Notification of Coverage Under RCSA §22a-174-3d
Combined Heat and Power (CHP)

Complete this form to notify the Department of Energy and Environmental Protection that you elect coverage under RCSA §22a-174-3d for a Combined Heat and Power System.

Part I: Owner/Operator Information

*If an owner/operator is a corporation, limited liability company, limited partnership, limited liability partnership, or a statutory trust, it must be registered with the Secretary of State. Owner’s/operator’s name shall be stated exactly as it is registered with the Secretary of State.

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<tr>
<th>Owner/Operator:</th>
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<tbody>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Mailing Address:</td>
</tr>
<tr>
<td>City/Town:</td>
</tr>
<tr>
<td>State:</td>
</tr>
<tr>
<td>Zip Code:</td>
</tr>
<tr>
<td>Business Phone:</td>
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<tr>
<td>ext.:</td>
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<tr>
<td>Contact Person:</td>
</tr>
<tr>
<td>Title:</td>
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<tr>
<td>*E-mail:</td>
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<tr>
<td>Notification submitted by ☐ Owner ☐ Operator (check all that applies) of this equipment.</td>
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*By providing this e-mail address you are agreeing to receive official correspondence from DEEP, at this electronic address, concerning the subject application. Please remember to check your security settings to be sure you can receive e-mails from “ct.gov” addresses. Also, please notify DEEP if your e-mail address changes.

Part II: CHP Information

1. Facility Name and Location:

   Name of Facility :
   Street Address:
   City/Town:     |
   State:        |
   Zip Code:     |

2. Type of Plant (check one): ☐ Turbine ☐ Internal Combustion Engine

3. Equipment Manufacturer and Model Number:

4. Construction Initiation Date: / / 

5. Design Specifications:

   a. Maximum Nameplate Electrical Output: MW
   (Note: The aggregate of the maximum generator “Nameplate capacity” (See RCSA 22a-174-3d(a)(11)) for the CHP system as well as for all other fuel-fired electricity generating units combined, excluding emergency generators, located at the same premises shall at the time of construction be less than 10 MW.)
### Part II: CHP Information (continued)

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<td>b.</td>
<td>Maximum fuel firing rate(s): Natural Gas: ft³/hr ULD: gal/hr</td>
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<td>c.</td>
<td>Maximum Heat Input: MMBtu/hr</td>
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| d.  | System Efficiency: %  
  (Note: Except during periods of startup, shutdown, malfunction, and, as allowed by the commissioner during performance testing, the "Actual system efficiency" (See RCSA 22a-174-3d(a)(3)) of any CHP system operated pursuant to this section shall be no less than 55% on a “12 month rolling aggregate” (See RCSA 22a-174-3d(a)(16)) basis.) |
| e.  | Height of Stack: ft  
  (Note: The height of any stack associated with the CHP system shall be no less than 10 meters (32.8 ft) and shall be at least as high as the lesser of the maximum "Nearby" (See RCSA 22a-174-3d(a)(12)) building width; or the nearby building height multiplied by a factor of 1.3.) |

### 6. Fuel Use:

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| a.  | Maximum Proposed Annual Fuel Use: (Natural Gas): ft³  
  (Note: Natural gas shall be the primary fuel combusted by a combustion turbine and the only fuel combusted by an internal combustion engine.) |
| b.  | Maximum Proposed Annual Fuel Use (ULSD): gallons  
  (Note: Distillate fuel oil may be combusted as an auxiliary fuel by a combustion turbine only if it contains less or equal to 0.0015% sulfur, by weight, and the "Annual capacity factor" (See RCSA 22a-174-3d(a)(5)) for all the Ultra Low Sulfur Distillate fuel (ULSD) combusted in the combustion turbine does not exceed 10% on a heat input basis.) |

### 7. Type of Monitoring:

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| a.  | [ ] Continuous Emission Monitoring  
  [ ] NOx  
  [ ] CO  
  [ ] NH₃  
  [ ] PM 10/2.5 |
| b.  | [ ] Continuous Parameter Monitoring  
  [ ] NOx  
  [ ] CO  
  [ ] NH₃  
  [ ] PM 10/2.5 |
  
  (Note: An owner/operator shall prepare and submit a written monitoring plan to address monitoring of emissions, CHP operating parameters and air pollution control equipment operating parameters in accordance with RCSA 22a-174-3d(f)(3) or (4).)
Part III: Certification

The owner/operator must sign this part. This notification will be considered incomplete unless signed.

Additional federal regulations may apply to these units. The owner/operator is required to comply at all times where applicable to the following rules:

Title 40 CFR Part 60, Subparts: JJJJ or IIII and A; Title 40 CFR Part 63, Subpart: ZZZZ and A

“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 the 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 a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute.

I certify that this notification is on complete and accurate forms as prescribed by the commissioner without alteration of the text.”

Signature of Owner/Operator

Date

Name of Owner/Operator (print or type)

Title (if applicable)

Note: Please submit this completed Notification Form and any Supporting Documents to:

SUPERVISOR; COMPLIANCE ASSURANCE AND COORDINATION UNIT
BUREAU OF AIR MANAGEMENT
DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION
79 ELM STREET, 5TH FLOOR
HARTFORD, CT 06106-5127