

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.

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% disco	punt

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 Planning and Program Development (OPPD) at <u>DEEP.OPPD@ct.gov</u> or 860-424-3003. For any other changes you
 must contact the specific program from which you hold a current DEEP license.

1.	APPLICANT INFORMATION						
	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	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 che your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, plean notify DEEP if your e-mail address changes.				mber to check	
			business entity federal agency	☐ municipality ☐ state agency		☐ individua	al
	Applicant Type	entity:	Business Type	☐ corporation ☐ limited partners ☐ statutory trust	hip 🗌 li	imited liability of imited liability p Other:	
7,4		a business entity:	Secretary of the State Business ID No.	☐ Check here if you the Secretary of Sta			stered with
		Ifa	This information can be a (https://service.ct.gov/bu	accessed at the Secreta siness/s/onlinebusines	ary of State ssearch)	's Records Searc	h.
	Applicant's Interest in Property at which the Proposed Activity is to be Located		site owner easement holder Other:	option holder		lessee	
	Are there co-applicants?	If "Y	Yes es", attach additional sł	☐ No neet(s) with the requi	red inform	ation as above	
	Did the Applicant attend a Pre- Application Meeting with DEEP air staff?		No Yes, Pre-Application Me	•	^f Meeting: ff Name(s)):	

Part II: Applicant Information (continued)

2.	PRIMARY CONTACT FOR DEPARTM	MENTAL CORRI	SPONDENCE	AND INQUIRIES	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 s					
3.	EQUIPMENT OWNER OR EQUIPMENT (only complete if applicant is not be		wner and ope	rator)			
	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 OR	RETAINED T	O ASSIST IN PR	EPARING ⁻	THIS APPLICA	TION
	Name						
	Title						
	Company/Individual Name						
	Mailing Address						
	City/Town			State		Zip Code	
	Business Phone No.			Extension No.			
	Email						
	Service Provided						

 $\hfill \Box$ 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 modificant increase in potential emissions resulting or otherwise applicable requirements that we	from the proposed modification	on, and a	an identifi	cation of all reg	
	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 commissione conditions of the proposed modified permit a until the commissioner issues or denies the proposed changes may result in deviations to	2a-174-2a(e)(3)(C), a permittee may implement the modifications proposed in the minor less than 21 days after filing a complete application with the commissioner, unless the application to the end of the twenty-one-day period that the modifications may not be sined by the commissioner in the notification. If twenty-one days have passed since filing amissioner has not notified the permittee, the permittee shall comply with the terms and dispermit and the terms and conditions of the existing permit that are not being modified, enies the proposed modified permit. If the facility is a Title V facility, implementing these eviations from the existing conditions in your Title V Permit. For the procedures to make lease refer to RCSA Section 22a-174-33(r), Title V Permit Modifications, Revisions, nit Changes.				
4.	Does the facility have a Title V Operating Permit?	☐ Yes, Title V Permit Numl☐ No	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 CTMASC spreadsheet, 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	

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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." APPLICANT: Date Signature of Applicant Name of Applicant (print or type) Title (if applicable) PREPARER: Signature of Preparer Date 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.