

SYNTHETIC MINOR SOURCE APPLICATION INSTRUCTIONS

Be sure to review the following instructions prior to completing this application. More detailed instructions can be found on Page 8.

- a. The application must be filled out completely for all items that are applicable, except where noted as optional. A supplemental emissions unit and/or control device worksheet must be submitted with this application for each emissions unit (EU) and/or control device. An emissions unit (EU) is defined as “any part of a source that emits or would have the potential to emit any regulated pollutant”. Worksheets can be found at OurCleanAir.com, under “*Source Permitting*”. All required supplemental documents must be attached for the application to be deemed complete.
- b. The application must have an **original wet-ink signature** by the Responsible Official. Responsible Official is defined in [DBOH Regulations Governing Air Quality Management 010.1305](#):
“a Corporation’s Chairman, Chief executive officer, president, vice president in charge of a principal business function, secretary, treasurer or designated environmental representative of a corporation responsible for overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit and approved in advance by the Control Officer; a general partner in a partnership; the proprietor of a sole-proprietorship; or the principal executive officer or ranking elected official of a public agency. For sources subject to Title IV of the act, the responsible official shall be the representative who meets the requirements promulgated in 40 CFR Part 72.”
- c. An electronic copy of the application and supporting documentation should be emailed to AQMDPermitting@nnph.org, and the original application with wet-ink signature and payment should be hand delivered to the AQMD drop box located ([here](#)), or mailed to:
NNPH, AQMD
1001 E. Ninth Street, Suite B171
Reno, NV 89512
- d. Use the checklist on Page 3 to ensure that all the required information is included in your application. Include the checklist as a supplemental document with your application.

FEES AND PAYMENTS

- a. An application fee must be submitted with this application. The Air Quality Management Division fee schedule can be found here:
<https://www.nnph.org/resources/fees/air-quality-management-fees.php>
- b. The application fee invoice must be paid in full before the application is processed.
- c. All outstanding invoices for the facility and associated with the parent company of the facility must be paid in full; otherwise, the AQMD cannot issue the facility any permits. This includes the invoice for the permit fees resulting from this application.
- d. Invoices must be paid by check, money order, or credit card. Make checks and money orders payable to Northern Nevada Public Health, Air Quality Management Division or NNPH, AQMD. For payment with a credit card, the applicant will be notified by email once the invoice is ready for payment. Payment may be made with a credit card by following

the instructions ([here](#)), or by calling the AQMD at 775-784-7200 Option 0 Monday-Friday 8am-4pm.

ASSISTANCE AND RESOURCES

District Board of Health Regulations Governing Air Quality Management:

<https://www.nnph.org/programs-and-services/air-quality/regulations/index.php>

The Air Quality Management Division Permitting Department can be contacted at 775-784-7200 or AQMDPermitting@nnph.org.

SYNTHETIC MINOR SOURCE APPLICATION CHECKLIST

This checklist must be included with your application. Check the appropriate box for each item. If an item is incomplete or not applicable, please detail why it is incomplete or not applicable in the “Notes” section at the end of the checklist. **Reference Page 10 for more detailed information about the required supplemental documents.**

Yes No N/A

Application for a Synthetic Minor Source Authority to Construct/Permit to Operate

Site Map

Process Flow Diagram (as applicable)

- Clearly depict all emissions units (EU’s) and show emission unit ID numbers (EU ID #’s)
- Indicate emission control application points

Equipment List. Include the following areas of information:

- Descriptions and specifications
- Power/capacity ratings
- EU ID Numbers
- Dates of manufacture, installation, and operation

Air Pollution Control Equipment/Measures List

Emissions unit and/or control device worksheet for each emission unit and/or control device.

Detailed Emissions Calculations –

Emissions calculations should be included for each (EU) and for each regulated pollutant (lbs/hr and tons/yr); Calculations should include controls, hours of operation, throughput/fuel usage, Emission Factors, etc. The calculations should also match the application forms. The following should also be included:

- Potential to Emit (PTE)
- Emissions Increase (existing facilities only). The prior PTE vs proposed PTE.

Operational Information (if not included in the required worksheet)

Safety Data Sheets (as applicable)

Compliance Monitoring Devices List (as applicable)

Exhaust Stack Information List (if not included in the required worksheet)

Federal Performance Standards List (if not included in the required worksheet)

Applicable Requirement Supplement (as applicable)

Construction Schedule (as applicable)

Applicable Requirements Exemption List (as applicable)

Yes No N/A

Manufacturer specification sheet for each emissions unit and/or control device and Manufacturer's Guarantee (if applicable, due to control efficiencies claimed)

Source Testing Data (if referenced in calculations)

Electronic version of all documents submitted via email to AQMDPermitting@nnph.org or thumb drive included.

Application Fee. The application fee invoice must be paid in full before the application is processed.

Notes:

FOR AQMD USE ONLY

APPLICATION FOR A SYNTHETIC MINOR SOURCE AUTHORITY TO CONSTRUCT/PERMIT TO OPERATE

Permit No.:

Facility Information			
1. New Permit Permit Modification			
2. Existing facilities only. Permit Number (AAIRXX-XXXX):			
3. Facility Name:			4. NAICS:
5. Facility Location: Stationary Portable			
6. Facility Address:			APN:
City:	State:	ZIP Code:	
7. Facility latitude and longitude coordinates:			
8. Stationary facilities only. Is the facility located within 1,000 feet of the outer boundary of a school, hospital, or residential area? Yes No			
9. Operating Schedule			
Hours Per Day:	Days Per Week:	Weeks Per Year:	
10. On-Site Contact Information			
Name:			
Title:			
Phone Number:		Fax Number:	
Email:			
Optional (#11 - #13). If there are records required under the operating permit, and they will be kept at a location other than the facility, specify the location:			
11. Facility Name:			
12. Facility Address:			
City:	State:	ZIP Code:	
13. On-Site Contact Information			
Name:			
Title:			
Phone Number:		Fax Number:	
Email:			

Company Information (all fields must be completed)

14. **Existing facilities only.** Has the company ownership changed? Yes No N/A
If “Yes”, submit an *Application for Change of Ownership* and Fee, in addition to this application.

15. Legal Company Name (as registered with the State of Nevada):

16. Mailing Information

Mailing Address:

City:	State:	ZIP Code:
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Permitting Contact Name:

Title:

Phone Number:	Fax Number:
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Email:

17. Billing Information

Billing Address:

City:	State:	ZIP Code:
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Billing Contact Name:

Title:

Phone Number:	Fax Number:
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Email:

Responsible Official Information

Name of Responsible Official:

Title:

Phone Number:	Fax Number:
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Email:

Mailing Address:

City:	State:	ZIP Code:
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Facility Manager/Environmental Representative (Optional)

Name:	Title:
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Phone Number:	Fax Number:
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Email:

Mailing Address:

City:	State:	ZIP Code:
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Environmental Consultant Information (Optional)

By identifying a consultant, the RO consents that such consultant has the authority to communicate directly with the AQMD for the limited purpose of providing supplemental information and comments in support of the information already provided by the RO in the application. The RO acknowledges that any change to, or withdrawal of the application must be done by the RO.

Name:		Title:	
Phone Number:		Fax Number:	
Email:			
Mailing Address:			
City:	State:	ZIP Code:	

Application Description

Describe all equipment and processes being proposed in the application. Make sure the narrative matches the process flow diagram (as applicable). For existing facilities, make sure to describe any revisions or modifications being requested, and include any equipment to be removed and/or replaced. Reference the instructions on Page 8 for more information.

NOTE: Applicant agrees to allow on-site inspection during and after construction by the Air Quality Management Division (AQMD) during working hours and without prior notice. The operator must notify the AQMD when the facility commences and completes construction. An official Permit to Operate will not be issued until a final inspection is made and all required test data has been forwarded to the AQMD showing the equipment meets all district, state, and federal regulations.

This application is submitted in accordance with the provisions of Section 030.000, and under penalty of perjury, to the best of my knowledge the information supplied in this document is true and correct.

Responsible Official Signature

Date

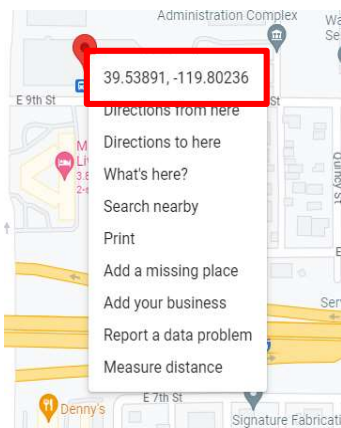
Print Name

Title

DETAILED APPLICATION INSTRUCTIONS

Facility Information

1. Specify if the application is for a new permit or for modification of an existing permit by checking the appropriate box. Modification means any potential to emit (PTE) emissions increase of a regulated source pollutant resulting from a modification at an existing source.
2. **For existing facilities only.** Provide the permit number, which can be found at the top of Page 1 of the existing Permit to Operate (ex. AAIRXX-XXXX).
3. Provide the facility name as you'd like it to appear on the permit. If a permit already exists for this operation, enter the name as it appears on the existing permit, which can be found at the top of Page 1 of the existing Permit to Operate where it says, "Permit Issued To".
4. Provide the North American Industry Classification System (NAICS) code for the company. NAICS is a self-assigned system, meaning no one assigns you a NAICS code. This means that the facility should select the code that best depicts their primary business activity. A listing of NAICS codes can be found at, <https://www.naics.com/search/>.
5. Specify whether the facility is stationary or portable throughout various locations in Washoe County by checking the appropriate box.
6. Provide the address for the facility. If the facility is portable, provide the address of the main office.
7. Provide the latitude and longitude coordinates for the facility. These coordinates uniquely identify geographic positions. To find these coordinates, go to [Google Maps](https://www.google.com/maps) and search for the address of the facility. Then, right click on the facility location on the map. A box will appear with the facility coordinates as shown below. The values should be written as shown (39.53891, -119.80236). For portable facilities, provide the coordinates for the first location.



8. **For stationary facilities only.** Specify if the facility is located within 1,000 feet of the outer boundary of a school, hospital, or residential area.
9. Specify the operating schedule of the facility in hours per day, days per week, and weeks per year.
10. Provide the name, title, phone and fax numbers, and email of the on-site contact at the

facility.

11-13. **Optional.** If there are records required under the operating permit, and they will be kept at a location other than the facility, specify the location. Provide the facility name, street address, city, state, and ZIP Code. Also provide the name, title, phone and fax numbers, and email of the on-site contact.

Company Information. All fields in this section must be completed even if the information is the same. (ex. billing address is the same as the mailing address).

14. **For existing facilities only.** Specify if the company ownership has changed. If “Yes”, submit an *Application for Change of Ownership* and Fee, in addition to this application. This form can be found at, OurCleanAir.com, under “*Source Permitting*”.

15. Provide the legal company name, as registered with the State of Nevada.

16. Facility Mailing Information.

Provide the facility mailing address, permitting contact name, title, phone and fax numbers, and email address.

17. Facility Billing Information.

Provide the facility billing address, billing contact name, title, phone and fax numbers, and email address.

Responsible Official Information

Provide the name, title, phone and fax numbers, email, and mailing address of the Responsible Official. A Responsible Official is defined as:

“a Corporation’s Chairman, Chief executive officer, president, vice president in charge of a principal business function, secretary, treasurer or designated environmental representative of a corporation responsible for overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit and approved in advance by the Control Officer; a general partner in a partnership; the proprietor of a sole-proprietorship; or the principal executive officer or ranking elected official of a public agency. For sources subject to Title IV of the act, the responsible official shall be the representative who meets the requirements promulgated in 40 CFR Part 72.” ([DBOH Regulations Governing Air Quality Management 010.1305](#)).

Facility Manager/Environmental Representative Information (Optional)

Provide the name, title, phone and fax numbers, email address, and mailing address for the facility Plant Manager or Environmental Representative.

Environmental Consultant Information (Optional)

Provide the name, title, phone and fax numbers, email address, and mailing address of the Environmental Consultant. By identifying a consultant, the RO consents that such consultant has the authority to communicate directly with the AQMD for the limited purpose of providing supplemental information and comments in support of the information already provided by the RO in the application. The RO acknowledges that any change to, or withdrawal of the application must be done by the RO.

Application Description (Process Narrative)

Describe all equipment and processes being proposed in the application. Make sure the narrative matches the process flow diagram (as applicable). For existing facilities, make sure to describe any revisions or modifications being requested, and include any equipment to

be removed and/or replaced.

- a. Specify the location of the facility and its parent company if part of a larger company.
- b. Include information that helps describe what the facility does and how it functions.
- c. Describe the emission units and/or control devices used at the facility and how they relate to the facility functions. An emission unit (EU) is defined as “any part of a source that emits or would have the potential to emit any regulated pollutant and includes an electric utility steam generating unit”. A supplemental emission unit and/or control device worksheet must be submitted with this application for each emission unit (EU) and/or control device. Worksheets can be found at OurCleanAir.com, under “*Source Permitting*”.
- d. Characterize all regulated air pollutants that may be emitted by each emissions unit.
- e. If the facility is requesting a revision or modification, explain what is going to change and why it is necessary.
- f. Describe how and where the facility will be monitoring throughput to show compliance.
- g. Specify the actual or projected date an emission unit will be fully constructed and ready for use.

SUPPLEMENTAL DOCUMENTS

Attach the following as supplemental documents, as applicable:

- **Site Map.** A map that depicts the physical location of the facility which must identify the main entrance, property boundaries, and all buildings and structures on the site as they relate to the facility emissions units (EU’s). For portable equipment, the supplemental map must delineate the first location of the portable equipment and the maximum proposed area for the source’s operation.
- **Process Flow Diagram (as applicable).** A detailed diagram that clearly depicts all emissions units (EU), pollution control equipment, stack/vents/emission points, monitoring equipment, and throughput and exhaust streams. A unique identification number should be assigned to each EU presented in the flow diagram. Indicate all emission control application points. An example can be found ([here](#)). A process flow diagram is not required for sources that do not move materials/products from one EU to another (e.g., gasoline stations), or for sources with standalone EU’s (e.g., emergency backup generators or industrial boilers).
- **Equipment List.** A complete list of emissions units (EU’s) or activities that emit one or more regulated air pollutants to the atmosphere that contains the following areas of information (if not already included in a supplemental worksheet):
 - **Descriptions and Specifications.** Descriptive information about the types of EU’s and any insignificant equipment/activities which includes manufacturer name and model and serial numbers.
 - **Power/Capacity Ratings.** The design power or capacity output for all EU’s. The manufacturer’s documentation must be included to support these specifications.
 - **Emission Unit ID Number.** A unique identification number corresponding to each

EU that is presented in the flow diagram (as applicable). The number is fictitious for a new EU, and as listed in the Permit to Operate for an existing EU.

- **Dates of Manufacture, Installation, and Operation for each EU.**
- **Air Pollution Control Equipment (as applicable).** Pollution control devices or measures that reduce the amount of regulated air pollutants emitted to the atmosphere. The following information must be included in an application for all new or modified emission units (EU's), if not already included in a supplemental worksheet.
 - **Air Pollution Control Equipment List.** Identification and description of each control device that shall include design specifications (including capture and control efficiencies), manufacturer, model & serial number, and associated EU's and processes.
 - **Air Pollution Control Measure List.** Description of each control measure that shall include how/where it is applied, how much control is applied, control efficiency, and associated EU's and processes.
- **Emission Unit (EU) and Control Device Worksheet.** Complete and attach the appropriate Emissions Unit and/or Control Device Worksheet for each EU and air pollution control device. Worksheets can be found at OurCleanAir.com, under "*Source Permitting*". If a worksheet isn't available for a specific type of equipment or process, be sure to include all required information that is described in this section, "Supplemental Documents".
- **Source Emissions.** Estimates of each regulated air pollutant that will be emitted to the atmosphere. The following types of emissions must be included in ALL applications for ALL new or modified emissions units and insignificant activities, as noted.
 - **Emission Factor(s).** The short-term rate at which regulated air pollutants can be emitted from an EU or insignificant activity, generally presented as an hour rate (lb/hr) or a rate based on throughput of materials (lb/ton). The amount of pollutant contained within a product can also serve as an emission factor, typically presented as weight of pollutant per volume of product (lb/gal).
 - **Potential to Emit (PTE).** The maximum capacity of a stationary source to emit a pollutant under its physical and operational design. Any physical or operational limitation on the capacity of the source to emit a pollutant, including air pollution control equipment and restrictions on hours of operation or on the type or amount of material combusted, stored, or processed, shall be treated as part of its design if the limitation or the effect it would have on emissions is federally enforceable. Emissions associated with insignificant activities shall be included in the calculation of potential to emit for the facility. Secondary emissions do not count in determining the potential to emit of a stationary source.
 - **Emissions Increase (existing facilities only).** For modifying sources applying for a permit modification, the emissions increase is the difference between the proposed PTE and the current PTE. Any increase in emissions may trigger a new application requirement.
- **Operational Information (as applicable).** If the information isn't included in the required emissions unit and/or control device worksheet(s), provide a list of production rates, fuel types (with consumption rates), raw materials (with throughput rates), and

operating schedules. Provide enough information to calculate hourly and annual emissions. List any inherent limitations on operations (not to include self-imposed limits) or work practice standards affecting emissions.

- **Safety Data Sheet (SDS).** As applicable, provide a detailed document prepared by the manufacturer or importer of a hazardous chemical that describes its physical and chemical properties. In all cases, attach the most current SDS for each specific or class of VOC-containing material (paints, solvents, thinners, etc.) in use. Attach SDS's for all proposed materials to new applications; attach SDS's for new/existing materials to revision applications that propose changes to the weighted average VOC content.
- **Compliance Monitoring Devices (as applicable).** Provide identification and description of each air pollution compliance monitoring device or activity, including design specifications, manufacturers, model & serial numbers, and all associated emission units and processes.
- **Stack Information List (as applicable).** If not included in the required worksheet, provide emissions (exhaust) stack location, height above grade, diameter (inside or effective), exhaust gases, flow rate (in actual cubic feet per minute), and temperature (in degrees Fahrenheit).
- **Federal Performance Standards List (as applicable).** A list of the federal performance standards, emission limits, and requirements that apply to the source (i.e., NSPS, NESHAP, and MACT). If the source has an EPA or AQMD approved exemption for one or more performance standards, attach the exemption approval(s) to the application.
- **Applicable Requirement Supplement (as applicable).** Provide requirements of federal, state, or local jurisdictions that are not included in DBOH Regulations Governing Air Quality Management 030.000-030.995. These may be specified in a court order, Hearing Officer or Hearing Board order, consent decree, compliance plan, etc.

Other Supplemental Documents (attach as applicable)

- **Construction Schedule.** A schedule outlining the timeline for constructing a new or modified source. Dates can be approximate. Not applicable to sources that have already been constructed or do not require construction.
- **Applicable Requirement Exemption List.** Provide a detailed list of requested exemptions from otherwise applicable requirements. Include detailed justification to support each request for an exemption.
- **Existing Facilities.** Include in the narrative any equipment to be removed/replaced as a result of this permit action.