

Minor Modification Application for an Existing New Source Review Permit

This form is to be used for a New Source Review permit minor modification as described in RCSA section 22a-174-2a(e). Submit one application form for each permit to be modified.

| CPPU USE ONLY | |
|--|----|
| App #: | |
| Doc #: | |
| Check #: | |
| | |
| Program/El/App Type: Air Engineering/NSR/Minor Modification | 'n |

Complete this form in accordance with CGS section 22a-174, RCSA sections 22a-174-1, 2a and 3a and the instructions (DEEP-NSR-INST-200MM) to ensure the proper handling of your application. Print or type unless otherwise noted. You must submit the fee along with this form.

Questions? Visit the <u>Air Permitting</u> web page or contact the Air Permitting Engineer of the Day at DEEP.BAM.AirPermits@ct.gov or 860-424-4152.

| Applicant Name | | |
|----------------------------|---------------------------|--|
| Town Where Site is Located | Existing Town-Permit Nos. | |

Part I: Fee Information

There are two options available for payment. **Option 1:** Submit the full permit minor modification fee of \$1,750.00 or \$3,250.00, which includes the \$940.00 application fee, with this application form. This option will shorten the permit process. For less than major emitting equipment, the full fee is \$1,750.00. For major emitting equipment, the full fee is \$3,250.00. **Option 2:** Submit only an application fee of \$940.00 with this application form and be billed the balance of the permit minor modification fee at a later date.

The fee for municipalities is 50% of the above listed rate. The application will not be processed until DEEP receives the application fee. The fee shall be paid by check or money order to the Department of Energy and Environmental Protection or through the E-Payment portal.

| Fee Type (Check One Only) | Option 1 | Permit Minor Modification fee = \$1,750 [#195 + #207] (< major emitting equipment) Permit Minor Modification fee = \$3,250 [#195 + #206] (major emitting equipment) | | |
|--|---------------------------|--|--|--|
| | Option 2 | Application fee only = \$940 [#195] (Permit fee balance will be billed later.) | | |
| Municipality (Any Town, City or Borough) | | ☐ No ☐ Yes, 50% discount | | |
| Are you paying online through the After the application is received and e will be emailed to the Primary/Billing | entered, pay instructions | □ No □ Yes | | |

Part II: Applicant Information

- If an applicant is a corporation, limited liability company, limited partnership, limited liability partnership, or a statutory trust, it must be registered with the Secretary of State. If applicable, the applicant's name shall be stated **exactly** as it is registered with the Secretary of State. Please note, for those entities registered with the Secretary of State, the registered name will be the name used by DEEP. This information can be accessed at the Secretary of State's Records Search. (https://service.ct.gov/business/s/onlinebusinesssearch)
- If an applicant is an individual, provide the legal name (include suffix) in the following format: First Name; Middle Initial; Last Name; Suffix (Jr, Sr., II, III, etc.).
- If there are any changes or corrections to your company/facility or individual mailing or billing address or contact information, please complete and submit the <u>Request to Change Company/Individual Information</u> to the address indicated on the form. If there is a change in name of the entity holding a DEEP license or a change in ownership, contact the Office of Innovative Partnerships and Planning at <u>DEEP.OPPD@ct.gov</u>. For any other changes you must contact the specific program from which you hold a current DEEP license.

| 1. APPLICANT INFORMATION | ١ | | | | | | |
|--|----------------|---|--|---|-------------------------------|---|---------------|
| Applicant Name | | Check at least one: equipment owner equipment operator The applicant must be either the owner or operator of the equipment. | | | | | |
| Mailing Address | | | | | • | , , | |
| City/Town | | | | State | | Zip Code | |
| Business Phone No. | | | | Extension No | | | |
| Contact Person | | | | | • | | |
| Title | | | | | | | |
| | | | | | | | |
| Email | | DEE your | roviding this e-mail addres P, at this electronic addre security settings to be sur DEEP if your e-mail add | ss, concerning the s e you can receive e | ubject applicat | ion. Please remer | mber to check |
| | | | business entity federal agency | ☐ municipality☐ state agence | | ☐ individua | al |
| Applicant Type | Applicant Type | Business Type | | ☐ corporation☐ limited partne☐ statutory trus | ership 🗌 I | imited liability of imited liability po | |
| | | a business | Secretary of the State Business ID No. | Check here the Secretary of | | ess is NOT regis | stered with |
| | | JI | | an be accessed at the Secretary of State's Records Search. gov/business/s/onlinebusinesssearch) | | | |
| Applicant's Interest in Proposed Activities the Proposed Activities to Located | | | site owner easement holder Other: | ☐ option holde | er | lessee | |
| Are there co-applicants? | | | Yes es", attach additional s | ☐ No neet(s) with the re | quired inform | nation as above | |
| Did the Applicant attend a Application Meeting with D staff? | | | No Yes, Pre-Application M | _ | e of Meeting: Staff Name(s |): | |

Part II: Applicant Information (continued)

| 2. | PRIMARY CONTACT FOR DEPARTM | MENTAL CORR | ESPONDENC | E AND INQUIRIE | S (if differe | ent than the ap | plicant) |
|----|---|-------------------|--------------|----------------|---------------|-----------------|----------|
| | Name | | | | | | |
| | Title | | | | | | |
| | Company/Individual Name | | | | | | |
| | Mailing Address | | | | | | |
| | City/Town | | | State | | Zip Code | |
| | Business Phone No. | | | Extension No. | | | |
| | Email | | | | | | |
| | By providing this e-mail address you are ag subject application. Please remember to ch please notify DEEP if your e-mail address of | eck your security | | | | | |
| 3. | EQUIPMENT OWNER OR EQUIPMENT (only complete if applicant is not be | | | erator) | | | |
| | Name | Check one: | ☐ equipme | nt owner | | equipment ope | rator |
| | Title | | | | | | |
| | Company/Individual Name | | | | | | |
| | Mailing Address | | | | | | |
| | City/Town | | | State | | Zip Code | |
| | Business Phone No. | | | Extension No. | | | |
| | Email | | | | | | |
| 4. | ENGINEER(s) OR CONSULTANT(s) (if different than the applicant) | EMPLOYED OI | R RETAINED T | O ASSIST IN PF | REPARING | THIS APPLICA | TION |
| | Name | | | | | | |
| | Title | | | | | | |
| | Company/Individual Name | | | | | | |
| | Mailing Address | | | | | | |
| | City/Town | | | State | | Zip Code | |
| | Business Phone No. | | | Extension No. | | | |
| | Email | | | | | | |
| | Service Provided | | | | | | |
| | | | | | | | |

☐ Check here if additional sheets are necessary. Label and attach them to this sheet.

Part III: Permit Modification Information

| 1. | SITE NAME AND LOCATION | | | | | |
|----|---|--|---|--|---|---|
| | Name of Site | | | | | |
| | Street Address or Location Description | | | | | |
| | City/Town | | State | | Zip Code | |
| 2. | EXISTING PERMIT NO. | | | | | |
| 3. | DESCRIPTION OF MODIFICATION | | | | | |
| | Include a description of the proposed modific any increase in potential emissions resulting or otherwise applicable requirements that we | from the proposed modification | on, and a | ın identifi | cation of all reg | |
| | | | | | | |
| | | | | | | |
| | Note: Pursuant to RCSA section 22a-174-2a permit modification application no less than commissioner notifies the applicant prior to timplemented until such time as defined by the a complete application and the commissioner conditions of the proposed modified permit a until the commissioner issues or denies the proposed changes may result in deviations to a Title V Permit, please reference operational Flexibility and Off Permit Changer | 21 days after filing a complete he end of the twenty-one-day ne commissioner in the notificater has not notified the permitte and the terms and conditions of proposed modified permit. If the from the existing conditions in the RCSA Section 22a-174-3. | e application period the period the period the period the existence facility your Title | ion with that the moventy-one rmittee sisting perries a Title V Perm | he commission odifications mae days have pa hall comply wit mit that are not Y facility, implit. For the proc | er, unless the y not be ussed since filing the terms and being modified, ementing these dedures to make |
| 4. | Does the facility have a Title V Operating Permit? | ☐ Yes, Title V Permit Numl | ber: | | | |

Part IV: Attachments

Check the applicable box below for each attachment being submitted with this application form. All referenced forms may be accessed electronically, in WORD and PDF versions, on the <u>Air Permits Webpage</u>. Check all that apply.

| If any of the following are true | Attach | Required? | Attached |
|---|--|---------------|----------|
| Permit is being modified | Marked up copy of the current NSR permit noting proposed changes. Use redline to delete language and uppercase font to add proposed new language. | Required | |
| Source is being moved to another location on the premises | Site Plan showing the exact location of the stack(s), the latitude and longitude of the stack(s), all boundary lines of the property and measurements, and the horizontal distance from the stack base to the nearest property line; and | If Applicable | |
| · | A completed <u>CTMASC spreadsheet</u> , or equivalent, to demonstrate compliance with RCSA section 22a-174-29, Hazardous Air Pollutants. | | |

Part IV: Attachments (continued)

| If any of the following are true | Attach | Required? | Attached |
|---|--|---------------|----------|
| Burner is being replaced | Fuel Burning Equipment Form (DEEP-NSR-APP-202) | If Applicable | |
| Control equipment is being added | Air Pollution Control Equipment Form (DEEP-NSR-APP-210) | If Applicable | |
| Stack parameters are being changed | Stack Parameters Form (DEEP-NSR-APP-211) | If Applicable | |
| A change is made to the operation of the source (e.g., production or fuel usage increase/decrease, etc.), resulting in changed emissions | Unit Emissions Form (DEEP-NSR-APP-212) | If Applicable | |
| Allowable emissions in the current permit are based on older versions of AP-42 emission factors | Unit Emissions Form (DEEP-NSR-APP-212) Recalculate the emissions using the most current AP-42 emission factors. | If Applicable | |
| If the source was issued a permit to operate before March 1, 1986, compliance with RCSA section 22a-174-29 Tables 2 and 3 of the Hazardous Air Pollutants regulations shall be demonstrated | A completed <u>CTMASC spreadsheet</u> , or equivalent, to demonstrate compliance with Tables 2 and 3 of the RCSA section 22a-174-29, Hazardous Air Pollutants. | If Applicable | |
| Allowable emissions for a pollutant, previously limited by a BACT/LAER determination are increased | Analysis of Best Available Control Technology (BACT) Form (DEEP-NSR-APP-214a) | If Applicable | |
| Emissions for any pollutant are increased | Ambient Air Quality Analysis Form (DEEP-NSR-APP-218) | If Applicable | |
| If any parameter (e.g., hourly emissions, stack height, exhaust gas flow rate, property line distance), previously modeled, is changed | Ambient Air Quality Analysis Form (DEEP-NSR-APP-218) | If Applicable | |
| If the source is located at a Major Stationary Source and emissions from the premises will increase due to the minor modification | Premises Information Form (DEEP-NSR-APP-217) | If Applicable | |

Part V: Applicant Certification

The authorized representative **and** the individual(s) responsible for actually preparing the application must sign this part. An application will be considered insufficient unless all required signatures are provided.

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that any false statement made in the submitted information may be punishable as a criminal offense under section 22a-175 of the Connecticut General Statutes, under section 53a-157b of the Connecticut General Statutes, and in accordance with any applicable statute. I certify that this application is on complete and accurate forms as prescribed by the commissioner without alteration of the text. I certify, in accordance with RCSA section 22a-174-2a(e)(3)(B)(ii), that the proposed minor permit modification meets all regulatory, statutory, or applicable requirements identified in the subject application. By entering my name below, I agree that I am providing my legal signature and am legally bound by the certifications above" **APPLICANT:** Signature of Applicant **Date** Name of Applicant (print or type) Title (if applicable) PREPARER: Date Signature of Preparer Name of Preparer (print or type) Title (if applicable)

Submit one hardcopy and one electronic copy of the completed and signed application package.

The hardcopy of the completed and signed application package shall be submitted to:

CENTRAL PERMIT PROCESSING UNIT DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION 79 ELM STREET HARTFORD, CONNECTICUT 06106-5127

The electronic copy of the completed and signed application form shall be submitted to:

<u>DEEP.BAM.AirPermits@ct.gov</u>. Where the file size of attachments exceed the allowable limit, please contact <u>DEEP.BAM.AirPermits@ct.gov</u> to arrange an alternate method of submitting the electronic copy.

Your application is not considered received by the Department until the hardcopy of the completed and signed application is submitted to the address above.