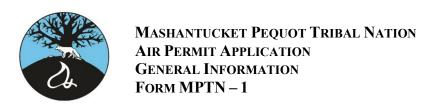


## I. FACILITY INFORMATION

a. Facility Name:					
b. Facility Location:					
Street Address					
	-				
	City		State	Zip Code	
Mailing Address					
	-				
	City		State	Zip Code	
c. Person preparing permit application:	Name		Title		
	Company				
	Telephone		'Fcz		
	Email		Date		
d. SIC Codes and Descriptions					
Primary SIC Code		Description			
Secondary SIC Code		Description			
(if applicable)		Description			
e. Brief description of facility or proposed facility to be permitted:					
f. Primary product produced (or activity performed) at this facility:					
g. Type of Business:	Corporation	State or Federal	Entity		
	☐ Tribal	Other Governmental or Quasi-Public Entity			
	Other (specify):	Other Governmental of Quasi-Fublic Entity			
	-				

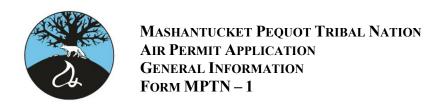


## II. CONTACT INFORMATION

a. Operator/Owner Name:  Mailing Address			
Telephone Number	City	StateEmail	Zip Code
b. Compliance Officer:  Mailing Address  (if different from above)			
Telephone Number	City		
c. Facility Contact:  Mailing Address			
(if different from above)			
Telephone Number	City	StateEmai	

## III. TOTAL FACILITY EMISSIONS DATA

Emissions Summary:				
Pollutant	Actual (lb/year)	Potential (lb/year)	Actual (tons/year)	Potential (tons/year)
Nitrogen Oxides				
Volatile Organic Compounds				
Carbon Monoxide				
PM-10				
PM-2.5				
Sulfur Dioxide				
HAPs				



IV	•	SUPPORT DATA – Check each of the following that apply:					
		Calculations used in determining emissions					
		Equipment vendor data, i.e. specifications, guarantees, control efficiencies					
		A site plan of the facility showing the location of all emission points.					
	A photocopy of a USGS map section with the site location clearly indicated						
		Process flow diagram					
V		CERTIFICATION					
	Based on information and belief formed after reasonable inquiry, I certify that the statements and information contained in this application are to the best of my knowledge true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.						
		Type or Print Name Title					
		Signature Date					