

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
AIR DIVISION
INSTRUCTIONS FOR COMPLETION OF
FACILITY IDENTIFICATION FORM ADEM 103

This form is to be completed in duplicate for each facility operated by your firm or institution in the State of Alabama. If permit application forms are not received at every facility of a firm or institution which has more than one facility, it is still the responsibility of the owner or operator to secure application forms and submit them.

Items 1-4: Self-explanatory

Item 5: Universal Transverse Mercator Coordinates (for Alabama, N-S is between 3337.000km-3875.000km and E-W is between 362.000km-709.000km; Zone 16)

Items 6-7: Self-explanatory

Item 8: There must be at least one copy (in duplicate) of Forms ADEM 104-438. The total number of each of these will depend on the number of air contaminant sources at the facility. Submission of some of the other forms may not be necessary. This can be determined from the instructions. Each form must be completed in duplicate, but the original and copy are to be counted as one form.

Item 9: Self-explanatory

Item 10: Any facility applying for either a Synthetic Minor Operating Permit (SMOP) or a Major Operating Permit should list each pollutant and its emission rate for the facility for which the application is submitted. Also, indicate whether each pollutant is major (emissions > 100 TPY for any criteria pollutants, emissions > 10 TPY for any single HAP, or emissions > 25 TPY for any combination of HAPs). The most recent air emissions inventory done for annual operating permit fees can be substituted for Item 10, provided it shows the totals for each pollutant in the inventory. Indicate in the space that the air inventory is attached if this option is chosen.

Item 11: Self-explanatory
PSD - Prevention of Deterioration
NSPS - New Source Performance Standards
NESHAP - National Emissions Standards for Hazardous Air Pollutants
Title I - Attainment and Maintenance of NAAQS
Title IV - Acid Rain
Title VI - Stratospheric Ozone and Global Climate Protection

Item 12: Identify and list any source or activity that will be considered insignificant (emitting less than 5 TPY of any criteria pollutant, 1000 lb/yr of any air toxic, or included in the insignificant activities list previously established by the Department). Supporting documentation, including calculations, should be submitted for each activity.

Item 13: Self-explanatory

Item 14: Indicate any actual emission test of air contaminants for any operations covered in this application.

ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT (AIR DIVISION)

Do not Write in This Space

Facility Number

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
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**CONSTRUCTION/OPERATING PERMIT APPLICATION
FACILITY IDENTIFICATION FORM**

1. Name of Facility, Firm, or Institution:

Facility Physical Location Address

Street & Number:

City: County: Zip:

Facility Mailing Address (If different from above)

Address or PO Box:

City: State: Zip:

Owner's Business Mailing Address

2. Owner:

Street & Number: City:

State: Zip: Telephone:

Responsible Official's Business Mailing Address

3. Responsible Official: Title:

Street & Number:

City: State: Zip:

Telephone Number: E-mail Address:

Plant Contact Information

4. Plant Contact: Title:

Telephone Number: E-mail Address:

5. Location Coordinates:

UTM _____ E-W _____ N-S

Latitude/Longitude _____ LAT _____ LONG

6. Permit application is made for:

- Existing source (initial application)
- Modification
- New source (to be constructed)
- Change of ownership
- Change of location
- Other (specify) _____

Existing source (permit renewal)

If application is being made to construct or modify, please provide the name and address of installer or contractor

_____ Telephone _____

Date construction/modification to begin _____ to be completed _____

7. Permit application is being made to obtain the following type permit:

- Air permit
- Major source operating permit
- Synthetic minor source operating permit
- General permit

8. Indicate the number of each of the following forms attached and made a part of this application: (if a form does not apply to your operation indicate "N/A" in the space opposite the form). Multiple forms may be used as required.

- _____ ADEM 104 - INDIRECT HEATING EQUIPMENT
- _____ ADEM 105 - MANUFACTURING OR PROCESSING OPERATION
- _____ ADEM 106 - REFUSE HANDLING, DISPOSAL, AND INCINERATION
- _____ ADEM 107 - STATIONARY INTERNAL COMBUSTION ENGINES
- _____ ADEM 108 - LOADING, STORAGE & DISPENSING LIQUID & GASEOUS ORGANIC COMPOUNDS
- _____ ADEM 109 - VOLATILE ORGANIC COMPOUND SURFACE COATING EMISSION SOURCES
- _____ ADEM 110 - AIR POLLUTION CONTROL DEVICE
- _____ ADEM 112 - SOLVENT METAL CLEANING
- _____ ADEM 438 - CONTINUOUS EMISSION MONITORS
- _____ ADEM 437 - COMPLIANCE SCHEDULE

9. General nature of business: (describe and list appropriate standard industrial classification (SIC) and North American Industry Classification System (NAICS) (www.naics.com) code(s)):

13. List and explain any exemptions from applicable requirements the facility is claiming:

a.

b.

c.

d.

e.

f.

g.

h.

i.

14. List below other attachments that are a part of this application(all supporting engineering calculations must be appended):

a.

b.

c.

d.

e.

f.

g.

h.

i.

I CERTIFY UNDER PENALTY OF LAW THAT, BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY, THE STATEMENTS AND INFORMATION CONTAINED IN THIS APPLICATION ARE TRUE, ACCURATE AND COMPLETE.

I ALSO CERTIFY THAT THE SOURCE WILL CONTINUE TO COMPLY WITH APPLICABLE REQUIREMENTS FOR WHICH IT IS IN COMPLIANCE, AND THAT THE SOURCE WILL, IN A TIMELY MANNER, MEET ALL APPLICABLE REQUIREMENTS THAT WILL BECOME EFFECTIVE DURING THE PERMIT TERM AND SUBMIT A DETAILED SCHEDULE, IF NEEDED FOR MEETING THE REQUIREMENTS.

SIGNATURE OF RESPONSIBLE OFFICIAL

TITLE

DATE