

FORM H

(Rules 9, 10 and 11)

AIR POLLUTION RULES, 2014

PERMIT APPLICATION FORM

GENERAL INSTRUCTIONS:

- This form must be completed in **Print or Type and signed**.
- **All fields must be completed.** Tick (✓) the appropriate box where provided and mark N/A (not applicable) in fields that do not apply. Any form with blank fields will be considered incomplete and may result in the refusal by the Authority to accept this application (Rule 15).
- Refer to the Instructional Booklet and the Completed Sample Form for detailed item descriptions and instructions.
- **One hard copy and one soft copy (in PDF format)** of the completed form and attachments must be submitted along with the proof of payment.

NOTE: According to the Air Pollution (Fees) Regulation, 2014, the Registration Fee payable is subject to Rule 2(4) and therefore, the Environmental Management Authority reserves the right to determine the facility size and amount payable based on the Rule.

Declaration

I declare that the information provided on this application form and supporting documents is true and correct to the best of my knowledge, information and belief. I hereby acknowledge that any wilfully, false or fraudulent statement made by me makes me liable to prosecution to the full extent of the law.

Applicant:

Surname/ Last Name, First Name
PRINT NAME

SIGNATURE

Official Title/Position:

Principal Executive Officer:

Surname/ Last Name, First Name
PRINT NAME

SIGNATURE

Official Title/Position:

Mailing Address (number, street, village/ city): /P.O. Box No. _____

Postal Code:

Telephone No.: _____

Fax No.: _____

Mobile No.: _____

Email: _____

Date: _____

(DD/MM/YYYY)

FOR OFFICIAL USE ONLY

Date Application Received:	_____	Received by			
	(Day/Month/Year)				
Amount Received:	_____	Amount Payable (based on annual sales value):	_____		
Receipt Number:	_____				
Permit Reference Number:	APP	Major Group Code according to Standard Industrial Classification (SIC) Systems:	ISIC		
			NAICS		
Region / Parish Name		Region / Parish ID			
_____		_____			
_____		_____			
Facility Size:	Mini & Micro <input type="checkbox"/>	Small <input type="checkbox"/>	Medium <input type="checkbox"/>	Large <input type="checkbox"/>	

1. Permit Application Type

INITIAL RENEWAL UPDATE TO INITIAL/RENEWAL PERMIT APPLICATION

Source Emitter Registration APR No.: _____

Existing Permit No.: **APP**_____

Expiration date of existing Permit: _____

2. Name of Parent Facility (if applicable)

3. Name of Emitter Facility (If different from **Item 2** above)

4. Facility Contact Information

Name (*first, last*): _____

Official Position: _____

Mailing Address (*number, street, village/ city*)/ P.O. Box No.: _____

Postal Code: _____

Email Address:	Fax No.:
Telephone No. (office):	Telephone No. (mobile):

5. Age of Facility:

State whether any modifications were made to the facility *at any time after the submission of an Application for Source Emitter Registration.*

Age of major components:

Major Component/ Equipment	Year Installed	Year Modified

6. Permits/Certificates/Licences/Approvals

List all Permits, Certificates, Licences and approvals granted or required by the Authority or any other government entity that are currently in effect, or, have been in effect, *at any time after the submission of an Application for Source Emitter Registration.*

Issuing Agency	Type of Permit, Certificate or Licence or Approval	Reference No.	Date Issued DD/MM/YY	Expiration Date DD/MM/YY

6a. Copies of Permits/Certificates/Licences/Approvals Attached (not issued by the Authority) Yes No

Attachment A: _____

7. Characteristics of the Surrounding Environment:**7a. Meteorological Conditions:**

Provide data on the meteorological conditions at the site. The data should include, but not be limited to: wind speed and direction, atmospheric stability, temperature, solar radiation, precipitation, barometric pressure and local circulation patterns.

Attachment B(1): _____

Are there any air dispersion modelling studies which pertain to this facility?

Yes No

If yes, please attach a copy of any such report to this application.

Attachment B(2): _____

7b. Topographic Description:

Provide a description of the topography. Include any digital elevation models, GIS maps, other maps.

Attachment C: _____

7c. Topographic Map:

A 1:25,000 (or Other Appropriate Scale) Topographic Map (i) showing the facility's location and extending to at least 1 km beyond the facility's boundary, (ii) all adjoining facilities and (iii) location of any known sensitive human, animal or plant receptors. The map shall be at a relevant scale, to facilitate comprehension of the location of the facility in relation to the surrounding environment.

Attachment D: _____

7d. Land Use and Sensitive Receptors:

Provide a description of the existing land use on or around the location of the emitter facility, and the location of any known sensitive human, animal or plant receptors (e.g., hospitals, schools, environmentally sensitive areas etc.) within one (1) kilometre beyond the boundary of the facility.

Attachment E(1): _____

Are there any studies relating to land use and sensitive receptors (e.g., Human Health and Ecological Risk Assessment) which pertain to this facility?

Yes No

If yes, please attach a copy of any such report to this application.

Attachment E(2): _____

8a. Provide a Detailed Description of the Facility's Operations and Activities that Generate or Will Generate Air Pollutants.

This description shall include, but not be limited to,

- (i) a description of the process, identifying all emission sources
- (ii) raw materials, products and by-products;
- (iii) chemical composition of wastes and emissions; and
- (iv) location of emission sources specific to the process.

The description of emissions shall include, but not be limited to:

- (i) a description of all emissions (both actual and potential) from each emission unit;
- (ii) a description of all points of emissions;
- (iii) the duration and frequency of the emission;
- (iv) fuel information (type and consumption) for each emission unit; and
- (v) identification of air pollution control equipment and compliance monitoring devices.

Provide technical data sheets and/or manufacturer specifications for each equipment associated with air emissions, including emergency/back-up equipment and ancillary equipment/utilities (e.g., cooling towers, sewage treatment plants). Provide details of storage tanks, including type of liquid, design capacity and type of roof (e.g., fixed or floating). If a flare(s) stack is present on site provide stack elevations, exit temperatures, flow rates, flare stack dimensions and frequency of release.

Attachment F: _____

8b. Detailed Process Flow Diagram(s) showing each process or emission source(s), control equipment, emission points, and their relationships.

Attachment G: _____

8c. Site Plan of the Facility e.g., Scaled Map(s) [1:10 000 or 1:5000 (or Other Appropriate Level)] and/or Sketch(es) Showing: (i) Property boundaries; (ii) Adjoining facilities; (iii) The physical layout of all existing infrastructure; (iv) The location of all emission sources: point and non-point (e.g., stacks, flares, vents); (v) Ambient air quality monitoring locations. Site plan(s) shall be at relevant scales, to facilitate the comprehension of location, design, construction or operational processes, where necessary.

Attachment H: _____

9. Planned/Scheduled Maintenance/ Shutdown

Provide the dates and details of all proposed/planned/scheduled maintenance/start-up/shutdown. Identify the affected areas of the process, changes in emissions and mitigation measures to address these changes.

Attachment I: _____

10. Determination of Quantity of Emissions:

- Direct measurement of emissions
- Calculations
- Modelling

OTHER (*PLEASE SPECIFY*): _____

Note: If direct measurement of substance is done, complete the Ambient Air Quality Data and Stack Release Characteristics Tables (Questions 12 and 13). *Please note that the Authority reserves the right to request direct measurement (stack and/or ambient testing) where emission estimation and/or modelling is done.*

Emission estimation may be based on the following: Predictive emissions monitoring, mass balance, use of emission factors, emission estimation model, manufacturer specifications and engineering calculations. If any other method for the determination of air quality is used, provide all supporting documents as attachments. Supporting information includes, but is not limited to, methodology, internationally accepted standards, any assumptions made, reference materials and all calculations.

Attachment J: _____

11a. Ambient Air Quality Data Complete one table for each sample point (use additional sheets if necessary).

AMBIENT AIR QUALITY DATA			
Date of testing		Sample Point/ ID	
Sample Location UTM Coordinates (WGS84, Zone 20N)	Eastings (mE)	Period of Sampling	Start date and time:
	Northings (mN)		End date and time:
Wind Direction		Wind Speed	
Temperature		Facility Operating Conditions	
Weather Conditions			

SUBSTANCE	SHORT-TERM VALUE		LONG-TERM VALUE	
	Concentration * ($\mu\text{g}/\text{m}^3$)	Averaging Time	Concentration ($\mu\text{g}/\text{m}^3$)	Averaging Time
Total Suspended Particulate (TSP)		24 hours		
*PM ₁₀		24 hours		1 year
*PM _{2.5}		24 hours		1 year
Carbon monoxide (CO)		15 minutes		
		30 minutes		
		1 hour		
		8 hours		
Nitrogen Dioxide (NO ₂)		1 hour		1 year
Sulfur dioxide (SO ₂)		10 minutes		1 year
		24 hours		
Ozone (O ₃)		8 hours		
Sulfuric acid (H ₂ SO ₄)		30 minutes		
Hydrogen sulphide (H ₂ S)		30 minutes		
Ammonia (NH ₃)		30 minutes		
Total fluoride		24 hours		90 days
Hydrogen chloride (HCl)		30 minutes		
Chlorine (Cl) and its compounds		30 minutes		
Asbestos (fibres >5 μm in length)	fibres/cm ³	24 hours		
Asbestos (total)		30 minutes		
Cadmium (Cd) and its compounds (total Cd in free and combined form)		30 minutes		
Mercury (Hg) and its compounds (total alkyl Hg compounds)		30 minutes		
Mercury (Hg) and its compounds (total Hg in free and combined form)		30 minutes		

SUBSTANCE/ PARAMETER	SHORT-TERM VALUE		LONG-TERM VALUE	
	Concentration * ($\mu\text{g}/\text{m}^3$)	Averaging Time	Concentration ($\mu\text{g}/\text{m}^3$)	Averaging Time
Antimony (Sb) and its compounds (total Sb in free and combined form)		30 minutes		
Beryllium (Be) compounds		24 hours		
Lead (Pb)		30 minutes		3 months
				1 year
Biphenyl (C_6H_5) ₂		1 hour		
Carbon disulfide (CS_2)		24 hours		
Ethylbenzene ($\text{C}_6\text{H}_5\text{C}_2\text{H}_5$)		24 hours		
Formaldehyde (CH_2O)		24 hours		
Mercaptan (as Methyl Mercaptan CH_3SH)		1 hour		
Polychlorinated biphenyls (PCBs)		24 hours		1 year
Xylenes ($\text{C}_6\text{H}_4(\text{CH}_3)_2$) (isomers and mixture)		24 hours		
Total dioxins and furans	pg TEQ/ m^3	24 hours		
Other (please specify)				

*All values are in $\mu\text{g}/\text{m}^3$ unless otherwise specified. * PM_{10} means Particulate Matter with an aerodynamic diameter of less than or equal to $10\mu\text{m}$. * $\text{PM}_{2.5}$ means Particulate Matter with an aerodynamic diameter of less than or equal to $2.5\mu\text{m}$.

11b. Data Records

Attach the quality assurance/control documents in support of the data supplied. Include the description or reference of each test method, names and qualifications of the person/s who conducted the sampling and analyses, sample records, chain of custody records, quality control sample records, general field procedures, sample data, sample management records, sampling and analytical methods and techniques, laboratory reports, calibration records for the instruments used and the certification or accreditation of the laboratory where the analyses were conducted, if applicable.

Supporting information, such as, facility operating conditions during sampling, production levels, details of any planned or unplanned start-up, shutdown or scheduled maintenance works that has the potential to alter pollutant characteristics and meteorological data shall be provided.

Attachment K: _____

12a. Stack Release Emissions Data. Complete one table for each stack release (use additional sheets if necessary).

STACK RELEASE CHARACTERISTICS			
Emission Name/ ID			
UTM Coordinates (WGS84, Zone 20N)	Eastings (mE)	Stack Dimensions	Height from ground to point of exit:
	Northings (mN)		Diameter:
Sampling	Run Time (e.g. three (3) one- hour runs):	Emission Rate	(m ³ /hr)
	Sample period:	Frequency of Emission	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent
Exit Velocity (if applicable)		Exit Temperature (if applicable)	
Net Heating value in Btu/scf (if applicable)			

SUBSTANCE	CONCENTRATION/ VALUE (mg/Nm ³)	SUBSTANCE	CONCENTRATION/ VALUE (mg/Nm ³)
Particulate Matter		Chlorine (Cl) and its compounds	
Opacity		Lead (Pb) and its compounds	
Sulfur dioxide (SO ₂)		Antimony (Sb) and its compounds	
Oxides of Nitrogen (NO _x)		Arsenic (As) and its compounds	
Carbon monoxide (CO)		Cadmium (Cd) and its compounds	
Sulfuric acid (H ₂ SO ₄) mist or sulphur trioxide (SO ₃)		Mercury (Hg) and its compounds	
Hydrogen sulphide (H ₂ S)		Heavy metals (other)	
Ammonia (NH ₃)		Volatile Organic Compounds (VOCs)	
Fluorine (F) and its compounds		Dioxins	ng TEQ/Nm ³
Acids and acid gases as hydrogen chloride (HCl)		Furans	ng TEQ/Nm ³
Other (please specify)		Other (please specify)	

12b. Data Records

Attach the quality assurance/control documents in support of the data supplied. Include the names and qualifications of the person/s who conducted the sampling and analyses, sample records, sample date and time, chain of custody records, quality control sample records, general field procedures, sample data, sample management records, test methods, laboratory reports, calibration records for the instruments used and the certification/ accreditation of the laboratory where the analyses were conducted, if applicable.

Supporting information, such as, operating capacity, fuel type, Carbon Dioxide (CO₂) and Oxygen (O₂) content shall be provided, along with meteorological conditions at the time of sampling.

Attachment L: _____

13. Air Pollution Management Programme

Is there an air pollution management programme or are any measures (monitoring equipment, systems of treatment and control, pollution prevention measures) in place to reduce or prevent air pollutants from entering into the atmosphere?

Yes

No

If yes, please describe (include the technology employed, operational and maintenance procedures).

Attachment M: _____

14. Air Pollution Emergency Response Plans and Procedures

Is there an air pollution emergency response plan and/or procedures for the facility?

Yes

No

If yes, please provide.

Attachment N: _____

15. Confidentiality Claim

If there is a desire on the part of the Applicant for any information provided to remain confidential because such information is considered to be a trade secret, confidential business information and/or if disclosed, would be contrary to the public interest, attach a Confidentiality Claim (Form W) and proof of payment of the prescribed fee. Identify each segment of information on each page that is submitted as confidential, and provide justification for each segment claimed as confidential.

Confidentiality Claim (Form W) and proof of payment are attached:

Yes

No

Attachment O: _____

16. List of Attachments

In the table below, list all the attachments included with the application, the number of pages in each attachment and the number of copies. Number all pages in each attachment.

	Attachment Name/Description	Number of Pages	Number of Copies
<input type="checkbox"/>	ATTACHMENT A: Copies of Permits, Certificates, Licenses and Approvals		
<input type="checkbox"/>	ATTACHMENT B(1): Meteorological Data		
<input type="checkbox"/>	ATTACHMENT B(2): Air Dispersion Modelling Studies		
<input type="checkbox"/>	ATTACHMENT C: Topographic Description		
<input type="checkbox"/>	ATTACHMENT D: Topographic Map		
<input type="checkbox"/>	ATTACHMENT E(1): Description of Land Use		
<input type="checkbox"/>	ATTACHMENT E(2): Studies Relating Land Use and Sensitive Receptors		
<input type="checkbox"/>	ATTACHMENT F: Description of Facility's Operation and Activities		
<input type="checkbox"/>	ATTACHMENT G: Process Flow Diagram		
<input type="checkbox"/>	ATTACHMENT H: Site Plan		
<input type="checkbox"/>	ATTACHMENT I: Maintenance Schedule		
<input type="checkbox"/>	ATTACHMENT J: Emission Estimation		
<input type="checkbox"/>	ATTACHMENT K: Data Records- Ambient		
<input type="checkbox"/>	ATTACHMENT L: Data Records- Stack		
<input type="checkbox"/>	ATTACHMENT M: Air Pollution Management Programme		
<input type="checkbox"/>	ATTACHMENT N: Air Pollution Emergency Response Plan		
<input type="checkbox"/>	ATTACHMENT O: Claim for Confidentiality		
<input type="checkbox"/>	ATTACHMENT P: Other		