> <p>Will source(s) be involved in Marcellus Shale Development Activities? <input type="checkbox"/> Yes <input type="checkbox"/> No </p>	
SECTION B OWNER INFORMATION	
<p>Owner</p> <p>Address Line1 _____</p> <p>Address Line2 _____</p> <p>City State Zip+4 _____</p>	<p>Phone</p> <p>_____</p>
SECTION C CONTACT INFORMATION	
<p>Contact Name _____</p> <p>Contact Title _____</p> <p>Address Line1 _____</p> <p>Address Line2 _____</p> <p>Email Address _____</p> <p>City State Zip+4 _____</p>	<p>Phone</p> <p>_____</p>
SECTION D PERMIT INFORMATION	
<p>Is this facility currently permitted? <input type="checkbox"/> Yes (Attach copy of any current Air Quality authorizations) <input type="checkbox"/> No </p> <p>Indicate if addition of any unit(s) may result in: <input type="checkbox"/> New Source Review requirements (Attach summary) <input type="checkbox"/> Exceedance of Title V thresholds (Attach summary) <input type="checkbox"/> Not Applicable </p>	
SECTION E APPLICANT'S CHECKLIST	
<p>I have enclosed the following:</p> <p> <input type="checkbox"/> General Information Form (GIF) (For new plant only) <input type="checkbox"/> Compliance Review Form </p> <p> <input type="checkbox"/> Permit fee for a new authorization; OR <input type="checkbox"/> Permit fee for renewal of an authorization </p> <p> <input type="checkbox"/> Engine performance data sheets. <input type="checkbox"/> GRI-GLYCalc data. <input type="checkbox"/> Control device manufacturer guarantees. <input type="checkbox"/> Tank emission data (using EPA's Tanks software, Simulation Software, or TANKCalc. Etc.) </p>	
SECTION F AFFIDAVIT	
<p>I certify that, subject to the penalties of Title 18 Pa. C.S.A. Section 4904 and 35 P.S. Section 4009(b)(2), I am the responsible official having primary responsibility for the design and operation of the facilities to which this application applies and that the information provided in this application is true, accurate and complete to the best of my knowledge, information and belief formed after reasonable inquiry. I further certify that the facility will be operated in conformity with the information provided in this application form and all limitations and conditions of the Natural Gas, Coal Bed Methane or Gob Gas Production or Recovery Facilities General Permit (BAQ-GPA/GP-5).</p>	
<p>Signature _____</p>	<p>Date _____</p>
<p>Typed/Printed Name _____</p>	

ENGINE FUEL INFORMATION								
Engine ID:								
Fuel Type	Fuel Use Rate @ 100% load (SCF/hr)	Annual Fuel Consumption (MMSCF/yr)		Fuel Heating Value (Btu/SCF)	Sulfur Content (% wt.)			
		Actual Reported for Calendar Year	Maximum Estimated Amount					
Fuel usage metered		<input type="checkbox"/> Yes	<input type="checkbox"/> No					
Remarks:								
ENGINE EMISSIONS								
Engine ID:								
Pollutants	Control Efficiency	Maximum Allowable Emission Rates g/bhp-hr	Maximum Hrs/Year Operation	Maximum Allowable Emissions lbs/hr	Actual Calendar Year Emissions		PTE Tons/Yr (TPY)	Estimation Method
					Uncontrolled Tons/Yr (TPY)	Controlled Tons/Yr (TPY)		
NOx								
VOC								
CO								
SO _x								
Particulate matter (Filterable)								
Formaldehyde								
Other:								
Remarks:								
COMPLIANCE DEMONSTRATION METHODS FOR ENGINE EMISSIONS								
Engine ID:								
Pollutants	Department approved stack tests	Department-approved portable analyzer	Department-approved test data for identical engine	Vendor guarantee	Alternate Department approved methods (Specify)			
NOx	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
VOC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
CO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
SO _x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Formaldehyde	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Total particulate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Other:	<input type="checkbox"/> Describe:							
Remarks								

SECTION G.2 DEHYDRATOR AND REBOILER INFORMATION (Use extra page to describe each unit)					
Unit ID:		Date Installed:			
Make, Model & Serial No.		Date of Manufacture		Manufacturer	
Dehydrator Gas Throughput (scfm)		Water Content (wt%) in:		Wet Gas: Dry Gas:	
Glycol Circulation Rate (gpm):		Water Content in Rich Glycol (wt%)		Water Content in Lean Glycol (wt%)	
Glycol Type:		<input type="checkbox"/> Ethylene Glycol (EG) <input type="checkbox"/> Di Ethylene Glycol (DEG) <input type="checkbox"/> Tri Ethylene Glycol (TEG)			
Reboiler Heat Input (MMBtu/hr)					
Check all applicable Federal rules for this unit		<input type="checkbox"/> 40 CFR Part 63 Subpart HH	<input type="checkbox"/> 40 CFR Part 60, Subpart Dc	<input type="checkbox"/> Other specify	
Emissions Data					
Pollutants	Uncontrolled emissions Tons/Yr (TPY)	Controlled emissions Tons/Yr (TPY)	PTE Tons/Yr (TPY)	Emissions estimation methods	
VOC					
HAPs					
NO _x					
SO _x					
Particulate matter (Filterable)					
Other					
General description and function of the unit:					
Remarks:					
COMPLIANCE DEMONSTRATION METHODS FOR DEHYDRATOR AND REBOILER					
Unit ID:					
Pollutants	Department approved stack tests	Department-approved portable analyzer	Department-approved test data for identical unit	Vendor guarantee	Alternate Department approved methods (Specify)
VOC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HAPs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
NO _x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SO _x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Particulate matter (Filterable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Remarks					

SECTION G.3 CONDENSATE OR MISCELLANEOUS STORAGE TANK INFORMATION (Copy this section to describe each unit)				
Tank ID:	Tank capacity (gallons):	Tank content		
Maximum Allowable Working Pressure (psig):		Tank Design Pressure (psig):		
Control Type:		Year(s) tank(s) were placed in service:		
Control Efficiency (%):		Liquid/Condensate Throughput (gallons/year):		
Check all applicable Federal rules for this unit	<input type="checkbox"/> 40 CFR part 63 Subpart HH	<input type="checkbox"/> 40 CFR Part 60 Subpart K, Ka, or Kb	<input type="checkbox"/> Other specify	
Emissions Data				
Pollutants	Uncontrolled emissions (tons/year)	Controlled emissions (tons/year)	PTE Tons/Yr (TPY)	Emission estimation method
VOC				
HAPs				
Others				
Describe the function of this unit:				
Remarks:				
COMPLIANCE DEMONSTRATION METHODS FOR TANKS				
<input type="checkbox"/> Department-approved test methods, specify:				
Remarks				

SECTION G.4 OTHER AIR CLEANING DEVICE INFORMATION			
(Copy this section to describe each additional air cleaning device. Do not include engine control devices in this section.)			
1. ADSORPTION EQUIPMENT			
Equipment Specifications			
Device connected to which unit?		(Attach schematic diagram)	
Manufacturer	Type (VRU etc.)	Make/ Model No.	
Design Inlet Volume (SCFM)	Adsorbent charge per adsorber vessel and number of adsorber vessels		
Length of Mass Transfer Zone (MTZ), supplied by the manufacturer based upon laboratory data.			
Adsorber diameter (ft.) and area ft ² :		Adsorption bed depth (ft.):	
Adsorbent information:			
Adsorbent type and physical properties.		Overall Control Efficiency%	
Working capacity of adsorbent (%)		Heel percent or unrecoverable solvent weight % in the adsorbent after regeneration.	
Operating Parameters			
Inlet volume (SCFM)		@ °F	
Adsorption time per adsorption bed		Breakthrough capacity: Lbs. of solvent / 100 lbs. of adsorbent =	
Vapor pressure of solvents at the inlet temperature		Available steam in pounds to regenerate carbon adsorber (if applicable)	
Percent relative saturation of each solvent at the inlet temperature:			
Attach any additional data including auxiliary equipment and operation details to thoroughly evaluate the control equipment:			
Describe the warning/alarm system that protects against operation when unit is not meeting design requirements.			
Check all applicable Federal rules for this unit		<input type="checkbox"/> 40 CFR part 63 Subpart HH	<input type="checkbox"/> Other specify
Emissions Data			
Pollutants	Inlet (tons/year)	Outlet (tons/year)	Removal Efficiency (%)
VOC			
HAPs			
Others			
COMPLIANCE DEMONSTRATION METHODS FOR ADSORPTION EQUIPMENT			
Air Cleaning Device ID _____			
<input type="checkbox"/> Department-approved stack tests	<input type="checkbox"/> Department-approved portable analyzer	<input type="checkbox"/> Department-approved test data for identical equipment	<input type="checkbox"/> Vendor guarantee
<input type="checkbox"/> Alternate Department-approved methods, specify:			
Remarks			

2. FLARE			
Equipment Specifications			
Device connected to which unit?		(Attach schematic diagram)	
Flare ID _____			
Flare Type	Make/ Model	Rating (mmBtu/Hr)	
Control Efficiency%	Constant Pilot Light	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pilot Burner Rating (mmBtu/Hr)	Meets VOC Outlet Concentration of 20 ppm?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Check all applicable Federal rules for this unit		<input type="checkbox"/> 40 CFR §60.18	<input type="checkbox"/> 40 CFR part 63 Subpart HH
		<input type="checkbox"/> Other specify	
Emissions Data			
Pollutants	Inlet (tons/year)	Outlet (tons/year)	Removal Efficiency (%)
VOC			
NOx			
CO			
HAPs			
Others			
Remarks:			
COMPLIANCE DEMONSTRATION METHODS FOR FLARE			
Air Cleaning Device ID _____			
<input type="checkbox"/> Department approved stack tests	<input type="checkbox"/> Department-approved portable analyzer	<input type="checkbox"/> Department-approved test data for identical equipment(s)	<input type="checkbox"/> Vendor guarantee
<input type="checkbox"/> Alternate Department-approved methods, specify:			
Remarks			
3. VENT CONDENSER			
Equipment Specifications			
Device connected to which unit?		(Attach schematic diagram)	
Condenser ID: _____			
Condenser Type:		Make/ Model/Serial no:	
Coolant Type:		Coolant inlet & outlet temp	°F °F
Gas inlet & outlet temp	°F °F	Control Efficiency (%)	
Remarks:			
Check all applicable Federal rules for this unit		<input type="checkbox"/> 40 CFR part 63 Subpart HH	<input type="checkbox"/> Other specify
Emissions Data			
Pollutants	Inlet (tons/year)	Outlet (tons/year)	Removal Efficiency (%)
VOC			
HAPs			
Others			
Remarks:			
COMPLIANCE DEMONSTRATION METHODS FOR VENT CONDENSER			
Air Cleaning Device ID _____			
<input type="checkbox"/> Department-approved stack tests	<input type="checkbox"/> Department-approved portable analyzer	<input type="checkbox"/> Department-approved test data for identical equipment(s)	<input type="checkbox"/> Vendor guarantee
<input type="checkbox"/> Alternate Department-approved methods, specify:			
Remarks			

**SECTION G.5
FUGITIVE EMISSIONS FROM COMPONENT LEAKS**

(Use extra page as needed)

Equipment Type	Count	Leak Emission Factors lb/hr/component	Source of Leak Emission Factors (Specify if EPA protocol or others)	Stream Type (Gas/liquid etc)	Estimated Emission (Tons/Year)		
					VOC	HAPs	Other
Connectors							
Flanges							
Open-Ended Lines							
Pump Seals							
Valves							
Other**							

Remarks:

COMPLIANCE DEMONSTRATION METHODS

- Department-approved leak detection device, describe:
- Other Department -approved methods, describe:

Remarks

** "Other" equipment types include compressor seals, relief valves, diaphragms, drains, meters etc.

SECTION G.6				
TOTAL EMISSIONS FROM ALL SOURCES COVERED UNDER THIS GENERAL PERMIT				
Estimated Actual Emissions¹			Requested Potential to Emit¹	
Pollutants	lbs/hr	TPY	lbs/hr	TPY
VOC				
NOx				
CO				
Formaldehyde				
Total HAPs				
SO _x				
Particulate matter (Filterable)				
Others				

¹Attach all emission calculations.