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| **7 DE Admin. Code 1130**  **Title V State Operating Permit Program**  **ADMINISTRATIVE INFORMATION**  **Division of Air Quality** | | | | | | **AQM-1001** |
| ADMINISTRATIVE INFORMATION FOR: | FOR DEPARTMENT USE, ONLY | | | | | |
| INITIAL APPLICATION  RENEWAL APPLICATION *(check one)*  MODIFICATION | I.D. NO.: | | | | | |
| PERMIT NO.: | | | | | |
| DATE:   /  / | | | | | |
| SOURCE INFORMATION | | | | | | |
| 1. SOURCE NAME: | | | | | 2. DATE FORM  COMPLETED:   /  / | |
| 3. SOURCE STREET ADDRESS: | | | | | | |
| 4. CITY: | | | 5. ZIP: | | 6. COUNTY: | |
| 7. PRIMARY STANDARD INDUSTRIAL  CLASSIFICATION (*SIC*) CATEGORY: | | | | | 8. PRIMARY *SIC* NO.: | |
| 9. SOURCE ENVIRONMENTAL  CONTACT PERSON: | | | | | 10. CONTACT PERSON’S  TELEPHONE NO.: (   )    - | |
| OWNER INFORMATION | | | | | | |
| 11. NAME: | | | | | | |
| 12. ADDRESS: | | | | | | |
| 13. CITY: | | | | 14. STATE: | 15. ZIP: | |
| 16. OWNERS AGENT (*if applicable*): | | | | | | |
| OPERATOR INFORMATION | | | | | | |
| 17. NAME: | | | | | | |
| 18. ADDRESS: | | | | | | |
| 19. CITY: | | | | 20. STATE: | 21. ZIP: | |
| APPLICANT INFORMATION | | | | | | |
| 22. WHO IS THE PERMIT APPLICANT: (*Check One*)  OWNER  OPERATOR | | 23. ALL CORRESPONDENCE TO: (*Check One*)  OWNER  OPERATOR  SOURCE | | | | |
| 24. CONTACT PERSON NAME AND/OR TITLE  FOR WRITTEN CORRESPONDENCE: | | | | | | |
| 25. TECHNICAL CONTACT FOR  SUBMITTAL OF APPLICATION: | | 26. CONTACT PERSON’S  TELEPHONE NO.: (   )    - | | | | |
| 27. TOTAL COST OF PLANT: $  (*Including property, buildings and air pollution control equipment, original cost basis*)  COST OF PROPOSED MODIFICAITONS: $  (Modification Applications, Only) | | | | | | |

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| AQM-1001 |
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| 28. PRESENT STATUS OF EQUIPMENT (Check appropriate box(es) and complete applicable items)  OPERATING PERMIT:    For existing plant, date construction completed (*original facility*)   /  /  Name change pending, effective date   /  /  CONSTRUCTION PERMIT (*for modifying sources*):  Equipment to be modified or constructed Estimated Starting Date Estimated Completion Date  Basic Equipment   /  /       /  /  Air Pollution Control Equipment   /  /       /  /  Change of Location Pending   /  /       /  / | |
| 29. ARE HAZARDOUS MATERIALS\* OR COMPOUNDS OF SUCH MATERIALS ARE EMITTED INTO THE ATMOSPHERE FROM  ANY OPERATION AT THIS LOCATION:    \*As defined in Section 112(b) of the November 15, 1990 Clean Air Act Amendments. | |
| 30. 1990 CLEAN AIR ACT AMENDMENTS, §112(r)  a. The facility  subject to the requirements of §112(r) of the 1990 Clean Air Act Amendments.  b. The facility  registered in compliance with the State of Delaware “Regulations for the Management of Extremely Hazardous Substances.”  (if a registration has not been filed, a Compliance Schedule is required to be submitted with this Application). | |
| 31. 1990 CLEAN AIR ACT AMENDMENTS, Title VI Requirements  a. Does your facility have any air conditioners or refrigeration equipment that uses CFCs, HCFCs or other ozone-depleting substances?      b. Does any air conditioner(s) or any piece(s) of refrigeration equipment contain a refrigerant charge greater than fifty (50) pounds?      (*If the answer is “YES,” describe what type of equipment and how may units are at the facility*).  c. Do your facility personnel maintain, service, repair or dispose of any motor vehicle air conditioners (MVACs) or appliances?  (*“Appliance” and “MVAC”, as defined at 40 CFR, Part 82.152*)    d. Cite and describe which Title VI requirements, if any, are applicable to your facility.  (i.e., 40 CFR, Part 82, Subparts A through G) | |

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**32. Complete the following table, indicating each Emission Unit and each Emission Point ID.**

**Provide the Pint Description, and indicate which forms and other information are included as part of this application.**

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| Emission  Unit | Emission Point ID | Point  Description | AQM-1001A | AQM-1001B | AQM-1001C | AQM-1001D | AQM-1001E | AQM-1001F | AQM-1001G | AQM-1001H | AQM-1001J | AQM-1001K | AQM-1001L | AQM-1001M | AQM-1001N | AQM01991V | AQM-1001W | AQM-1001X | AQM-1001Y | AQM-1001Z | AQM-1001AA | AQM-1001BB | AQM-1001CC | Process Flow Diagram | Site Plan: Stack Data and Locations | Emission Calculation Sheets | Stack Test Results | Supplemental/Other (Specify) |
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| 33. I, the undersigned, hereby certify under penalty of law that I am a Responsible Official and that I have personally examined and am familiar with the information submitted in this document and all of its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the information is, on knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false or incomplete information, including the possibility of fine or imprisonment.    By signing this form, I certify that I have not changed, altered, or deleted any portions of this application.  BY:­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_           Typed or Printed Name of Signatory Title of Signatory | |

4