

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Energy and Environment

**APPLICATION FOR SOURCE CATEGORY PERMIT APPROVAL TO OPERATE AN
EXISTING NATURAL GAS-FIRED EMERGENCY ENGINE EXEMPT FROM
NSPS SUBPART JJJJ AND NESHAP SUBPART ZZZZ**

Instructions: Please complete a separate copy of this form for each covered generator.

I. Applicability (Check all that are applicable)

- The equipment consists of a natural gas fired emergency generator set or other natural gas fired emergency engine.
- The equipment is stationary (i.e., it will remain in place for greater than 12 months).
- The equipment is to be used exclusively for emergency purposes (except maintenance and testing) and will not participate in a voluntary demand reduction program or any other interruptible power supply arrangement with a utility, other market participant, or system operator (demand response).
- The equipment will operate for fewer than 500 hours in any given 12 month period for all purposes, combined.
- The equipment does not and will not operate for more than 15 hours per calendar year for periods where there is a deviation of voltage or frequency of 5% or greater below standard voltage or frequency.
- The equipment's potential to emit (PTE) oxides of nitrogen (NO_x) is less than 25 tons per year (TPY). See the table in Section IV of this application to calculate PTE from this particular unit and sum NO_x emissions from all permit applications related to this project.
- Construction of this engine, in combination with any other equipment constructed as part of the same construction project, did not trigger applicability of 20 DCMR 204, Permit Requirements for Major Sources Located in Non-Attainment Areas (New Source Review) at the time of construction. You may check this box if this you checked the previous box and there was no other air pollutant-emitting equipment constructed as part of the same construction project. If other air pollutant-emitting equipment was constructed as part of the same construction project, please perform and submit a full applicability evaluation pursuant to 20 DCMR 204 or contact the Air Quality Division (AQD) at (202) 535-2250 to request further guidance.
- The engine has not been modified or reconstructed as defined in 40 CFR 60.14 or 60.15.
- The facility at which the unit is located is not a major source of hazardous air pollutant

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(HAP) emissions [20 DCMR 399, definition of “Major source”, section (a)] (i.e. the facility does not emit more than 10 tons of any individual HAP nor does it emit more than 25 tons of all HAPs combined).

Check this box if none of the following is true:

1. The maximum engine power is less than or equal to 25 horsepower (HP) [19 mechanical kilowatts (kWm)] and it was manufactured on or after July 1, 2008;
2. The manufacturer participates in the voluntary manufacturer certification program described in 40 CFR 60, Subpart JJJJ and the date of manufacture of the emergency engine is after January 1, 2009; or
3. The emergency engine was ordered after June 12, 2006, was manufactured on or after January 1, 2009, and has a maximum engine power greater than 25 HP (19 kWm)

Check this box if any of the following three items is applicable and indicate (by number) which one is applicable here: _____

1. The engine is an existing residential emergency stationary reciprocating internal combustion engine (RICE) [See 40 CFR 63.6585(f)(1) and 40 CFR 63.6590];
2. The engine is an existing commercial emergency stationary RICE [See 40 CFR 63.6585(f)(2) and 40 CFR 63.6590]; or
3. The engine is an existing institutional emergency stationary RICE [See 40 CFR 63.6585(f)(3) and 40 CFR 63.6590].

The equipment will be operated in compliance with the “Source Category Permit to Operate Existing Stationary Natural Gas-Fired Emergency Engines Exempt from NSPS Subpart JJJJ and NESHAP Subpart ZZZZ”.

If you have checked all of the boxes above, you are eligible to apply for coverage under this source category permit. Please complete the remainder of this form. Note that your coverage under this source category permit is still subject to AQD approval. AQD may deny approval under this permit if it deems that further review is necessary due to special or unique circumstances related to a given application. Approval will occur either by active acknowledgement by AQD or by passive approval which will occur 45 days after submission of the complete application to AQD unless AQD objects to the approval in writing in that time.

If you are not eligible for coverage under this source category permit, you may still be eligible for a standard source-specific permit. Please contact AQD at (202) 535-2250 to discuss alternate permitting options or check the AQD website (<http://doee.dc.gov/air>) for the appropriate application forms.

If you have questions about your eligibility or how to complete this application, please contact AQD at (202) 535-2250.

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II. Facility and Applicant Information

1. _____
Full Legal Name of Applicant/Organization

2. _____
Type of Organization

3. _____
Name of Owner(s) or Principal Partner(s) of Above Organization

4. _____
Mailing Address of Applicant (No., Street, City, State, Zip)

5. _____
Street Address of Facility (if different from Mailing Address)

6. Owner/Responsible Official Name: _____

Owner/Responsible Official Title: _____

Phone No. _____ E-mail: _____

7. Contact Person: _____

Contact Person Title: _____

Phone No. _____ E-mail: _____

8. Type of Project: New Construction Renewal/Transfer of Existing Permit
 Initial Permitting of Existing Source

Note that replacement of an existing source is considered "New Construction".

9. For renewal or transfer of coverage from a standard permit, provide the existing permit number and expiration date:

10. Describe the facility at which this equipment will be located:

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III. General Equipment Information

1. Equipment Name/Identification: _____
2. Engine type: Reciprocating Turbine Other
If "Other", describe: _____
3. Fuel type: _____
4. Rated fuel consumption: _____ CF/hr
5. Engine is used for: Routine operational use Emergency or back-up use only
Note: If the unit is to be used in a load response program or for peak shaving, please check "Routine operational use" and attach an explanation of the use(s) of the unit. Also note that only engines used in emergency or back-up capacities are eligible for coverage under this source category permit.
6. Rated generator electrical output: _____ kW/kWe
Note: Enter n/a if your engine is not associated with a generator
7. Maximum engine power: _____ HP or kWm (choose units) @ _____ RPM
8. Stack height above ground: _____ ft Inner diameter at exit: _____ ft
Exit gas volumetric rate: _____ cfm Gas temperature at exit: _____ °F
Distance of stack from nearest property boundary: _____ ft
9. Date construction/installation of engine began or is planned to begin: _____
10. Date construction/installation of engine completed (if applicable): _____
11. Manufacturing Information:

Engine Order Date

Engine Manufacture Date

Engine Model Year

Engine Serial Number
(if available)

Engine per cylinder displacement

Engine Manufacturer

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 Generator Manufacturer

 Generator Manufacture Date

IV. Emissions

Please complete the following “Potential to Emit” table (except as noted below):

Note: It is acceptable to provide calculations in an alternate format as an attachment to this application. Please ensure that any submittal provides sufficient information to allow the application reviewer to reproduce the calculations from the source material. Please also ensure that any alternative submittal provides substantially the same information requested in the following table.

If potential emissions are provided in an attachment, please check the following box:

Table: Potential to Emit¹					
Pollutant	Emission Factor²	Units of Emission Factor³	Emission Rate (lb/hr)	Maximum Hours Per Year of Operation⁴	Maximum Potential Emissions (Tons/yr)
NO_x					
SO_x					
VOC					
CO					
PM_(Total)					

¹ “Potential to Emit” is the maximum capacity of a stationary source to emit a pollutant under its physical and operational design. Any physical or operational limitation on the capacity of the source to emit a pollutant, including air pollution control equipment and restrictions on hours of operation or on the type or amount of material combusted, stored, or processed, shall be treated as part of its design only if the limitation or the effect it would have on emissions is enforceable as a practical matter. Secondary emissions do not count in determining the potential to emit of a stationary source. [20 DCMR § 199]

² The emission factor should reflect the maximum emissions expected from the unit when operating properly.

³ Examples of commonly used units are lb/million SCF of natural gas and lb/million BTU of heat input.

⁴ The default value for this column should be 500 hours per year for emergency engines. If a different value is used, you are not eligible for coverage under this source category permit so you should seek a standard unit-specific permit.

Cite the source(s) of the emission factors:

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V. Notes and Required Attachments

1. Please attach a copy of the manufacturer's specifications for the unit (whenever they can be obtained) and any other appropriate supporting documentation, including the basis for manufacturer-specified emission factors.
2. Deviations from submitted plans and specifications are not permissible without securing formal approval from AQD via an application update request and re-approval, if already approved. If an application update is submitted, the 45 day passive approval period will re-set as of the date of submission of the revised application.
3. The complete application and applicable supporting documentation must be submitted to the following address:

Branch Chief, Permitting Branch
Air Quality Division
1200 First Street NE, 5th Floor
Washington, DC 20002

VI. Applicant Certification:

I hereby certify, under penalty of D.C. Official Code § 8-101.05e, that I am authorized to submit this application on behalf of the applicant and that the statements contained herein are true and correct to best of my knowledge. I further certify that all attached information and previously submitted information referenced in this application remains true, correct, and current, to the best of my knowledge.

Authorized Signature:

Owner/Responsible Official Signature Print Name and Title Date

Mailing Address of Owner/Responsible Official if Different From II.4 above

Report Fraud, Waste, Abuse, and Mismanagement to the District of Columbia Office of the Inspector General.
Confidential Toll Free Hotline: 1-800-521-1639 or 202-724-TIPS (8477). Email: hotline.oig@dc.gov