Middletown Materials

RECEIVED
AUG 29 2025
By

August 26, 2025

APC-2026/0215-Construction

State of Delaware
DNREC
Division of Air Quality
715 Grantham Lane
New Castle, DE 19720

Attn: Ramy Hassan

RE: Middletown Materials - Air Permit
Updated Permit

Mr. Hassan,

Middletown Materials is requesting to amend the Middletown Materials Air Quality Permit (APC-2002/0738-OPERATION (SM)) to include one (1) additional piece of equipment. The equipment number and the paperwork included in this packet are listed below. We have also enclosed a check for the advertising and amendment fees.

GCS-28 McCloskey International – J45

- AQM 1
- AQM 2
- AQM 3.3
- AQM 3.9
- AQM 5

If you have any questions, or need additional information, please feel free to email [redacted] or call (302-453-8286 x133) myself or [redacted]

Sincerely,

[redacted]

10 ADEL DR. NEWARK, DE 19702 TELE. 302-453-8286 FAX. 302-453-9550

Administrative Information

One original and one copy of All Application Forms Should Be Mailed To:
Division of Air Quality
100 West Water Street, Suite 6A
Dover, DE 19904

All Checks Should Be Made Payable To:
State of Delaware

Company and Site Information

1.	Company Name: **Middletown Materials, LLC**		
2.	Company Mailing Address: **10 Adel Dr.**		
	City: **Newark**	State: **DE**	Zip Code: **19702**
3.	Site Name: **Middletown Materials**		
4.	Site Mailing Address: **1559 Cedar Lane Rd** *(if different from above)*		
	City: **Middletown**	State: **DE**	Zip Code: **19709**
5.	Physical Location of Site: **Same** *(if different from above)*		
	City:	State:	Zip Code:
6.	Site Billing Address: **10 Adel Dr.** *(if different from above)*		
	City: **Newark**	State: **DE**	Zip Code: **19702**
7.	Air Quality Management Facility ID Number: **1000300646**		
8.	Site NAICS Code): **423320** *(list all that apply*		
9.	Site SIC Code: **50329901** *(list all that apply)*		
10.	Site Location Coordinates:	Latitude: 39 ° 48' 52" Longitude: -75 ° 70' 08"	
11.	Is the Facility New or Existing?	☐ NEW ☒ EXISTING	
If the Facility is an Existing Facility, Complete the Rest of Question 11. If Not, Proceed to Question 12.			
11.1.	Does the Facility Have Active Air Permits?	☒ YES ☐ NO	
12.	Is this Application For New Equipment or a Modification to Existing Equipment? ☒ New Equipment ☐ Modification of Existing Equipment ☐ Other (Specify):		
If the application is for the modification of existing equipment, complete the rest of Question 12. If not, proceed to Question 13.			

Company and Site Information	
12.1. Does the Equipment Have an Active Air Permit?	☐ YES ☒ NO
If the equipment has an active air permit, complete the rest of Question 12. If not, proceed to Question 13.	
12.2. Permit Number of Existing Equipment:	
13. Status of Equipment Being Applied For:	☐ Natural Minor Source ☒ Synthetic Minor Source ☐ Major Source ☐ Federally Enforceable Restrictions
14. Facility Status:	☐ Natural Minor Facility ☒ Synthetic Minor Facility ☐ Major Facility
If the facility is a Major Source, complete the rest of Question 14. If not, proceed to Question 15.	
14.1. Responsible Official Name:	
14.2. Responsible Official Title:	

Contact Information	
15.	Name of Owner or Facility Manager: [redacted]
16.	Title of Owner or Facility Manager: **Member**
17.	Permit Contact Name: [redacted]
18.	Permit Contact Title: **Member**
19.	Permit Contact Telephone Number: **302-453-8286 ext. 105**
20.	Permit Contact Fax Number: **302-453-9550**
21.	Permit Contact E-Mail Address: [redacted]
22.	Billing Contact Name: [redacted]
23.	Billing Contact Title: **Executive Assistant**
24.	Billing Contact Telephone Number: **302-453-8286**
25.	Billing Contact Fax Number: **302-453-9550**
26.	Billing Contact E-Mail Address: [redacted]

Proposed Construction and Operating Schedule	
27.	When Will the Proposed Construction/Installation/Modification Occur: 9/1/2025
28.	Proposed Operating Schedule: **8** hours/day **5** days/week **50** weeks/year
28.1.	Is There Any Additional Information Regarding the Operating Schedule? ☐ YES ☒ NO
If YES, complete the rest of Question 28. If NO, proceed to Question 29.	

Proposed Construction and Operating Schedule

28.2. Describe the Additional Information:

Coastal Zone Information

29. Is the Facility Located in the Coastal Zone? ☐ YES ☒ NO

If the facility is located in the Coastal Zone complete the rest of Question 29. If not, proceed to Question 30.

29.1. Is a Coastal Zone Permit Required for Construction or Operation of the Source Being Applied for? ☐ YES ☐ NO

Attach a copy of the Coastal Zone Determination if it has not been previously submitted

If a Coastal Zone Permit is required complete the rest of Question 29. If not, proceed to Question 30.

29.2. Has a Coastal Zone Permit Been Issued? ☐ YES ☐ NO

Attach a copy of the Coastal Zone Permit if it has not been previously submitted

Local Zoning Information

30. Parcel Zoning: **Industrial**

Attach Proof of Local Zoning if it has not been previously submitted

Application Information

31. Is the Appropriate Application Fee Attached? ☒ YES ☐ NO

32. Is the Advertising Fee Attached? ☒ YES ☐ NO

For help determining your application and advertising fees see: https://dnrec.delaware.gov/air/permitting/fees/.

Attach the appropriate fees. Note that your Application will not be considered complete if the appropriate fees are not included.

33. Is a Cover Letter Describing the Process Attached? ☐ YES ☒ NO

Attach a brief cover letter describing your Application.

If the Facility is a New Facility complete Question 34. If not, proceed to Question35.

34. Is a Copy of the Applicant Background Information Questionnaire on Record at the Department? ☐ YES ☐ NO

If NO, complete the rest of Question 34. If YES, process to Question 35.

34.1 Is a Copy of the Applicant Background Information Questionnaire Attached? ☐ YES ☐ NO

For a copy of the Applicant Background Information Questionnaire see https://documents.dnrec.delaware.gov/services/Documents/Chapter79Form.pdf.

Attach a copy of the Applicant Background Information Questionnaire if applicable.

35. Check Which Application Forms are Attached:

Application Information

☒ AQM-1	☐ AQM-3.4	☒ AQM-3.9	☐ AQM-3.14	☐ AQM-4.4	☐ AQM-4.9	☐ AQM-6
☒ AQM-2	☐ AQM-3.5	☐ AQM-3.10	☐ AQM-3.15	☐ AQM-4.5	☐ AQM-4.10	
☐ AQM-3.1	☐ AQM-3.6	☐ AQM-3.11	☐ AQM-4.1	☐ AQM-4.6	☐ AQM-4.11	
☐ AQM-3.2	☐ AQM-3.7	☐ AQM-3.12	☐ AQM-4.2	☐ AQM-4.7	☐ AQM-4.12	
☒ AQM-3.3	☐ AQM-3.8	☐ AQM-3.13	☐ AQM-4.3	☐ AQM-4.8	☒ AQM-5	

36. Check Which Documents are Attached:

- ☐ Coastal Zone Determination
- ☐ Coastal Zone Permit
- ☐ Proof of Local Zoning
- ☒ Application Fee
- ☒ Advertising Fee
- ☐ Applicant Background Information Questionnaire
- ☐ Claim of Confidentiality
- ☒ Manufacturer Specification(s)
- ☐ Material Safety Data Sheets (MSDSs)
- ☐ Supporting Calculations
- ☐ Descriptive Cover Letter
- ☐ Other (Specify):

Confidentiality Information

37. Do You Consider Any of the Information Submitted With this Application Confidential? ☐ YES ☒ NO

For help on how to submit a confidentiality claim see https://dnrec.delaware.gov/foia/.

If a Claim of Confidentiality is made it MUST meet the requirements of Section 6 of DNREC's Freedom of Information ("FOIA") Regulation at the time the Application is submitted.

Community Outreach Information

38.	Local Community Leader Name and Title: [redacted], **HOA Board Member**
39.	Organization Represented by Community Leader: **Pleasanton HOA**
40.	Local Community Leader E-Mail Address: [redacted]
41.	Local Community Leader Telephone number:
42.	Local Community Leader Name and Title:
43.	Organization Represented by Community Leader:
44.	Local Community Leader E-Mail Address:
45.	Local Community Leader Telephone number:
46.	Local Community Leader Name and Title:
47.	Organization Represented by Community Leader:
48.	Local Community Leader E-Mail Address:
49.	Local Community Leader Telephone number:

Each application must include the contact information for at least one local community leader. The community leader should represent an organization with an interest in the facility's operations. Community leaders may include representatives of local organizations or homeowners' associations. Community leaders included in this application should not be elected officials.

Signature Block

I, the undersigned, hereby certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all of its attachments as to the truth, accuracy, and completeness of this information. I certify based on information and belief formed after reasonable inquiry, the statements and information in this document are true, accurate, and complete. By signing this form, I certify that I have not changed, altered, or deleted any portions of this application. I acknowledge that I cannot commence construction, alteration, modification or initiate operation until I receive written approval (i.e. permit, registration, or exemption letter) from the Department. I acknowledge that I may be required to perform testing of the equipment to receive construction or operation approval, and that if I do not receive approval to construct or operate that I may appeal the decision.

[redacted]
Owner's Operator

9/27/25
Date

[redacted]
Signature of Owner or Operator

One Original and One Copy of All Application Forms Should Be Mailed To:
Division of Air Quality
100 W. Water Street, Suite 6A
Dover, Delaware 19904

All Checks Should Be Made Payable To:
State of Delaware

Crushed Stone Equipment Application

If you are using this form electronically, press F1 at any time for help

General Information

1. Facility Name: **Middletown Materials, LLC**
2. Equipment ID Number: **GCS-28**
3. Where Does the Stone Originate: ☐ On-Site
   ☒ Off-Site (Specify): **Concrete and Hot-Mix Asphalt from public roadway projects for numerous government agencies.**
4. Locations Where Crusher Will Operate:

If the Crusher will operate at more than five locations, attach additional copies of this page as needed. Note that state law requires that a public notice for each location be made.

	Street Address	City	County	Zip Code	Condition of Roads at Location
4.1.	**1559 Cedar Lane Road**	**Middletown**	**New Castle**	**19709**	☐ Paved ☐ Unpaved ☒ Both
4.2.	**10 Adel Drive**	**Newark**	**New Castle**	**19702**	☐ Paved ☐ Unpaved ☒ Both
4.3.	**20139 Lowes Road**	**Gumboro**	**Sussex**	**19966**	☐ Paved ☐ Unpaved ☒ Both
4.4.	**350 Salem Church Road**	**Newark**	**New Castle**	**19702**	☐ Paved ☐ Unpaved ☒ Both
4.5.					☐ Paved ☐ Unpaved ☐ Both

Attach Proof of Local Zoning for each location.

5. Material Crushed:

If more than five Materials are crushed, attach additional copies of this page as needed.

	Material Name	Material Description
5.1.	**Concrete**	
5.2.	**Hot-Mix Asphalt**	
5.3.		
5.4.		
5.5.		

6. Is a Feeder Used to Sort the Material Before Crushing? ☒ YES ☐ NO

If YES, complete the rest of Question 6. If NO, proceed to Question 7.

6.1. Is a Wet Suppression System Used to Control Emissions From the Feeder? ☒ YES ☐ NO

General Information

6.2. Feeder Power Provided By: ☒ Generator/Engine ☐ Utility ☐ Other (Specify):

If a Generator/Engine is used, include completed Form AQM-3.3 with this application.

Crusher Information

7. Number of Crushers: **1**

If there are more than two Crushers, attach additional copies of this page as needed.

For Primary Crusher

8. Primary Crusher Identification: **GCS-28**

8.1. Primary Crusher Manufacturer: **McCloskey International**

8.2. Primary Crusher Model: **J45**

8.3. Primary Crusher Serial Number: **86729**

8.4. Maximum Amount of Material Processed in Primary Crusher: **300 ton/hr**

8.5. Is a Wet Suppression System Used to Control Emissions from the Crusher? ☒ YES ☐ NO

8.6. Primary Crusher Power Provided By: ☒ Generator/Engine ☐ Utility ☐ Other (Specify):

If a Generator/Engine is Used, Include Completed Form AQM-3.3 With this Application

8.7. Is a Screen Used to Sort Crushed Material? ☐ YES ☒ NO

If YES, complete the rest of Question 8.7. If NO, proceed to Question 9.

8.7.1. Is a Wet Suppression System Used to Control Emissions from the Screen? ☐ YES ☐ NO

8.7.2. Screen Power Provided By: ☐ Generator/Engine ☐ Utility ☐ Other (Specify):

If a Generator/Engine is used, include completed Form AQM-3.3 with this application.

For the Secondary Crusher. If There is No Secondary Crusher, Proceed to Question 10.

9. Secondary Crusher Identification:

9.1. Manufacturer:

9.2. Model:

9.3. Serial Number:

9.4. Maximum Amount of Material Processed: **ton/hr**

9.5. Is a Wet Suppression System Used to Control Emissions from the Crusher? ☐ YES ☐ NO

9.6. Power Provided By: ☐ Generator/Engine ☐ Utility ☐ Other (Specify):

If a Generator/Engine is used, include completed Form AQM-3.3 with this application.

Crusher Information

9.7. Is a Screen Used to Sort Crushed Material? ☐ YES ☐ NO

If YES, complete the rest of Question 9.7. If NO, proceed to Question 10.

9.7.1. Is a Wet Suppression System Used to Control Emissions From the Screen? ☐ YES ☐ NO

9.7.2. Screen Power Provided By: ☐ Generator/Engine
☐ Utility
☐ Other (Specify):

If a Generator/Engine is used, include completed Form AQM-3.3 with this application.

Conveyor Information

10. Are Conveyors Used in the Process? ☒ YES ☐ NO

If YES, proceed to Question 11. If NO, proceed to Question 15.

11. Number of Conveyors in Process: **2**

If more than three Conveyors are used, attach additional copies of this page as needed.

For the First Conveyor

12. Conveyor Identification: **Side Conveyor**

12.1. Location: ☒ Before (Specify Equipment): **Crusher**
☒ After (Specify Equipment): **Crusher Pre-Screen**
☐ Between (Specify Equipment):

12.2. Maximum Amount of Material Conveyed: **160 ton/hr**

12.3. Is a Wet Suppression System Used to Control Emissions? ☒ YES ☐ NO

12.4. Conveyor Power Provided By: ☒ Generator/Engine
☐ Utility
☐ Other (Specify):

If a Generator/Engine is used, include completed Form AQM-3.3 with this application.

For the Second Conveyor. If There Is No Second Conveyor, Proceed to Question 15.

13. Conveyor Identification: **Main Conveyor**

13.1. Location ☐ Before (Specify Equipment):
☒ After (Specify Equipment): **Crusher**
☐ Between (Specify Equipment):

13.2. Maximum Amount of Material Conveyed: **300 ton/hr**

13.3. Is a Wet Suppression System Used to Control Emissions? ☒ YES ☐ NO

13.4. Conveyor Power Provided By: ☒ Generator/Engine
☐ Utility
☐ Other (Specify):

If a Generator/Engine is used, include completed Form AQM-3.3 with this application.

For the Third Conveyor. If There Is No Third Conveyor, Proceed to Question 15.

14. Conveyor Identification:

Conveyor Information

14.1. Location: ☐ Before (Specify Equipment):
☐ After (Specify Equipment):
☐ Between (Specify Equipment):

14.2. Maximum Amount of Material Conveyed: **ton/hr**

14.3. Is a Wet Suppression System Used to Control Emissions? ☐ YES ☐ NO

14.4. Conveyor Power Provided By: ☐ Generator/Engine
☐ Utility
☐ Other (Specify):

If a Generator/Engine is used, include completed Form AQM-3.3 with this application.

Fines Crushing Information

15. Do you perform any of the following activities at your facility: ☐ Pulverize Minerals
☐ Produce Sand
☐ Crush Stone Into a Fine Product

If you checked any of the boxes above, include complete Form AQM-3.10 with this application.

Visible Emissions Monitoring Information

16. Proposed Technique Used to Monitor Visible Emissions: ☐ Opacity Monitor (COM)
☒ Manual (Method 9)
☐ Manual (Method 22)
☐ Other (Describe):

If an Opacity Monitor (COM) is used, complete the rest of Question 16. If not, proceed to Question 17.

16.1. Describe the Continuous Opacity Monitoring System:

16.2. Manufacturer:

16.3. Model:

16.4. Serial Number:

17. Proposed Frequency of Opacity Monitoring:

Voluntary Emissions Limitation Request Information

18. Are You Requesting Any Voluntary Emission Limitations to Avoid Major Source Status, Minor New Source Review, MACT, NSPS, etc.? ☐ YES ☒ NO

If YES, complete the rest of Question 18. If NO, proceed to Question 19.

19.1. Describe Any Proposed Emission Limitations:

Voluntary Operating Limitation Request Information

19.	Are You Requesting Any Voluntary Operating Limitations to Avoid Major Source Status, Minor New Source Review, MACT, NSPS, etc.?	☐ YES ☒ NO
If YES, complete the rest of Question 19. If NO, proceed to Question 20.		
19.1.	Describe Any Proposed Operating Limitations:	

Additional Information

20.	Is There Any Additional Information Pertinent to this Application?	☐ YES ☒ NO
If YES, complete the rest of Question 20.		
20.1.	Describe:	

DNREC – Division of Air Quality
Application to Construct, Operate, or Modify Stationary Sources

Generator/Engine Application

If you are using this form electronically, press F1 at any time for help

General Information

1.	Facility Name: **Middletown Materials, LLC**
2.	Equipment ID: **GCS-28**
3.	Manufacturer: **McCloskey**
4.	Model: **J45**
5.	Serial Number: **86729**
6.	Maximum Power Rating of Engine: **355** horsepower
7.	Standby Power Rating of Generator: kilowatt
8.	Date of Manufacture: **2017**
9.	Installation Date: **2017**
10.	Is the Equipment Being Applied For a Generator or an Engine? ☐ Generator ☒ Engine
If the equipment is a Generator, complete the rest of Question 10. If not, proceed to Question 11.	
10.1.	Is the Generator Existing or New? ☐ Existing ☐ New
10.2.	Will the Generator Be Classified as an Emergency Generator or a Distributed Generator? ☐ Emergency ☐ Distributed
10.3.	Has an Initial Notification Pursuant to 7 **DE Admin. Code** 1144 Been Submitted for this Generator? ☐ YES ☐ NO
If NO, include a copy of the Initial Notification with this application.	
10.4.	Have the Emissions From the Generator Been Certified to Meet the Currently Applicable US EPA Non-Road Emission Standards? ☐ YES ☐ NO
If YES, attach a copy of the Manufacturer's Certification. If NO, attach copies of any/all of the following: any maintenance or operating requirements/instructions provided by the generator manufacturer; the type, or a description, of any emission control equipment use; and/or emissions test data for the generator (such as a manufacturer's technical data sheet), any supporting documentation for any emission control equipment used, any supporting calculations, any quality control or assurance information, and any other information needed to demonstrate compliance with the requirements. Proceed to Question 11.	
11.	Primary Fuel: ☐ Natural Gas ☒ Diesel ☐ Propane ☐ Biodiesel ☐ Other (specify):
11.1.	Maximum Annual Primary Fuel Consumption: **41,600 gal**
11.2.	Heat Content of Primary Fuel: **137,000 BTU/gal**
11.3.	Maximum Firing Rate: **20 gallons/hr**
11.4.	Percent Sulfur of Primary Fuel: **15ppm** %
12.	Secondary Fuel: ☐ Natural Gas ☐ Diesel ☐ Propane ☐ Biodiesel ☐ Other (specify):

General Information

12.1.	Maximum Annual Secondary Fuel Consumption: **MMCF**
12.2.	Heat Content of Secondary Fuel: **BTU/CF**
12.3.	Maximum Firing Rate: **MMCF/hr**
12.4.	Percent Sulfur of Secondary Fuel: %
13.	Is SCR/NSCR/SNCR/Ammonia Injection Used: ☐ YES ☐ NO

Stack Information

14. How Does the Process Equipment Vent:
(check all that apply)
☒ Directly to the Atmosphere
☐ Through a Control Device Covered by Forms AQM-4.1 through 4.12

If any of the process equipment vents directly to the atmosphere proceed to Question 15. If the process equipment vents through a control device, provide the stack parameters on the control device form and proceed to Question 16.

15. Emission Point Name: **J45 Crusher Stack**

15.1. Stack Height Above Grade: **6 feet**

15.2. Stack Exit Diameter: **.33 feet**
(Provide Stack Dimensions If Rectangular Stack)

15.3. Is a Stack Cap Present? ☐ YES ☒ NO

15.4. Stack Configuration: ☐ Vertical ☒ Horizontal ☐ Downward-Venting
(check all that apply) ☐ Other (Specify):

15.5. Stack Exit Gas Temperature: **1160 °F**

15.6. Stack Exit Gas Flow Rate: **2211 ACFM**

15.7. Distance to Nearest Property Line: **500 ft**

15.8. Describe Nearest Obstruction: **N/A**

15.9. Height of Nearest Obstruction: **N/A ft**

15.10. Distance to Nearest Obstruction: **N/A ft**

15.11. Are Stack Sampling Ports Provided? ☐ YES ☒ NO

Monitoring Information

16. Will Emissions Data be Recorded by a Continuous Emission Monitoring System? ☐ YES ☒ NO

If Yes, Attach a Copy of the Continuous Emission Monitoring System Manufacturer's Specification Sheets

If YES, complete the rest of Question 16. If NO, proceed to Question 17.

16.1. Pollutants Monitored: ☐ VOCs ☐ HAPs ☐ PM ☐ PM_{10} ☐ $PM_{2.5}$ ☐ NO_X ☐ SO_X ☐ Metals
☐ Other (Specify):

16.2. Describe the Continuous Emission Monitoring System:

Monitoring Information

16.3. Manufacturer:

16.4. Model:

16.5. Serial Number:

16.6. Will Multiple Emission Units Be Monitored at the Same Point? ☐ YES ☐ NO

If YES, complete the rest of Question 16. If NO, proceed to Question 17.

16.7. Emission Units Monitored:

16.8. Will More Than One Emission Unit be Emitting From the Combined Point At Any Time? ☐ YES ☐ NO

If YES, complete the rest of Question 15. If NO, proceed to Question 17.

16.9. Emission Units Emitting Simultaneously:

Visible Emissions Monitoring Information

For Primary Fuel

17. Proposed Technique Used to Monitor Visible Emissions:
☐ Opacity Monitor (COM)
☒ Manual (Method 9)
☐ Manual (Method 22)
☐ Other (Describe):

If an Opacity Monitor (COM) is used, complete the rest of Question 17. If not, proceed to Question 18.

17.1. Describe the Continuous Opacity Monitoring System:

17.2. Manufacturer:

17.3. Model:

17.4. Serial Number:

18. Proposed Frequency of Opacity Monitoring:

For Secondary Fuel. If no Secondary Fuel is used, proceed to Question 20.

19. Proposed Technique Used to Monitor Visible Emissions:
☐ Opacity Monitor (COMs)
☐ Manual (Method 9)
☐ Manual (Method 22)
☐ Other (Describe):

If an Opacity Monitor (COMs) is used, complete the rest of Question 19. If not, proceed to Question 20.

19.1. Describe the Continuous Opacity Monitoring System:

19.2. Manufacturer:

19.3. Model:

19.4. Serial Number:

20. Proposed Frequency of Opacity Monitoring:

Voluntary Emission Limitation Request Information

21.	Are You Requesting Any Voluntary Emission Limitations to Avoid Major Source Status, Minor New Source Review, MACT, NSPS, etc.?	☐ YES ☒ NO

If YES, complete the rest of Question 21. If NO, proceed to Question 22.

21.1. Describe Any Proposed Emission Limitations:

Voluntary Operating Limitation Request Information

22.	Are You Requesting Any Voluntary Operating Limitations to Avoid Major Source Status, Minor New Source Review, MACT, NSPS, etc.?	☐ YES ☒ NO

If YES, complete the rest of Question 22. If NO, proceed to Question 23.

22.1. Describe Any Proposed Operating Limitations:

Additional Information

23.	Is There Any Additional Information Pertinent to this Application?	☐ YES ☒ NO

If YES, complete the rest of Question 23.

22.1. Describe:

Emissions Information Application

If you are using this form electronically, press F1 at any time for help

Process Information

1. Number of Individual Pieces of Process Equipment in Process: **1 Crusher**
2. Number of Individual Control Devices in Process: **0 - Engine design determines emissions**

Emissions Information for First Emission Point/Stack

3. Emission Point Name: **Crusher Engine**
4. Equipment ID Number for all Process Equipment and Control Devices Venting Through Emission Point/Stack: **1**
5. Pollutant Emissions

If more than 15 pollutants are emitted at this Emission Point/Stack, attach additional copies of this page as needed.

	Pollutant Name (Specify VOCs and HAPs Individually in 5.10 through 5.18)	CAS Number (Not required for 5.1 through 5.10)	Maximum Uncontrolled Emission Rate at Design Capacity	Maximum Controlled Emission Rate at Design Capacity	Annual Potential to Emit (PTE)	Requested Permitted Annual Emissions
5.1.	Particulate Matter (PM)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
5.2.	PM_{10}		**lbs/hour**	**lbs/hour**	tons/year	tons/year
5.3.	$PM_{2.5}$		**lbs/hour**	**lbs/hour**	tons/year	tons/year
5.4.	Sulfur Oxides (SO_X)		**.004 lbs/hour**	**.004 lbs/hour**	tons/year	tons/year
5.5.	Nitrogen Oxides (NO_X)		**.01 lbs/hour**	**.01 lbs/hour**	tons/year	tons/year
5.6.	Carbon Monoxide (CO)		**.01 lbs/hour**	**.01 lbs/hour**	tons/year	tons/year
5.7.	Total Volatile Organic Compounds (VOCs)		**.01 lbs/hour**	**.01 lbs/hour**	tons/year	tons/year
5.8.	Total Hazardous Air Pollutants (HAPs)		**lbs/hour**	**lbs/hour**	tons/year	tons/year

Emissions Information for First Emission Point/Stack						
5.9.	CO_2		lbs/hour	lbs/hour	tons/year	tons/year
5.10.	CO_{2e}		lbs/hour	lbs/hour	tons/year	tons/year
5.11.			lbs/hour	lbs/hour	tons/year	tons/year
5.12.			lbs/hour	lbs/hour	tons/year	tons/year
5.13.			lbs/hour	lbs/hour	tons/year	tons/year
5.14.			lbs/hour	lbs/hour	tons/year	tons/year
5.15.			lbs/hour	lbs/hour	tons/year	tons/year
6.	Provide Any Additional Information Necessary to Understanding the Emission Rates Provided Above:					
Attach the Basis of Determination or Calculations for each Emission Rate provided above.						

Emissions Information for Second Emission Point/Stack						
7.	Emission Point Name:					
8.	Equipment ID Number for all Process Equipment and Control Devices Venting Through Emission Point/Stack:					
9.	Pollutant Emissions					
If more than 15 pollutants are emitted at this Emission Point/Stack, attach additional copies of this page as needed.						
	Pollutant Name (Specify VOCs and HAPs Individually in 9.10 through 9.18)	CAS Number (Not required for 9.1 through 9.10)	Maximum Uncontrolled Emission Rate at Design Capacity	Maximum Controlled Emission Rate at Design Capacity	Annual Potential to Emit (PTE)	Requested Permitted Annual Emissions
9.1.	Particulate Matter (PM)		lbs/hour	lbs/hour	tons/year	tons/year
9.2.	PM_{10}		lbs/hour	lbs/hour	tons/year	tons/year
9.3.	$PM_{2.5}$		lbs/hour	lbs/hour	tons/year	tons/year

Emissions Information for Second Emission Point/Stack

9.4.	Sulfur Oxides (SO_x)		lbs/hour	lbs/hour	tons/year	tons/year
9.5.	Nitrogen Oxides (NO_x)		lbs/hour	lbs/hour	tons/year	tons/year
9.6.	Carbon Monoxide (CO)		lbs/hour	lbs/hour	tons/year	tons/year
9.7.	Total Volatile Organic Compounds (VOCs)		lbs/hour	lbs/hour	tons/year	tons/year
9.8.	Total Hazardous Air Pollutants (HAPs)		lbs/hour	lbs/hour	tons/year	tons/year
9.9.	CO_2		lbs/hour	lbs/hour	tons/year	tons/year
9.10.	CO_{2e}		lbs/hour	lbs/hour	tons/year	tons/year
9.11.			lbs/hour	lbs/hour	tons/year	tons/year
9.12.			lbs/hour	lbs/hour	tons/year	tons/year
9.13.			lbs/hour	lbs/hour	tons/year	tons/year
9.14.			lbs/hour	lbs/hour	tons/year	tons/year
9.15.			lbs/hour	lbs/hour	tons/year	tons/year

10. Provide Any Additional Information Necessary to Understanding the Emission Rates Provided Above:

Attach the Basis of Determination or Calculations for each Emission Rate provided above.

Emissions Information for Third Emission Point/Stack

11. Emission Point Name:

12. Equipment ID Number for all Process Equipment and Control Devices Venting Through Emission Point/Stack:

13. Pollutant Emissions

If more than 15 pollutants are emitted at this Emission Point/Stack, attach additional copies of this page as needed.

Emissions Information for Third Emission Point/Stack

	Pollutant Name (Specify VOCs and HAPs Individually in 13.10 through 13.18)	CAS Number (Not required for 13.1 through 13.10)	Maximum Uncontrolled Emission Rate at Design Capacity	Maximum Controlled Emission Rate at Design Capacity	Annual Potential to Emit (PTE)	Requested Permitted Annual Emissions
13.1.	Particulate Matter (PM)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.2.	PM_{10}		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.3.	$PM_{2.5}$		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.4.	Sulfur Oxides (SO_X)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.5.	Nitrogen Oxides (NO_X)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.6.	Carbon Monoxide (CO)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.7.	Total Volatile Organic Compounds (VOCs)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.8.	Total Hazardous Air Pollutants (HAPs)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.9.	CO_2		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.10.	CO_{2e}		**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.11.			**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.12.			**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.13.			**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.14.			**lbs/hour**	**lbs/hour**	tons/year	tons/year
13.15.			**lbs/hour**	**lbs/hour**	tons/year	tons/year

14. Provide Any Additional Information Necessary to Understanding the Emission Rates Provided Above:

Attach the Basis of Determination or Calculations for each Emission Rate provided above.

Emissions Information for Fourth Emission Point/Stack

15. Emission Point Name:

16. Equipment ID Number for all Process Equipment and Control Devices Venting Through Emission Point/Stack:

17. Pollutant Emissions

If more than 15 pollutants are emitted at this Emission Point/Stack, attach additional copies of this page as needed.

	Pollutant Name (Specify VOCs and HAPs Individually in 17.10 through 17.18)	CAS Number (Not required for 17.1 through 17.10)	Maximum Uncontrolled Emission Rate at Design Capacity	Maximum Controlled Emission Rate at Design Capacity	Annual Potential to Emit (PTE)	Requested Permitted Annual Emissions
17.1.	Particulate Matter (PM)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.2.	PM_{10}		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.3.	$PM_{2.5}$		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.4.	Sulfur Oxides (SO_X)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.5.	Nitrogen Oxides (NO_X)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.6.	Carbon Monoxide (CO)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.7.	Volatile Organic Compounds (VOCs)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.8.	Total Hazardous Air Pollutants (HAPs)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.9.	CO_2		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.10.	CO_{2e}		**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.11.			**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.12.			**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.13.			**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.14.			**lbs/hour**	**lbs/hour**	tons/year	tons/year
17.15.			**lbs/hour**	**lbs/hour**	tons/year	tons/year

Emissions Information for Fourth Emission Point/Stack

18. Provide Any Additional Information Necessary to Understanding the Emission Rates Provided Above:

Attach the Basis of Determination or Calculations for each Emission Rate provided above.

If there are more than four Emission Points/Stacks, attach additional copies of this form as needed.

Overall Process Emissions

19. Pollutant Emissions

If more than 15 pollutants are emitted from this Process, attach additional copies of this page as needed.

	Pollutant Name (Specify VOCs and HAPs Individually in 19.10 through 19.18)	CAS Number (Not required for 19.1 through 19.10)	Maximum Uncontrolled Emission Rate at Design Capacity	Maximum Controlled Emission Rate at Design Capacity	Annual Potential to Emit (PTE)	Requested Permitted Annual Emissions
19.1.	Particulate Matter (PM)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.2.	PM_{10}		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.3.	$PM_{2.5}$		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.4.	Sulfur Oxides (SO_X)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.5.	Nitrogen Oxides (NO_X)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.6.	Carbon Monoxide (CO)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.7.	Total Volatile Organic Compounds (VOCs)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.8.	Total Hazardous Air Pollutants (HAPs)		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.9.	CO_2		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.10.	CO_{2e}		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.12.			**lbs/hour**	**lbs/hour**	tons/year	tons/year

Overall Process Emissions

19.13.		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.14.		**lbs/hour**	**lbs/hour**	tons/year	tons/year
19.15.		**lbs/hour**	**lbs/hour**	tons/year	tons/year

20. Provide Any Additional Information Necessary to Understanding the Emission Rates Provided Above:

Attach the Basis of Determination or Calculations for each Emission Rate provided above.

Minor New Source Review Information

21. Does the Process Have the Potential to Emit More Than Five Tons Per Year of Any Pollutant? ☐ YES ☐ NO

22. Is the Source New or Existing? ☐ NEW ☐ EXISTING
See Question 11 of AQM-1

If the Process has the Potential to Emit more than five tons per year of any pollutant, and is a New Source, a Control Technology Analysis pursuant to Regulation No. 1125 Section 4 must be conducted and attached to this application.

Major New Source Review Information

23. Does the Process Have the Potential to Emit More Than the Significance Level for Any Pollutant? *(Check All That Apply)*

- ☐ Greater Than 25 Tons Per Year of Particulate Matter (PM)
- ☐ Greater Than 15 Tons Per Year of PM_{10}
- ☐ Greater Than 10 Tons Per Year of $PM_{2.5}$
- ☐ Greater Than 40 Tons Per Year of Sulfur Dioxide(SO_2)
- ☐ Greater Than 25 Tons Per Year of Nitrogen Oxides (NO_X) in New Castle and Kent County
- ☐ Greater Than 100 Tons Per Year of Nitrogen Oxides (NO_X) in Sussex County
- ☐ Greater Than 100 Tons Per Year of Carbon Monoxide (CO)
- ☐ Greater Than 25 Tons Per Year of Total Volatile Organic Compounds (VOCs) in New Castle and Kent County
- ☐ Greater Than 50 Tons Per Year of Total Volatile Organic Compounds (VOCs) in Sussex County
- ☐ Greater Than 75,000 Tons Per Year of Equivalent Carbon Dioxide (CO_{2e})

If the Process has the Potential to Emit greater than any of the amounts listed above 7 DE Admin. Code 1125 Sections 2 and/or 3 apply. Contact the Department at (302) 323-4542 or (302) 739-9402 for additional information

Additional Information

24. Is There Any Additional Information Pertinent to this Application? ☐ YES ☒ NO

If YES, complete the rest of Question 24.

24.1. Describe:

DNREC – Air Quality Management Section
Application to Construct, Operate, or Modify Stationary Sources

Form AQM-2
Page 1 of 1

Process Flow Diagram

Sketch the Process Flow Diagram for the equipment or process being applied for. Include each emission unit and control device (even existing emission units that will not be modified by this application). You may identify each emission unit with a simple shape. Label each emission unit and control device with a unique identifier. Show the relationship between each emission unit and/or control device by drawing arrows between them to indicate the flow of air pollutants. List which application forms are included for each emission unit or control device below the shape representing each emission unit or control device . See http://www.delaware.gov/reg2/default.htm for example Process Flow Diagrams for common processes. If you already have a Process Flow Diagram for the equipment or process being applied for, you may attach it to the application instead of using this form.



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