

### Supplemental Application Form

#### Glass Melting Furnaces – Compliance with Rule 4354 (12/16/2021 amendments)

*NOTE: This form must be accompanied by a completed Authority to Construct (ATC) Application Form.*

FACILITY NAME:			FACILITY ID #:					
FACILITY LOCATION:								
<b>EQUIPMENT DETAILS</b>	PERMIT TO OPERATE #(s):							
	TYPE OF GLASS PRODUCED	<input type="checkbox"/> Container Glass <input type="checkbox"/> Fiberglass <input type="checkbox"/> Flat Glass <input type="checkbox"/> Other: _____						
	GLASS FURNACE TOTAL HEAT INPUT RATING:		MMBtu/hr					
	PERMITTED PRODUCTION CAPACITY:		ton/day	ton/year				
<b>FUEL &amp; FIRING</b>	PRIMARY FUEL: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Other: _____							
	SUPPLEMENTAL HEATING TECHNIQUE: <input type="checkbox"/> LPG/Propane <input type="checkbox"/> Electric Heating <input type="checkbox"/> Other: _____							
	FIRING TECHNOLOGY: <input type="checkbox"/> 100% Air-fired <input type="checkbox"/> Oxy-assisted <input type="checkbox"/> Oxy-fuel <input type="checkbox"/> Other: _____							
<b>PROPOSED EMISSIONS LIMITS</b>	Please specify Rule 4354 NOx compliance schedule for this application:			<input type="checkbox"/> Phase I		<input type="checkbox"/> Phase II		
	Proposed emission limits to comply with Rule 4354:							
	Pollutant	Steady-State			Start-Up		Shutdown	
		lb/ton of glass produced (Block 24-hour Avg)		ppmv (Rolling 30-day Avg)	(ppmv)	(lb/hr)	(ppmv)	(lb/hr)
	NOx			N/A				
				N/A				
	SOx			N/A				
				N/A				
	PM <sub>10</sub>			N/A				
				N/A				
CO	N/A							
VOC	N/A							
Duration (please provide justification)				____ hr/day ____ hr/yr		____ hr/day ____ hr/yr		
% O <sub>2</sub> , dry basis, if corrected to other than 8%: ____%								
NH <sub>3</sub> emissions in exhaust (if reagent used): ____ ppmv								
<b>EMISSIONS CONTROL SYSTEMS</b>	Please provide information on emissions control systems used to comply with Rule 4354 limits							
	Pollutant	CE (%)*	Emission Control Systems					
	NOx		<input type="checkbox"/> Selective Catalytic Reduction (SCR) <input type="checkbox"/> Catalytic Filter System <input type="checkbox"/> Other: _____ Reagent used: <input type="checkbox"/> Ammonia (NH <sub>3</sub> ) <input type="checkbox"/> Urea <input type="checkbox"/> Other: _____					
	SOx		<input type="checkbox"/> Dry scrubber <input type="checkbox"/> Wet scrubber <input type="checkbox"/> Semi-dry <input type="checkbox"/> Other: _____ Sorbent used: <input type="checkbox"/> Trona <input type="checkbox"/> Calcium hydroxide <input type="checkbox"/> Calcium Carbonate <input type="checkbox"/> Other: _____					
	PM <sub>10</sub>		<input type="checkbox"/> Electrostatic Precipitator <input type="checkbox"/> Ceramic dust collector <input type="checkbox"/> Other: _____					
	CO		<input type="checkbox"/> None <input type="checkbox"/> Other: _____					
	VOC		<input type="checkbox"/> None <input type="checkbox"/> Other: _____					
*Source of Control Efficiency (CE) (please provide copies of all supporting data):								
<input type="checkbox"/> Manufacturer's Specifications <input type="checkbox"/> Emission Source Test <input type="checkbox"/> CEMS Data <input type="checkbox"/> Other: _____								

**Note: Please Complete the Following Section for Major Source Pollutants Only**

<b>BASELINE ACTUAL EMISSIONS</b>	Please provide date for <b>Baseline Actual Emissions (BAE)</b> and indicate basis of the data: <input type="checkbox"/> Previous 5 years data <b>OR</b> <input type="checkbox"/> average during any consecutive 24-month period within the previous 10-years						
	Actual Emissions (lb/year)	CEMS Data*	Year				
			NOx				
			SOx				
		Source Test Data*	CO				
			PM10				
	Actual Production (ton-glass produced/year)						
	Fuel Usage (MMscf/yr)	Primary					
	Supplemental						
*Please attach all supporting records of historical usage to determine BAE: <input type="checkbox"/> Emissions Source Test <input type="checkbox"/> CEMS Data <input type="checkbox"/> Other: _____							
<b>PROJECTED ACTUAL EMISSIONS</b>	<b>Projected Actual Emissions (PAE)</b> data attached (lb/year)?    Yes <input type="checkbox"/> No <input type="checkbox"/>						
	<u>Note:</u> For units with no increase in design capacity or potential to emit (PE), PAE is equal to annual emission rate at which unit is projected to emit in any 1 year, selected by the operator, within 5 years after the unit resumes normal operation. If detailed PAE are not provided, District will use PE2 to calculate project emissions increase as = $\sum(PE2 - BAE)$						
<b>PROJECTED ACTUAL EMISSIONS</b>	<b>Unused Baseline Capacity (UBC)</b> data attached (lb/year)?    Yes <input type="checkbox"/> No <input type="checkbox"/>						
	<u>Note:</u> When using historical data & company's expected business activity to determine PAE, portion of emissions after the project that the existing unit could have accommodated (UBC) before the project (during the same 24-month baseline period used to determine BAE) and that are unrelated to the particular project (including emissions increases due to product demand growth) are to be excluded. Thus Project Emissions Increase could be calculated as = PAE - BAE - UBC						

**HEALTH RISK ASSESSMENT DATA**

<b>Will this application result in change in stack parameters</b> (Exhaust flowrate, release height, etc.)?    Yes <input type="checkbox"/> No <input type="checkbox"/>			
<b>Will this application result in increase in NH<sub>3</sub> emissions?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>			
If you answered <b>YES</b> to any questions above, please fill out the section below otherwise leave blank.			
<b>Operating Hours</b>	Maximum Operating Schedule: _____ hours per day, and _____ hours per year		
<b>Receptor Data</b>	Distance to nearest Residence	_____ feet	Distance is measured from the proposed stack location to the nearest boundary of the nearest apartment, house, dormitory, etc.
	Direction to nearest Residence	_____	Direction from the stack to the receptor, i.e. Northeast or South.
	Distance to nearest Business	_____ feet	Distance is measured from the proposed stack location to the nearest boundary of the nearest office building, factory, store, etc.
	Direction to nearest Business	_____	Direction from the stack to the receptor, i.e. North or Southwest.
<b>Stack Parameters</b>	Release Height	_____ feet above grade	
	Stack Diameter	_____ inches at point of release	
	Rain Cap	<input type="checkbox"/> Flapper-type <input type="checkbox"/> Fixed-type <input type="checkbox"/> None <input type="checkbox"/> Other: _____	
	Direction of Flow	<input type="checkbox"/> Vertically Upward <input type="checkbox"/> Horizontal <input type="checkbox"/> Other: _____° from vert. or _____° from horiz.	
<b>Exhaust Data</b>	Flowrate: _____ acfm	Temperature: _____ °F	
<b>Facility Location</b>	<input type="checkbox"/> Urban (area of dense population) <input type="checkbox"/> Rural (area of sparse population)		
	Include a facility plot plan showing the location of the stack. Please indicate North on the plot plan. For public notice projects, indicate on plot plan the facility boundaries or fence line and distance(s) from stack to boundaries.		