

**Mail Application To:**

New Mexico Environment Department  
Air Quality Bureau  
Permitting Section  
1301 Siler Road, Building B  
Santa Fe, NM 87507-3113

Phone: (505) 476-4300  
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www.nmenv.state.nm.us/aqb

**For Department use only:**

AIRS No.:

## Universal Air Quality Permit Application

### Use this application for NOI, NSR, or Title V sources.

Use this application for: the initial application, modifications, technical revisions, and renewals. For technical revisions, complete Sections, 1-A, 1-B, 2-E, 3, and any other sections that are relevant to the requested action; coordination with the Air Quality Bureau permit staff prior to submittal is encouraged to clarify submittal requirements and to determine if more or less than these sections of the application are needed. Use this application for streamline permits as well.

**This application is being submitted as** (check all that apply):  Request for a No Permit Required Determination (no fee)  
 **Updating** an application currently under NMED review. Include this page and all pages that are being updated (no fee required).  
 Construction Status:  Not Constructed  Existing Permitted (or NOI) Facility  Existing Non-permitted (or NOI) Facility  
 Minor Source:  a NOI 20.2.73 NMAC  20.2.72 NMAC application/revision  20.2.72.300 NMAC Streamline application  
 Title V Source:  Title V (new)  Title V renewal  TV minor mod.  TV significant mod. TV Acid Rain:  New  Renewal  
 PSD Major Source:  PSD major source (new)  minor modification to a PSD source  a PSD major modification

**Acknowledgements:**  I acknowledge that a pre-application meeting is available to me upon request  NPR (no fee)  
 \$500 NSR Permit Filing Fee enclosed **OR**  The full permit fee associated with 10 fee points (required w/ streamline applications).  
 Check No.: [redacted] in the amount of [redacted] (Fee not required for Title V)  This facility meets the applicable requirements to register as a Small Business and a check for 50% of the normal fee is enclosed (only applicable **provided** that NMED has a Small Business Certification Form from your company on file found at: [http://www.nmenv.state.nm.us/aqb/permit/app\\_form.html](http://www.nmenv.state.nm.us/aqb/permit/app_form.html) ).

**Citation:** Please provide the **low level citation** under which this application is being submitted: **20.2.XX.XXX.X.X** NMAC (i.e. an example of an application for a new minor source would be 20.2.72.200.A NMAC, one example of a low level cite for a Technical Revision could be: 20.2.72.219.B.1.b NMAC, or a Title V acid rain cite would be: 20.2.70.200.C NMAC)

**Synthetic Minor Source Information:** A source is synthetic minor if its uncontrolled emissions are above major source applicability thresholds, but the facility is minor because it has federally enforceable requirements (federal requirements or permit conditions) that limit controlled emissions below major source thresholds. Facilities can be synthetic minor for either Title V (20.2.70 NMAC) or PSD (20.2.74 NMAC) or both. The Department tracks synthetic minor sources that are within 20% of either TV or PSD major source thresholds, referring to these as Synthetic Minor 80 Sources (abbreviated SM80). Please check all that apply:  
 Prior to this permitting action this source is a  TV major source,  a TV synthetic minor source,  a TV SM80 source.  
 Prior to this permitting action this source is a  PSD major source,  a PSD synthetic minor source,  a PSD SM80 source.  
 This permitting action results in a  TV synthetic minor source and/or  PSD synthetic minor source.

## Section 1 – Facility Information

### Section 1-A: Company Information

	<b>AI #</b> (if known):	<b>Updating</b> permit #:
1	Facility Name:	Plant primary SIC Code (4 digits):
2	Owner's name:	Phone/Fax:
a	Mailing Address:	
b	Plant Street Address (If no facility street address, provide directions from a prominent landmark):	
3	Billing Party:	Phone/Fax:
a	Mailing Address:	E-mail:
4	<input type="checkbox"/> Preparer: <input type="checkbox"/> Consultant:	Phone/Fax:

a	Mailing Address:	E-mail:
5	Plant Operator:	
a	Plant Operator Address:	
b	Plant Operator Contact:	Phone/Fax:
c	Address:	E-mail:
7	Air Permit Contact:	Title:
	E-mail:	Phone/Fax:
a	Mailing Address:	

### Section 1-B: Current Facility Status

1	Has this facility already been constructed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, is it currently operating in New Mexico? <input type="checkbox"/> Yes <input type="checkbox"/> No
2	Is the plant currently shut down? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, give month and year of shut down (MM/YY):
3	Was this facility constructed before 8/31/1972 and continuously operated since 1972? <input type="checkbox"/> Yes <input type="checkbox"/> No	
4	If Yes, has this facility been modified (see 20.2.72.7.P NMAC) or the capacity increased since 8/31/1972? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
5	Does this facility have a Title V operating permit (20.2.70 NMAC)? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, the permit No. is: P-
6	Has this facility been issued a No Permit Required (NPR)? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, the NPR No. is:
7	Has this facility been issued a Notice of Intent (NOI)? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, the NOI No. is:
8	Does this facility have a construction permit (20.2.72 NMAC)? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, the permit No. is:
9	Is this facility registered under a General permit (GCP-1, GCP-2, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, the registr. No. is:

### Section 1-C: Facility Input Capacity & Production Rate

1	What is the facility's maximum input capacity, specify units (reference here and list capacities in Section 20, if more room is required)			
a	Current	Hourly:	Daily:	Annually:
b	Proposed	Hourly:	Daily:	Annually:
2	What is the facility's maximum production rate, specify units (reference here and list capacities in Section 20, if more room is required)			
a	Current	Hourly:	Daily:	Annually:
b	Proposed	Hourly:	Daily:	Annually:

### Section 1-D: Facility Location Information

1	Section:	Range:	Township:	County:	Elevation (ft):
2	UTM Zone: <input type="checkbox"/> 12 or <input type="checkbox"/> 13			Datum: <input type="checkbox"/> NAD 27 <input type="checkbox"/> NAD 83 <input type="checkbox"/> WGS 84	
a	UTM E (in meters, to nearest 10 meters):		UTM N (in meters, to nearest 10 meters):		
b	AND Latitude (deg., min., sec.):		Longitude (deg., min., sec.):		
3	Name and zip code of nearest New Mexico town:				
4	Detailed Driving Instructions from nearest NM town (attach a road map if necessary):				

5	The facility is <input type="text"/> (distance) miles <input type="text"/> (direction) of <input type="text"/> (nearest town).
6	Status of land at facility (check one): <input type="checkbox"/> Private <input type="checkbox"/> Indian/Pueblo <input type="checkbox"/> Federal BLM <input type="checkbox"/> Federal Forest Service <input type="checkbox"/> Other (specify)
7	List all municipalities, Indian tribes, and counties within a ten (10) mile radius (20.2.72.203.B.2 NMAC) of the property on which the facility is proposed to be constructed or operated:
8	<b>20.2.72 NMAC applications only:</b> Will the property on which the facility is proposed to be constructed or operated be closer than 50 km (31 miles) to other states, Bernalillo County, or a Class I area (see <a href="http://www.nmenv.state.nm.us/aqb/modeling/class1areas.html">www.nmenv.state.nm.us/aqb/modeling/class1areas.html</a> )? <input type="checkbox"/> Yes <input type="checkbox"/> No (20.2.72.206.A.7 NMAC) If yes, list all with corresponding distances in kilometers:
9	Name nearest Class I area:
10	Shortest distance (in km) from facility boundary to the boundary of the nearest Class I area (to the nearest 10 meters):
11	Distance (meters) from the perimeter of the Area of Operations (AO is defined as the plant site inclusive of all disturbed lands, including mining overburden removal areas) to nearest residence, school or occupied structure:
12	Method(s) used to delineate the Restricted Area: <p>“<b>Restricted Area</b>” is an area to which public entry is effectively precluded. Effective barriers include continuous fencing, continuous walls, or other continuous barriers approved by the Department, such as rugged physical terrain with steep grade that would require special equipment to traverse. If a large property is completely enclosed by fencing, a restricted area within the property may be identified with signage only. Public roads cannot be part of a Restricted Area.</p>
13	Is this a stationary portable source as defined in 20.2.72.7.X NMAC? <input type="checkbox"/> Yes <input type="checkbox"/> No
14	Will this facility operate in conjunction with other air regulated parties on the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, what is the name and permit number (if known) of the other facility?

### Section 1-E: Proposed Operating Schedule (The 1-E.1 & 1-E.2 operating schedules may become conditions in the permit.)

1	Facility <b>maximum</b> operating ( $\frac{\text{hours}}{\text{day}}$ ):	( $\frac{\text{days}}{\text{week}}$ ):	( $\frac{\text{weeks}}{\text{year}}$ ):	( $\frac{\text{hours}}{\text{year}}$ ):
2	Facility's maximum daily operating schedule (if less than 24 $\frac{\text{hours}}{\text{day}}$ )? Start:	<input type="checkbox"/> AM <input type="checkbox"/> PM	End:	<input type="checkbox"/> AM <input type="checkbox"/> PM
3	Month and year of anticipated start of construction:			
4	Month and year of anticipated construction completion:			
5	Month and year of anticipated startup of new or modified facility:			
6	Will this facility operate at this site for more than one year? <input type="checkbox"/> Yes <input type="checkbox"/> No			

### Section 1-F: Other Facility Information

1	Are there any current Notice of Violations (NOV), compliance orders, or any other compliance or enforcement issues related to this facility? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify:		
a	If yes, NOV date or description of issue:	NOV Tracking No:	
b	Is this application in response to any issue listed in 1-F, 1 or 1a above? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, provide the 1c & 1d info below:		
c	Document Title:	Date:	Requirement # (or page # and paragraph #):
d	Provide the required text to be inserted in this permit:		
2	Is air quality dispersion modeling being submitted with this application? <input type="checkbox"/> Yes <input type="checkbox"/> No		
3	Does this facility require an “Air Toxics” permit under 20.2.72.400 NMAC & 20.2.72.502, Tables A and/or B? <input type="checkbox"/> Yes <input type="checkbox"/> No		
4	Will this facility be a source of federal Hazardous Air Pollutants (HAP)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
a	If Yes, what type of source? <input type="checkbox"/> <b>Major</b> ( $\geq 10$ tpy of any single HAP <b>OR</b> $\geq 25$ tpy of any combination of HAPS) <b>OR</b> <input type="checkbox"/> <b>Minor</b> ( $< 10$ tpy of any single HAP <b>AND</b> $< 25$ tpy of any combination of HAPS)		
b	If 4.a is Yes, identify the subparts in 40 CFR 61 & 40 CFR 63 that apply to this facility (If no subparts apply, enter “N/A.”):		

**Section 1-G: Streamline Application** (This section applies to 20.2.72.300 NMAC Streamline applications only)

1	<input type="checkbox"/> I have filled out Section 18, "Addendum for Streamline Applications." <input type="checkbox"/> N/A (This is not a Streamline application.)
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**Section 1-H: Title V Specific Information** (Fill this section out only if this is a Title V application.)

1	Responsible Official (20.2.70.300.D.2 NMAC):	Phone:
a	R.O. Title:	R.O. e-mail:
b	R. O. Address:	
2	Alternate Responsible Official (20.2.70.300.D.2 NMAC):	Phone:
a	A. R.O. Title:	A. R.O. e-mail:
b	A. R. O. Address:	
3	Company's State of Incorporation or Registration to do Business:	
4	Company's Corporate or Partnership Relationship to any other Air Quality Permittee (List the names of any companies that have operating (20.2.70 NMAC) permits and with whom the applicant for this permit has a corporate or partnership relationship):	
5	Name of Parent Company ("Parent Company" means the primary name of the organization that owns the company to be permitted wholly or in part.):	
a	Address of Parent Company:	
6	Names of Subsidiary Companies ("Subsidiary Companies" means organizations, branches, divisions or subsidiaries, which are owned, wholly or in part, by the company to be permitted.):	
7	Affected Programs to include Other States, local air pollution control programs (i.e. Bernalillo) and Indian tribes: Will the property on which the facility is proposed to be constructed or operated be closer than 80 km (50 miles) from other states, local pollution control programs, and Indian tribes and pueblos (20.2.70.402.A.2 and 20.2.70.7.B)? If yes, state which ones and provide the distances in kilometers:	

**Section 1-I – Submittal Requirements**

Each 20.2.73 NMAC (NOI), a 20.2.70 NMAC (Title V), a 20.2.72 NMAC (NSR minor source), or 20.2.74 NMAC (PSD) application package shall consist of the following:

**Hard Copy Submittal Requirements:**

- One hard copy **original signed and notarized application package printed double sided 'head-to-toe' 2-hole punched** as we bind the document on top, not on the side; except Section 2 (landscape tables), which should be **head-to-head**. If 'head-to-toe printing' is not possible, print single sided. Please use **numbered tab separators** in the hard copy submittal(s) as this facilitates the review process.
- If the application is for a NSR or Title V permitting action, include one working hard **copy** for Department use. This **copy** does not need to be 2-hole punched. Technical revisions only need to fill out Section 1-A, 1-B, 3, and should fill out those portions of other Section(s) relevant to the technical revision. TV Minor Modifications need only fill out Section 1-A, 1-B, 1-H, 3, and those portions of other Section(s) relevant to the minor modification. NMED may require additional portions of the application to be submitted, as needed.
- The entire NOI or Permit application package, including the full modeling study, should be submitted electronically on compact disk(s) (CD). **Two** CD copies are required (in sleeves, not crystal cases, please), with additional CD copies as specified below.
- If **air dispersion modeling** is required by the application type, include the **NMED Modeling Waiver OR** one additional electronic copy of the air dispersion modeling including the input and output files. The dispersion modeling **summary report only** should be submitted as hard copy(ies) unless otherwise indicated by the Bureau. The complete dispersion modeling study, including all input/output files, should be submitted electronically as part of the electronic submittal.

- 5) If subject to PSD review under 20.2.74 NMAC (PSD) include,
- one additional hard copy and one additional CD copy for US EPA,
  - one additional hard copy and one additional CD copy for each federal land manager affected (NPS, USFS, FWS, USDI) and,
  - one additional hard copy and one additional CD copy for each affected regulatory agency other than the Air Quality Bureau.

### **Electronic Submittal Requirements** [in addition to the required hard copy(ies)]:

- All required electronic documents shall be submitted in duplicate (2 separate CDs). The documents should be submitted in Microsoft Office compatible file format (Word, Excel, etc.) allowing us to access the text in the documents (copy & paste). Any documents that cannot be submitted in a Microsoft Office compatible format shall be saved as a PDF file from within the electronic document that created the file. If you are unable to provide Microsoft office compatible electronic files or internally generated PDF files of files (items that were not created electronically: i.e. brochures, maps, graphics, etc.), submit these items in hard copy format with the number of additional hard copies corresponding to the number of CD copies required. We must be able to review the formulas and inputs that calculated the emissions.
- It is preferred that this application form be submitted as 3 electronic files (**2 MSWord docs**: Universal Application section 1 and Universal Application section 3-19) and **1 Excel file** of the tables (Universal Application section 2) on the CD(s). Please include as many of the 3-19 Sections as practical in a single MS Word electronic document. Create separate electronic file(s) if a single file becomes too large or if portions must be saved in a file format other than MS Word.
- The **electronic file names** shall be a maximum of 25 characters long (including spaces, if any). The format of the electronic Universal Application shall be in the format: "A-3423-FacilityName". The "A" distinguishes the file as an application submittal, as opposed to other documents the Department itself puts into the database. Thus, all electronic application submittals should begin with "A-". Modifications to existing facilities should use the **core permit number** (i.e. '3423') the Department assigned to the facility as the next 4 digits. Use 'XXXX' for new facility applications. The format of any separate electronic submittals (additional submittals such as non-Word attachments, re-submittals, application updates) and Section document shall be in the format: "A-3423-9-description", where "9" stands for the **section #** (in this case Section 9-Public Notice). Please refrain, as much as possible, from submitting any scanned documents as this file format is extremely large, which uses up too much storage capacity in our database. Please take the time to fill out the **header information** throughout all submittals as this will identify any loose pages, including the Application Date (date submitted) & Revision # (0 for original, 1, 2, etc.; which will help keep track of subsequent partial update(s) to the original submittal. The footer information should not be modified by the applicant.

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