

June 27, 2024  
File No. 27224242.00

Indiana Department of Environmental Management  
Office of Air Quality – Permits Branch  
100 North Senate Avenue, IGCN 1003  
Indianapolis, IN 46204-2251

Received by State of Indiana IDEM-OAQ  
via email June 27, 2024 MJ-1

Subject: Minor Source Operating Permit Application  
ZINKPOWER – Terre Haute, LLC  
Terre Haute, Indiana

To Whom It May Concern:

On behalf of ZINKPOWER – Terre Haute, LLC (ZINKPOWER), SCS Engineers (SCS) is submitting this Indiana Department of Environmental Management (IDEM) Minor Source Operating Permit application to construct and operate a hot dip galvanizing plant in Terre Haute, Indiana. Application forms for a Minor Source Operating Permit are included as **Attachment A**. Provided herein is a discussion of the process description, emission calculations, and resulting permit applicability.

## PROCESS DESCRIPTION

Hot dip galvanizing is a metallurgical process in which steel is submerged in a molten zinc bath. The molten zinc reacts with the steel through diffusion to create a corrosion resistant zinc-iron alloy. For the reaction to occur, the steel must be free of organic material (paint, oil, grease, etc.) and oxidation (i.e., rust). Therefore, prior to galvanizing, the surface of the steel must undergo a pre-treatment process known as ‘pickling’. Proper pickling procedures will ensure that the steel is clean and ready for immersion into the molten zinc.

The pickling process begins with incoming steel being immersed in the acid degreaser tanks (EP-01). The acid degreaser tanks contain a degreasing agent which is a solution of diluted phosphoric acid and hydrochloric acid (HCl). The tank make-up is approximately 90% tap water and 10% degreasing agent. The temperature range of the Acid Degreaser Tanks is 64.4°F - 104°F.

Prior to the next pickling process tank, the steel is immersed in a water rinse. After the rinse, the steel is transferred to the HCl tanks (EP-02). The HCl tanks contain an acidic solution that ranges from 6-18% HCl and averages 12% HCl. The optimum temperature range for the HCl Tanks is 70°F - 80°F. Following the HCl tanks, the steel is immersed in another water rinse tank. The water acts as a neutralizer by rinsing off residual acid solution from the steel in addition to minimizing the potential for the carryover of free iron to the flux tank.

The final step in pickling steel for galvanizing is to immerse the steel in a zinc ammonium chloride (ZnNH<sub>4</sub>Cl) solution in the flux tank. The ZnNH<sub>4</sub>Cl is added to the solution as a solid; therefore, negligible emissions are expected to occur and have not been included in the emission calculations.



The flux acts as a final pickling agent and prevents oxidation of pickled steel before immersion into the molten zinc. A wet scrubber (CD-01) controls the pickling tank emissions (EP-01 and EP-02). The water from the wet scrubber is recycled as make-up water.

Following the pickling process, the steel passes through a natural gas-fired dryer (EP-04) prior to entering the zinc kettle (EP-03). An electric furnace heats the kettle. The kettle is filled with special high-grade zinc with trace additions of aluminum, bismuth, and nickel. When pickled steel is immersed in the molten zinc, the moisture on the steel goes to superheated steam, volatilizing  $\text{NH}_4\text{Cl}$  from the fluxing agent into white smoke.

Two by-products are generated in the galvanizing reaction, commonly known as dross and skims. Dross is a zinc iron ( $\text{ZnFe}$ ) crystal that is formed by the reaction of free iron with zinc. Dross is denser than molten zinc and falls to the bottom of the kettle. The dross is dredged out monthly and sold to re-processors. Skims are primarily composed of zinc oxide ( $\text{ZnO}$ ) which forms on the surface of the zinc bath. Skims are created by the reaction of molten zinc with atmospheric oxygen and the release of the fluxing agent. ZINKPOWER will use a natural gas-fired zinc recovery unit (EP-05) to recover zinc from skims. The skims are loaded into the recovery units, and heat is applied to separate the zinc from the skims. Skims are also sold to re-processors or reused in the zinc kettle. A baghouse (CD-02) controls emissions from the zinc kettle (EP-03), and the collected particulate matter (PM) is sold to re-processors.

When the galvanizing process is complete, the steel is removed from the kettle, and immersed into a freshwater quench tank to cool the steel so that it can be handled. Finally, the galvanized steel undergoes passivation. Passivation is a quenching process which prohibits the formation of excessive zinc oxides and zinc hydroxides in the first several weeks after the galvanizing process. The passivation process occurs in a separate quench tank that contains water and an aqueous based coating.

Site figures and a process flow diagram are provided in **Attachment B**.

## EMISSION CALCULATIONS

The acid degreaser tanks (EP-01) and the HCl tanks (EP-02) are sources of HCl emissions. Emissions were calculated using the HCl acid tank emission equation in the Texas Commission on Environmental Quality's (TCEQ's) *Calculations Guidance Package for Hot Dip Galvanizing (Attachment D)*. The equation uses the vapor pressure of the HCl solution determined by the percentage HCl in the tank solution and the temperature of the solution. The solution in the acid degreaser tanks has approximately 10% degreasing agent, which has 0.35% HCl content, and a maximum temperature of 104°F. The HCl tanks contain an average of 12% HCl and operate at a maximum temperature of approximately 80°F. Both pickling tanks are controlled by a wet scrubber (CD-01), which has a 90% control efficiency per manufacturer specifications.

Particulate matter (PM) emissions for the zinc kettle (EP-03) were calculated using emission factors and speciated emission information from the galvanizing/zinc kettle emission equations in TCEQ's *Calculations Guidance Package for Hot Dip Galvanizing*. Emissions from the zinc kettle are controlled by a baghouse (CD-02) which has an assumed 99.5% minimum control efficiency in

accordance with AP-42 Appendix B.2 Table B.2-3 *Typical Collection Efficiencies of Various Particulate Control Devices*.

The combustion of natural gas from the dryer (EP-04) and zinc recovery unit (EP-05) will emit PM, sulfur dioxide (SO<sub>2</sub>), volatile organic compounds (VOC), carbon monoxide (CO), nitrogen oxides (NO<sub>x</sub>), and hazardous air pollutants (HAPs). Emissions were calculated using the provided maximum hourly throughput and emission factors from AP-42 Table 1.4-2 *Emission Factors for Criteria Pollutants and Greenhouse Gases from Natural Gas Combustion*.

Backup electrical power will be provided by a diesel-fueled emergency generator (EP-06) at the proposed facility. The combustion of diesel fuel from the generator will emit PM, SO<sub>x</sub>, VOC, CO, NO<sub>x</sub>, and HAPs. Emissions were calculated using the provided horsepower for the engine and emission factors from AP-42 Table 3.4-1, 3.4-2, and 3.4-3 for *Large Uncontrolled Stationary Diesel Engines*.

Detailed calculations can be found in **Attachment C**.

## PERMIT APPLICABILITY

In accordance with the IDEM Registration requirements, applicability is based on the uncontrolled potential emissions compared to the emission thresholds found at 326 IAC 2-5.1-3(a)(1) and 326 IAC 2-7-1(22). Any source with uncontrolled potential emissions greater than or equal to the minor source emission thresholds and below major source (Part 70) levels is required to obtain a minor source operating permit. A comparison of the emission thresholds to the uncontrolled potential annual emissions generated by ZINKPOWER is shown in the table below.

Pollutant	Minor Source Permit Threshold (TPY)	Part 70 Permit Threshold (TPY)	Uncontrolled Potential Emissions (TPY)
PM	25	100	34.63
PM <sub>10</sub>	25	100	34.56
PM <sub>2.5</sub>	25	100	33.18
SO <sub>2</sub>	25	100	0.014
VOC	25	100	0.55
CO	100	100	5.55
NO <sub>x</sub>	25	100	18.68
HAPs	10/25	10/25	1.33

TPY: tons per year

The emission calculations indicate that the uncontrolled potential emissions generated by the equipment and processes described will exceed the applicable Minor Source Operating Permit thresholds but are less than the Part 70 Permit threshold.

We appreciate your review of this Minor Source Operating Permit application. If you have any questions regarding this submittal or require additional information, please contact Stephanie Taylor at 913-749-0733 or staylor@scsengineers.com.

Sincerely,



Priya Hrenko, P.E.  
Senior Project Professional  
SCS Engineers



Stephanie Taylor  
Project Manager  
SCS Engineers

PH/SLT

cc: Tim Pendley, ZINKPOWER – USA  
Craig Hamilton, ZINKPOWER – USA

Attachment A IDEM Application Forms  
Attachment B Site Figures and Process Flow Diagram  
Attachment C Summary of Emissions and Emission Calculations  
Attachment D TCEQ Calculations Guidance Package – Hot Dip Galvanizing



Attachment A  
IDEM Application Forms

**AIR PERMIT APPLICATION COVER SHEET**

State Form 50639 (R4 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this cover sheet is to obtain the core information needed to process the air permit application. This cover sheet is required for all air permit applications submitted to IDEM, OAQ. Place this cover sheet on top of all subsequent forms and attachments that encompass your air permit application packet.
- Submit the completed air permit application packet, including all forms and attachments, to **IDEM Air Permits Administration** using the address in the upper right hand corner of this page.
- IDEM will send a bill to collect the filing fee and any other applicable fees.
- Detailed instructions for this form are available on the Air Permit Application Forms website.

**FOR OFFICE USE ONLY****PERMIT NUMBER:**

167-48014-00200

**DATE APPLICATION WAS RECEIVED:**

Received by State of Indiana IDEM-  
 OAQ  
 via email June 27, 2024 MJ-1

**1. Tax ID Number:****PART A: Purpose of Application**

Part A identifies the purpose of this air permit application. For the purposes of this form, the term "source" refers to the plant site as a whole and NOT to individual emissions units.

**2. Source / Company Name:** ZINKPOWER - Terre Haute, LLC**3. Plant ID:** –**4. Billing Address:** P.O. Box 2140**City:** Weatherford**State:** TX**ZIP Code:** 76086 –**5. Permit Level:**  Exemption  Registration  SSOA  MSOP  FESOP  TVOP  PBR**6. Application Summary:** Check all that apply. Multiple permit numbers may be assigned as needed based on the choices selected below.

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Initial Permit | <input type="checkbox"/> Renewal of Operating Permit        | <input type="checkbox"/> Asphalt General Permit            |
| <input type="checkbox"/> Review Request            | <input type="checkbox"/> Revocation of Operating Permit     | <input type="checkbox"/> Alternate Emission Factor Request |
| <input type="checkbox"/> Interim Approval          | <input type="checkbox"/> Relocation of Portable Source      | <input type="checkbox"/> Acid Deposition (Phase II)        |
| <input type="checkbox"/> Site Closure              | <input type="checkbox"/> Emission Reduction Credit Registry |  |

 Transition (between permit levels) *From:* *To:*

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Administrative Amendment: | <input type="checkbox"/> Company Name Change                     | <input type="checkbox"/> Change of Responsible Official |
|  | <input type="checkbox"/> Correction to Non-Technical Information | <input type="checkbox"/> Notice Only Change             |
|  | <input type="checkbox"/> Other (specify):                        |   |

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Modification: | <input type="checkbox"/> New Emission Unit or Control Device     | <input type="checkbox"/> Modified Emission Unit or Control Device        |
|  | <input type="checkbox"/> New Applicable Permit Requirement       | <input type="checkbox"/> Change to Applicability of a Permit Requirement |
|  | <input type="checkbox"/> Prevention of Significant Deterioration | <input type="checkbox"/> Emission Offset                                 |
|  | <input type="checkbox"/> Minor Source Modification               | <input type="checkbox"/> MACT Preconstruction Review                     |
|  | <input type="checkbox"/> Minor Permit Modification               | <input type="checkbox"/> Significant Permit Modification                 |
|  | <input type="checkbox"/> Other (specify):                        |  |

**7. Is this an application for an initial construction and/or operating permit for a "Greenfield" Source?**  Yes  No**8. Is this an application for construction of a new emissions unit at an Existing Source?**  Yes  No

### PART B: Pre-Application Meeting

Part B specifies whether a meeting was held or is being requested to discuss the permit application.

9. Was a meeting held between the company and IDEM prior to submitting this application to discuss the details of the project?

No       Yes:    *Date:*

10. Would you like to schedule a meeting with IDEM management and your permit writer to discuss the details of this project?

No       Yes:    *Proposed Date for Meeting:*

### PART C: Confidential Business Information

Part C identifies permit applications that require special care to ensure that confidential business information is kept separate from the public file.

Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in the Indiana Administrative Code (IAC). To ensure that your information remains confidential, refer to the IDEM, OAQ information regarding submittal of confidential business information. For more information on confidentiality for certain types of business information, please review IDEM's Nonrule Policy Document Air-031-NPD regarding Emission Data.

11. Is any of the information contained within this application being claimed as **Confidential Business Information**?

No       Yes

### PART D: Certification Of Truth, Accuracy, and Completeness

Part D is the official certification that the information contained within the air permit application packet is truthful, accurate, and complete. Any air permit application packet that we receive without a signed certification will be deemed incomplete and may result in denial of the permit.

For a Part 70 Operating Permit (TVOP) or a Source Specific Operating Agreement (SSOA), a "responsible official" as defined in 326 IAC 2-7-1(34) must certify the air permit application. For all other applicants, this person is an "authorized individual" as defined in 326 IAC 2-1.1-1(1).

*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.*

Tim Pendley  
Name (typed)

CEO  
Title

Signature

Date

6/27/2024



# OAQ AIR PERMIT APPLICATION – FORMS CHECKLIST

State Form 51607 (R5 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this checklist is to help the applicant and IDEM, OAQ ensure that the air permit application packet is administratively complete. This checklist is a required form.
- Check the appropriate box indicating whether each application form is applicable for the current permit application. The source must submit only those forms pertinent to the current permit application.
- Place this checklist between the cover sheet and all subsequent forms and attachments that encompass your air permit application packet.

Part A: General Source Data				
Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	COVER	Application Cover Sheet	50639	Include for every application, modification, and renewal, including source specific operating agreements (SSOA).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CHECKLIST	Forms Checklist	51607	Include for every application, modification, and renewal, including SSOA.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-01	Basic Source Level Information	50640	Include for every application, modification, and renewal, including SSOA.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-02	Plant Layout Diagram	51605	Include for every new source application, and modification.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-03	Process Flow Diagram	51599	Include one for every process covered by the application.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-04	Stack / Vent Information	51606	Include for every new source application, and modification.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-05	Emissions Unit Information	51610	Include for every process covered by the application.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-06	Particulate Emissions Summary	51612	Include if the process has particulate emissions (PM).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-07	Criteria Pollutant Emissions Summary	51602	Include if the process has criteria pollutant emissions.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-08	HAP Emissions Summary	51604	Include if the process has hazardous air pollutant emissions (HAP).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-09	Summary of Additional Information	51611	Include if the additional information is included.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-10	Insignificant Activities	51596	Include if there are unpermitted insignificant activities.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-11	Alternative Operating Scenario	51601	Include if an AOS is requested.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-12	Affidavit of Nonapplicability	51600	Include if the standard notification requirements do not apply.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-13	Affidavit of Applicability	51603	Include if the standard notification requirements apply.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-14	Owners and Occupants Notified	51609	Include if the standard notification requirements apply.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-15	Government Officials Notified	51608	Include if the standard notification requirements apply.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	RENEWAL	Renewal Checklist	51755	Include with every operating permit renewal packet.

**Part B: Process Information**

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	AEF-01	Alternate Emission Factor Request	51860	Submit if you are requesting to use an emission factor other than AP-42.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	PI-01	Miscellaneous Processes	52534	Include one form for each process for which there is not a specific PI form.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	PI-02A	Combustion Unit Summary	52535	Include one form to summarize all combustion units ( <i>unless SSOA</i> ).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	PI-02B	<i>Combustion:</i> Boilers, Process Heaters, & Furnaces	52536	Include one form for each boiler, process heater, or furnace ( <i>unless SSOA</i> ).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	PI-02C	<i>Combustion:</i> Turbines & Internal Combustion Engines	52537	Include one form for each turbine or internal combustion engine ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02D	<i>Combustion:</i> Incinerators & Combustors	52538	Include one form for each incinerator or combustor ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02E	<i>Combustion:</i> Kilns	52539	Include one form for each kiln ( <i>unless SSOA</i> ).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	PI-02F	<i>Combustion:</i> Fuel Use	52540	Include one form for each combustion unit ( <i>unless SSOA</i> ).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	PI-02G	<i>Combustion:</i> Emission Factors	52541	Include one form for each combustion unit ( <i>unless SSOA</i> ).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	PI-02H	<i>Combustion:</i> Federal Rule Applicability	52542	Include one form for each combustion unit ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-03	Storage and Handling of Bulk Material	52543	Include if the process involves the storage and handling of bulk materials.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-04	Asphalt Plants	52544	Include for each asphalt plant process ( <i>unless general permit</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-05	Brick / Clay Products	52545	Include for each brick and/or clay products process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-06	Electroplating Operations	52546	Include for each electroplating process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-07	Welding Operations	52547	Include for each welding process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-08	Concrete Batchers	52548	Include for each concrete batcher ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-09	Degreasing	52549	Include for each degreasing process ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-10	Dry Cleaners	52550	Include for each dry cleaning process
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-11	Foundry Operations	52551	Include for each foundry process
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-12	Grain Elevators	52552	Include for each grain elevator ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-13	Lime Manufacturing	52553	Include for each lime manufacturing process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-14	Liquid Organic Compound Storage	52554 (doc)	Include if the process involves the storage of liquid organic compounds.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-14ALT	Alternate version of Liquid Organic Compound Storage	52555 (xls)	Include if the process involves the storage of liquid organic compounds and there are several storage vessels.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-15	Portland Cement Manufacturing	52556	Include for each Portland cement manufacturing process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-16	Reinforced Plastics & Composites	52557	Include for each reinforced plastics and composites process.

Continued on Next Page

Part B: Process Information				
Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-17	Blasting Operations	52558	Include for each blasting process ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-18	Mineral Processing	52559	Include if the process involves mineral processing ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-19	Surface Coating & Printing Operations	52560	Include for each surface coating or printing process ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-20	Woodworking / Plastic Machining	52561	Include for each woodworking or plastic machining process ( <i>unless SSOA</i> ).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-21	Site Remediation	52570	Include for each soil remediation process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-22	Ethanol Plants ( <i>Under Development</i> )	None	Include for each ethanol plant.

Part C: Control Equipment				
Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CE-01	Control Equipment Summary	51904	Include if add-on control equipment will be used for the process.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CE-02	Particulates – Baghouse / Fabric Filter	51953	Include for each baghouse or fabric filter.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-03	Particulates – Cyclone	52620	Include for each cyclone.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-04	Particulates – Electrostatic Precipitator	52621	Include for each electrostatic precipitator.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CE-05	Particulates – Wet Collector / Scrubber / Absorber	52622	Include for each wet collector, scrubber, or absorber.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-06	Organics – Flare / Oxidizer / Incinerator	52623	Include for each flare, oxidizer, or incinerator.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-07	Organics – Adsorbers	52624	Include for each adsorber.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-08	Organics – Condenser	52625	Include for each condenser.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-09	Reduction Technology	52626	Include for each control device using reduction technology (e.g., SCR, SNCR).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-10	Miscellaneous Control Equipment	52436	Include one form for equipment for which there is not a specific CE form.

**Part D: Compliance Determination for Part 70 Sources**

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CD-01	Emissions Unit Compliance Status	51861	Include for every Title V application, including modifications.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CD-02	Compliance Plan by Applicable Requirement	51862	Include for every Title V application, including modifications.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CD-03	Compliance Plan by Emissions Unit	51863	Include for every Title V application, including modifications.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CD-04	Compliance Schedule and Certification	51864	Include for every Title V application, including modifications and renewal.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	FED-03	Compliance Assurance Monitoring	53377	Include for every Title V application, including modifications.

**Part E: Best Available Control Technology**

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BACT-01	Analysis of Best Available Control Technology	None	Include for every BACT application.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BACT-01a	Background Search: Existing BACT Determinations	None	Include for every BACT application.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BACT-01b	Cost/Economic Impact Analysis	None	Include for every BACT application.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BACT-02	Summary of Best Available Control Technology	None	Include for every BACT application.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PSD / EO-01	PSD / Emission Offset Checklist	None	Include for every PSD application and every NSR application that requires emission offsets.

**Part F: Emission Credit Registry**

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	EC-01	Generation of Emission Credits	51783	Include if the modification results in emission reductions.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	EC-02	Transfer of Emission Credits	51784	Submit whenever registered emission credits are transferred.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	EC-03	Use of Emission Credits	51785	Include if the modification requires the use of emission credits for offsets.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	EC-04	Emission Credit Request	51906	Submit if you are looking for emission credits for offsets.

**Part G: Plantwide Applicability Limits**

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PAL-01	Actuals Plantwide Applicability Limit	52451	Include if the modification results in emission reductions.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PAL-02	Revised Plantwide Applicability Limit	52452	Submit whenever registered emission credits are transferred.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PAL-03	Plantwide Applicability Limit Renewal	52453	Include if the modification requires the use of emission credits for offsets.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PAL-04	Request for Termination of Plantwide Applicability Limit	52454	Submit if you are looking for emission credits for offsets.

**Part H: Air Toxics**

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	FED-01	Summary of Federal Requirements – NSPS & NESHAP	53512	Include for each 40 CFR Part 60 NSPS, 40 CFR Part 61 NESHAP, and 40 CFR Part 63 NESHAP applicable to the process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	FED-02	MACT Pre-Construction Review	51905	Include if constructing or modifying a process subject to a Part 63 NESHAP.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	No Form ID	MACT Initial Notification	None	This form is available on the U.S. EPA website. Completed notifications should be submitted to the IDEM Compliance Branch.

**Part I: Special Permits**

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	INTERIM	Interim Approval	None	Submit if you are applying for interim operating approval.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	ASPHALT	Asphalt General Permit	None	Submit if you are applying for or modifying an asphalt plant general permit.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	NOXBTP	NO <sub>x</sub> Budget Permit	None	Submit if you are a power plant or if you have opted in to the NO <sub>x</sub> budget trading program.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	ACIDRAIN	Phase 2 Acid Rain Permit	None	Submit if you are applying for, modifying, or renewing a Phase 2 Acid Rain permit.

**Part J: Source Specific Operating Agreements (SSOA)**

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-01	Summary of Application and Existing Agreements	53438	Submit if you are applying for or modifying a Source Specific Operating Agreement.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-02	Industrial / Commercial Surface Coating Operations -OR- Graphic Arts Operations (326 IAC 2-9-2.5)	53439	Submit if you are applying for or modifying a SSOA for industrial or commercial surface coating operations not subject to 326 IAC 8-2; or graphic arts operations not subject to 326 IAC 8-5-5.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-03	Surface Coating or Graphic Arts Operations (326 IAC 2-9-3)	53440	Submit if you are applying for or modifying a SSOA for surface coating or graphic arts operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-04	Woodworking Operations (326 IAC 2-9-4)	53441	Submit if you are applying for or modifying a SSOA for woodworking operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-05	Abrasive Cleaning Operations (326 IAC 2-9-5)	53442	Submit if you are applying for or modifying a SSOA for abrasive cleaning operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-06	Grain Elevators (326 IAC 2-9-6)	53443	Submit if you are applying for or modifying a SSOA for grain elevators.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-07	Sand And Gravel Plants (326 IAC 2-9-7)	53444	Submit if you are applying for or modifying a SSOA for sand and gravel plants.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-08	Crushed Stone Processing Plants (326 IAC 2-9-8)	53445	Submit if you are applying for or modifying a SSOA for crushed stone processing plants.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-09	Ready-Mix Concrete Batch Plants (326 IAC 2-9-9)	53446	Submit if you are applying for or modifying a SSOA for ready-mix concrete batch plants.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-10	Coal Mines And Coal Preparation Plants (326 IAC 2-9-10)	53447	Submit if you are applying for or modifying a SSOA for coal mines and coal preparation plants.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-11	Automobile Refinishing Operations (326 IAC 2-9-11)	53448	Submit if you are applying for or modifying a SSOA for automobile refinishing operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-12	Degreasing Operations (326 IAC 2-9-12)	53449	Submit if you are applying for or modifying a SSOA for degreasing operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-13	External Combustion Sources (326 IAC 2-9-13)	53450	Submit if you are applying for or modifying a SSOA for external combustion sources.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-14	Internal Combustion Sources (326 IAC 2-9-14)	53451	Submit if you are applying for or modifying a SSOA for internal combustion sources.

**OAQ GENERAL SOURCE DATA APPLICATION****GSD-01: Basic Source Level Information**

State Form 50640 (R5 / 1-10)

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

Received by State of Indiana IDEM-OAQ  
 via email June 27, 2024 MJ-1

167-48014-00200

**NOTES:**

- The purpose of GSD-01 is to provide essential information about the entire source of air pollutant emissions. GSD-01 is a required form.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

**PART A: Source / Company Location Information**

<b>1. Source / Company Name:</b> ZINKPOWER-TERRE HAUTE, LLC		<b>2. Plant ID:</b> –	
<b>3. Location Address:</b> 2109 Park Avenue			
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47805 –	
<b>4. County Name:</b> Vigo		<b>5. Township Name:</b> Otter Creek	
<b>6. Geographic Coordinates:</b>			
<b>Latitude:</b> 39.527704		<b>Longitude:</b> -87.385118	
<b>7. Universal Transferal Mercadum Coordinates (if known):</b>			
<b>Zone:</b> 16	<b>Horizontal:</b> 466901.00	<b>Vertical:</b> 4375410.00	
<b>8. Adjacent States:</b> Is the source located within 50 miles of an adjacent state? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes – <i>Indicate Adjacent State(s):</i> <input checked="" type="checkbox"/> Illinois (IL) <input type="checkbox"/> Michigan (MI) <input type="checkbox"/> Ohio (OH) <input type="checkbox"/> Kentucky (KY)			
<b>9. Attainment Area Designation:</b> Is the source located within a non-attainment area for any of the criteria air pollutants? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>Indicate Nonattainment Pollutant(s):</i> <input type="checkbox"/> CO <input type="checkbox"/> Pb <input type="checkbox"/> NO <sub>x</sub> <input type="checkbox"/> O <sub>3</sub> <input type="checkbox"/> PM <input type="checkbox"/> PM <sub>10</sub> <input type="checkbox"/> PM <sub>2.5</sub> <input type="checkbox"/> SO <sub>2</sub>			
<b>10. Portable / Stationary:</b> Is this a portable or stationary source? <input type="checkbox"/> Portable <input checked="" type="checkbox"/> Stationary			

**PART B: Source Summary**

<b>11. Company Internet Address (optional):</b>	
<b>12. Company Name History:</b> Has this source operated under any other name(s)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>Provide information regarding past company names in Part I, Company Name History.</i>	
<b>13. Portable Source Location History:</b> Will the location of the portable source be changing in the near future? <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> No <input type="checkbox"/> Yes – <i>Complete Part J, Portable Source Location History, and Part K, Request to Change Location of Portable Source.</i>	
<b>14. Existing Approvals:</b> Have any exemptions, registrations, or permits been issued to this source? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>List these permits and their corresponding emissions units in Part M, Existing Approvals.</i>	
<b>15. Unpermitted Emissions Units:</b> Does this source have any unpermitted emissions units? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>List all unpermitted emissions units in Part N, Unpermitted Emissions Units.</i>	
<b>16. New Source Review:</b> Is this source proposing to construct or modify any emissions units? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes – <i>List all proposed new construction in Part O, New or Modified Emissions Units.</i>	
<b>17. Risk Management Plan:</b> Has this source submitted a Risk Management Plan? <input checked="" type="checkbox"/> Not Required <input type="checkbox"/> No <input type="checkbox"/> Yes → Date submitted: _____ EPA Facility Identifier: – –	

**PART C: Source Contact Information**

**IDEM will send the original, signed permit decision to the person identified in this section. This person MUST be an employee of the permitted source.**

**18. Name of Source Contact Person:** Craig Hamilton

**19. Title (optional):** EHS Manager

**20. Mailing Address:** P.O. Box 2140

**City:** Weatherford

**State:** TX

**ZIP Code:** 76086 –

**21. Electronic Mail Address (optional):** Craig.Hamilton@zinkpower.com

**22. Telephone Number:** ( 503 ) 708 – 5926

**23. Facsimile Number (optional):** ( ) –

**PART D: Authorized Individual/Responsible Official Information**

**IDEM will send a copy of the permit decision to the person indicated in this section, if the Authorized Individual or Responsible Official is different from the Source Contact specified in Part C.**

**24. Name of Authorized Individual or Responsible Official:** Tim Pendley

**25. Title:** CEO

**26. Mailing Address:** P.O. Box 2140

**City:** Weatherford

**State:** TX

**ZIP Code:** 76086 –

**27. Telephone Number:** ( 682 ) 412 – 9288

**28. Facsimile Number (optional):** ( ) –

**29. Request to Change the Authorized Individual or Responsible Official:** Is the source officially requesting to change the person designated as the Authorized Individual or Responsible Official in the official documents issued by IDEM, OAQ? *The permit may list the title of the Authorized Individual or Responsible Official in lieu of a specific name.*

No  Yes – **Change Responsible Official to:**

**PART E: Owner Information**

**30. Company Name of Owner:** ZINKPOWER-TERRE HAUTE, LLC

**31. Name of Owner Contact Person:** Craig Hamilton

**32. Mailing Address:** P.O. Box 2140

**City:** Weatherford

**State:** TX

**ZIP Code:** 76086 –

**33. Telephone Number:** ( 503 ) 708 – 5926

**34. Facsimile Number (optional):** ( ) –

**34. Operator:** Does the "Owner" company also operate the source to which this application applies?

No – *Proceed to Part F below.*  Yes – *Enter "SAME AS OWNER" on line 35 and proceed to Part G below.*

**PART F: Operator Information**

**35. Company Name of Operator:** ZINKPOWER-TERRE HAUTE, LLC

**36. Name of Operator Contact Person:** Ken Morgan

**37. Mailing Address:** P.O. Box 2140

**City:** Weatherford

**State:** TX

**ZIP Code:** 76086 –

**38. Telephone Number:** ( 682 ) 258 – 1280

**39. Facsimile Number (optional):** ( ) –





**PART L: Source Process Description**

Complete this section to summarize the main processes at the source.

64. Process Description	65. Products	66. SIC Code	67. NAICS Code
Hot Dip Galvanizing	Galvanized Steel	3479	332812

**PART M: Existing Approvals (if applicable)**

Complete this section to summarize the approvals issued to the source since issuance of the main operating permit.

68. Permit ID	69. Emissions Unit IDs	70. Expiration Date

**PART N: Unpermitted Emissions Units (if applicable)**

Complete this section only if the source has emission units that are not listed in any permit issued by IDEM, OAQ.

71. Emissions Unit ID	72. Type of Emissions Unit	73. Actual Dates		
		Began Construction	Completed Construction	Began Operation

**PART O: New or Modified Emissions Units (if applicable)**

Complete this section only if the source is proposing to add new emission units or modify existing emission units.

74. Emissions Unit ID	75. NEW	76. MOD	77. Type of Emissions Unit	78. Estimated Dates		
				Begin Construction	Complete Construction	Begin Operation
EP-01	X		Acid Degreaser Tanks	8/1/2024	10/31/2025	10/31/2025
EP-02	X		HCl Tanks	8/1/2024	10/31/2025	10/31/2025
EP-03	X		Zinc Kettle	8/1/2024	10/31/2025	10/31/2025
EP-04	X		Dryers	8/1/2024	10/31/2025	10/31/2025

EP-05	X		Zinc Recovery Units	8/1/2024	10/31/202 5	10/31/20 25
-------	---	--	---------------------	----------	----------------	----------------

**PART L: Source Process Description**

Complete this section to summarize the main processes at the source.

64. Process Description	65. Products	66. SIC Code	67. NAICS Code
Hot Dip Galvanizing	Galvanized Steel	3479	332812

**PART M: Existing Approvals (if applicable)**

Complete this section to summarize the approvals issued to the source since issuance of the main operating permit.

68. Permit ID	69. Emissions Unit IDs	70. Expiration Date

**PART N: Unpermitted Emissions Units (if applicable)**

Complete this section only if the source has emission units that are not listed in any permit issued by IDEM, OAQ.

71. Emissions Unit ID	72. Type of Emissions Unit	73. Actual Dates		
		Began Construction	Completed Construction	Began Operation

**PART O: New or Modified Emissions Units (if applicable)**

Complete this section only if the source is proposing to add new emission units or modify existing emission units.

74. Emissions Unit ID	75. NEW	76. MOD	77. Type of Emissions Unit	78. Estimated Dates		
				Begin Construction	Complete Construction	Begin Operation
EP-06	X		Emergency Generators	8/1/2024	10/31/2025	10/31/2025



**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-02: Plant Layout Diagram**  
 State Form 51605 (R3 / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of GSD-02 is to provide a diagram of the entire plant site. This form and a Plant Layout diagram are required for all air permit applications. If you do not provide the necessary information, applicable to your source, the application process may be stopped.
- IDEM, OAQ has provided detailed instructions for this form and an example of a basic plant layout diagram on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

**Part A: Basic Plant Layout**

Part A provides IDEM, OAQ with the appropriate information about all buildings and access-limiting features in and around the plant site. **Please use this table as a checklist.** You must provide scaled drawings, with the actual scale shown. All dimensions and units must be clearly indicated with a brief explanation of what is being shown. Include the following (*All measurements should be given in feet.*):

1. <input checked="" type="checkbox"/> Building Location and Dimensions		
2. <input checked="" type="checkbox"/> Property Lines and Access-Limiting Features		
3. <input checked="" type="checkbox"/> Surrounding Building Location and Dimensions		
4. <input checked="" type="checkbox"/> Distances to Property Lines and Access-Limiting Features		
5. <input type="checkbox"/> UTM Location Coordinates	6. <input checked="" type="checkbox"/> Compass (pointing North)	7. <input checked="" type="checkbox"/> Scale

**Part B: Stack Information**

Part B provides IDEM, OAQ with the appropriate information about all stacks, roof monitors, control devices, and process vents at the plant site. **Please use this table as a checklist.** You must show the location of all applicable emission points and include all relevant stack and emissions unit identification numbers for each. In addition, you will need to identify each of these emission points under "Stack Identification" on form GSD-04, Stack/Vent Information. Include the following (*All measurements should be in feet.*):

8. <input checked="" type="checkbox"/> Exhaust Stacks		
9. <input type="checkbox"/> Process Vents		
10. <input type="checkbox"/> Roof Monitors	<input checked="" type="checkbox"/> No Roof Monitors	
11. <input checked="" type="checkbox"/> Control Devices	<input type="checkbox"/> No Control Devices	
12. <input type="checkbox"/> Interior Vents	<input type="checkbox"/> No Interior Vents	<input checked="" type="checkbox"/> Doors and Windows ( <i>for processes vented inside a building</i> )

**Part C: Roadway Information**

Part C provides IDEM, OAQ with the appropriate information about the roadways in and around the plant site. **Please use this table as a checklist.** Include the following (*All measurements should be in feet.*):

13. <input checked="" type="checkbox"/> Adjacent Roadways <input checked="" type="checkbox"/> Interior Roadways		
14. <input checked="" type="checkbox"/> Roadway Surface Description (gravel, dirt, paved, etc.)		
15. <input checked="" type="checkbox"/> Number of Lanes		





### Part F: Plant Layout Diagram

This space provides a place for a hand drawn plant layout diagram. It is **optional** to use this space to create your plant layout, but you must include the diagram with your application. If you choose to submit the plant layout in a different format, state "plant layout attached" in the space provided, and submit the information with your completed application. IDEM, OAQ has provided an example of a basic plant layout diagram on the Air Permit Applications Forms website.

Plant layout is attached in Attachment B.



**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-03: Process Flow Diagram**  
 State Form 51599 (R3 / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of GSD-03 is to provide a checklist for identifying the information to be included on each Process Flow diagram.
- Complete this form and submit a process flow diagram for each process included in your air permit application.
- IDEM, OAQ has provided detailed instructions for this form and an example of a basic process flow diagram on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

<b>Part A: Process Flow Diagram</b>			
Part A provides basic information to understanding the nature of the process. Please use this table as a checklist to indicate that you have included the following items on your process flow diagram ( <i>All throughputs should be given in pounds per hour.</i> ):			
1. <input checked="" type="checkbox"/> <b>Process Description:</b>	Hot Dip Galvanizing		
2. <input checked="" type="checkbox"/> Process Equipment	3. <input checked="" type="checkbox"/> Raw Material Input	4. <input checked="" type="checkbox"/> Process Throughput	
5. <input checked="" type="checkbox"/> Additions <input type="checkbox"/> Deletions <input type="checkbox"/> Modifications			
Use the space below to briefly explain the impacts of the additional equipment, the reason for removing any equipment, and/or the reason for the proposed modification. ( <i>If additional space is needed, please attach a separate sheet with the information and indicate in the space below that additional information is attached.</i> )			
Installation of a new hot dip galvanizing plant.			

<b>Part B: Process Operation Schedule</b>			
Part B indicates the actual (or estimated actual) hours of operation for the process.			
6. <input checked="" type="checkbox"/> Process Operation Schedule	<u>24</u> Hours per Day	<u>6</u> Days per Week	<u>52</u> Weeks Per Year
7. <b>Scheduled Downtime:</b> Use the space below to include as much information as is known about scheduled periods of downtime for this process. ( <i>If additional space is needed, please attach a separate sheet with the information and indicate in the space below that additional information is attached.</i> )			

<b>Part C: Emissions Point Information</b>			
Part C provides information about each potential outlet of air pollutant emissions to the atmosphere. Please use this table as a checklist to indicate that you have included the following items on your process flow diagram ( <i>All throughputs should be given in pounds per hour.</i> ):			
8. <input checked="" type="checkbox"/> Stack / Vent Information			
9. <input checked="" type="checkbox"/> Pollutants Emitted			
10. <input checked="" type="checkbox"/> Air Pollution Control			

### Part D: Process Flow Diagram

This space provides a place for a hand drawn process flow diagram. It is **optional** to use this space to create your process flow diagram, but you must include the diagram with your application. If you choose to submit the process flow diagram in a different format, state "process flow diagram attached" in the space provided, and submit the information with your completed application. IDEM, OAQ has provided an example of a basic process flow diagram on the Air Permit Applications Forms website.

Process flow diagram included in Attachment B.





**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-05: Emissions Unit Information**  
 State Form 51610 (R3 / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

- NOTES:**
- The purpose of this form is to provide basic information about each emissions unit that has the potential to emit air pollutants. This form is required for all air permit applications.
  - Detailed instructions for this form are available online on the Air Permit Application Forms website.
  - All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

**Emissions Unit Information**

This table provides detailed information about each emissions unit that has the potential to emit air pollutants to the atmosphere. Accurate information is needed to determine the total potential to emit. If you do not provide enough information to adequately describe each emissions unit, the application process may be stopped. If additional space is needed, you may make a copy of this form.

1. Unit ID	2. Model Number	3. Serial Number	4. Description	5. Manufacturer	6. Installation Date	7. Maximum Capacity	8. Stack / Vent ID
EP-01	PE Tank 100 Resistant Crack	N/A	Acid Degreaser Tanks	Imfitex	10/31/25	646.00 ft2	CD-01 & EP-04
EP-02	PE Tank 100 Resistant Crack	N/A	HCl Tanks	Imfitex	10/31/25	2260.00 ft2	CD-01 & EP-04
EP-03	ACS-1645/1	Unknown	Zinc Kettle	W. Pilling	10/31/25	30000.00 lb/hr	CD-02
EP-04	BBB – Twin	910-8911.00	Dryer	ZP Services GmbH&Co.KG	10/31/25	2119 ft3/hr	CD-01 & EP-04
EP-05	N/A	Unknown	Zinc Recovery Unit	ZINKPOWER	10/31/25	836.5 ft3/hr	EP-05
EP-06	Unknown	Unknown	Emergency Generators (2)	Unknown	10/31/25	2000 KW	EP-06

--	--	--	--	--	--	--	--



**Part B: Control of Particulate Emissions**

Part C gathers information about how each source of particulate emissions is controlled. If you do not provide enough information to adequately describe how each source of particulate emissions is controlled, the application process may be stopped. If additional space is needed, you may make a copy of this table.

10. Emissions Point ID	11. Control Measure	12. Control Measure Description	13. Control Plan
EP-03	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	A baghouse will be used to control PM emissions from the Zinc Kettle	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date Submitted: _____
EP-04	<input checked="" type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date Submitted: _____
EP-05	<input checked="" type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date Submitted: _____
EP-06	<input checked="" type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date Submitted: _____
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: _____
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: _____
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: _____
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: _____





**OAQ GENERAL SOURCE DATA APPLICATION  
GSD-07: Criteria Pollutant Emissions Summary**

State Form 51602 (R3 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

- NOTES:**
- The purpose of this form is to provide the actual and potential emissions of each criteria pollutant emitted from the source. This form is required for all air permit applications.
  - Detailed instructions for this form are available on the Air Permit Application Forms website.
  - All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

**Part A: Unit Emissions Summary**

Part A provides the actual and potential emissions of each criteria pollutant emitted from each emissions unit. If you do not provide enough information to adequately describe the emissions from each emissions unit, the application process may be stopped.

1. Unit ID	2. Stack / Vent ID	3. Criteria Pollutant	4. Actual Emissions		5. Potential To Emit	
			Standard Units	Tons Per Year	Standard Units	Tons Per Year
EP-03	CD-02	PM/PM10	0.04 lb/hr	0.17	7.80 lb/hr	34.16
		PM2.5	0.04 lb/hr	0.16	7.49 lb/hr	32.80
EP-04	EP-04	PM/PM10PM2.5	0.02 lb/hr	0.07	0.02 lb/hr	0.07
		NOx	0.21 lb/hr	0.93	0.21 lb/hr	0.93
		CO	0.18 lb/hr	0.78	0.18 lb/hr	0.78
		SO2	0.00 lb/hr	0.01	0.00 lb/hr	0.01
		VOC	0.01 lb/hr	0.05	0.01 lb/hr	0.05
		Lead	0.00 lb/hr	0.00	0.00 lb/hr	0.00
EP-05	EP-05	PM/PM10	0.01 lb/hr	0.01	0.01 lb/hr	0.01
		PM2.5	0.01 lb/hr	0.01	0.00 lb/hr	0.01
		NOx	0.08 lb/hr	0.08	0.08 lb/hr	0.08
		CO	0.07 lb/hr	0.07	0.07 lb/hr	0.07
		SO2	0.00 lb/hr	0.00	0.00 lb/hr	0.00
		VOC	0.01 lb/hr	0.01	0.01 lb/hr	0.01
		Lead	0.00 lb/hr	0.00	0.00 lb/hr	0.00



**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-07: Criteria Pollutant Emissions Summary**  
 State Form 51602 (R3 / 1-10)  
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

- NOTES:**
- The purpose of this form is to provide the actual and potential emissions of each criteria pollutant emitted from the source. This form is required for all air permit applications.
  - Detailed instructions for this form are available on the Air Permit Application Forms website.
  - All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

**Part A: Unit Emissions Summary**

Part A provides the actual and potential emissions of each criteria pollutant emitted from each emissions unit. If you do not provide enough information to adequately describe the emissions from each emissions unit, the application process may be stopped.

1. Unit ID	2. Stack / Vent ID	3. Criteria Pollutant	4. Actual Emissions		5. Potential To Emit	
			Standard Units	Tons Per Year	Standard Units	Tons Per Year
EP-06	EP-06	PM/PM10/PM2.5	1.50 lb/hr	0.38	1.50 lb/hr	0.38
		NOx	70.68 lb/hr	17.67	70.68 lb/hr	17.67
		CO	18.77 lb/hr	4.69	18.77 lb/hr	4.69
		SO2	0.03 lb/hr	0.00	0.03 lb/hr	0.00
		VOC	1.99 lb/hr	0.50	1.99 lb/hr	0.50

**Part B: Pollutant Emissions Summary**

Part B provides the total actual and potential emissions of each criteria pollutant emitted from the source (including all emissions units and fugitive emissions at the source). If you do not provide enough information to adequately describe the total source emissions, the application process may be stopped.

6. Criteria Pollutant	7. Actual Emissions		8. Potential To Emit	
	Standard Units	Tons Per Year	Standard Units	Tons Per Year
Carbon Monoxide (CO)	19.02 lb/hr	5.55	19.02 lb/hr	5.55
Lead (Pb)	0.00 lb/hr	0.00	0.00lb/hr	0.00
Nitrogen Oxides (NO <sub>x</sub> )	70.97 lb/hr	18.68	70.97 lb/hr	18.68
Particulate Matter (PM)	1.60 lb/hr	0.63	9.36lb/hr	34.63
Particulate Matter less than 10µm (PM <sub>10</sub> )	1.33lb/hr	0.56	9.09lb/hr	34.56
Particulate Matter less than 2.5µm (PM <sub>2.5</sub> )	1.29lb/hr	0.55	8.74lb/hr	33.18
Sulfur Dioxide (SO <sub>2</sub> )	0.04lb/hr	0.01	0.04lb/hr	0.01
Volatile Organic Compounds (VOC)	2.00lb/hr	0.55	2.00lb/hr	0.55
Other (specify):				

**Part C: Fugitive VOC Emissions (if applicable)**

Part C summarizes the sources of fugitive VOC emissions at the source and estimates VOC emissions from these emission points. Complete this table if you are required to provide fugitive emissions data pursuant to 326 IAC 2-2 or 326 IAC 2-3.

9. Fugitive Emissions Source	10. Emission Factor (lb/hr)	11. Number Leaking	12. Uncontrolled Potential To Emit	
			Pounds Per Hour	Tons Per Year
Compressor Seals				
Flanges				
Open-Ended Lines				
Pressure Relief Seals				
Pump Seals				
Sampling Connections				
Valves				
Other (specify):				



**Part B: Pollutant Emissions Summary**

Part B provides the total actual and potential emissions of each hazardous air pollutant emitted from the source (including all emissions units and fugitive emissions at the source). If you do not provide enough information to adequately describe the total source emissions, the application process may be stopped.

7. Hazardous Air Pollutant	8. CAS Number	9. Actual Emissions		10. Potential To Emit	
		Standard Units	Tons Per Year	Standard Units	Tons Per Year
Please see Emission Calculations provided in Attachment C					

**Part C: Fugitive HAP Emissions (if applicable)**

Part C summarizes the sources of fugitive HAP emissions at the source and estimates HAP emissions from these emission points. Complete this table if you are required to provide fugitive emissions data pursuant to 326 IAC 2-2 or 326 IAC 2-3.

11. Fugitive Emissions Source	12. Hazardous Air Pollutant	13. Emission Factor (lb/hr)	14. Number Leaking	15. Uncontrolled Potential To Emit	
				Pounds Per Hour	Tons Per Year
Compressor Seals					
Flanges					
Open-Ended Lines					
Pressure Relief Seals					
Pump Seals					
Sampling Connections					
Valves					
Other (specify):					



**OAQ GENERAL SOURCE DATA APPLICATION  
GSD-14: Owners and Occupants Notified**

State Form 51609 (R2 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
100 N. Senate Avenue, MC 61-53 Room 1003  
Indianapolis, IN 46204-2251  
Telephone: (317) 233-0178 or  
Toll Free: 1-800-451-6027 x30178 (within Indiana)  
Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of GSD-14 is to identify adjacent landowners and occupants that are to be notified that an air permit application has been submitted.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

**Owners And Occupants Notified**

Use this table to identify adjacent landowners and occupants that you have notified of your intent to construct pursuant to Indiana Code (IC) 13-15-8. If you need additional space, you may make copies of this form.

<b>1. Owner / Occupant Name:</b> Great Dane Trailers		<b>2. Date Notified:</b>
<b>3. Address:</b> 4955 N 13th Street		
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47805 –
<b>4. Electronic Mail:</b>	<b>5. Telephone Number:</b> ( ) -	
<b>6. Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Owner / Occupant Name:</b> Current Resident		<b>Date Notified:</b>
<b>Address:</b> 2110 E Park Avenue		
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47805 –
<b>Electronic Mail:</b>	<b>Telephone Number:</b> ( ) -	
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Owner / Occupant Name:</b> Current Resident		<b>Date Notified:</b>
<b>Address:</b> 2108 E Park Avenue		
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47805 –
<b>Electronic Mail:</b>	<b>Telephone Number:</b> ( ) -	
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Owner / Occupant Name:</b> Current Resident		<b>Date Notified:</b>
<b>Address:</b> 2104 E Park Avenue		
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47805 –
<b>Electronic Mail:</b>	<b>Telephone Number:</b> ( ) -	
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Owner / Occupant Name:</b> Current Resident		<b>Date Notified:</b>
<b>Address:</b> 2016 E Park Avenue		
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47805 –
<b>Electronic Mail:</b>	<b>Telephone Number:</b> ( ) -	
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		



**OAQ GENERAL SOURCE DATA APPLICATION  
GSD-14: Owners and Occupants Notified**

State Form 51609 (R2 / 1-10)  
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
100 N. Senate Avenue, MC 61-53 Room 1003  
Indianapolis, IN 46204-2251  
Telephone: (317) 233-0178 or  
Toll Free: 1-800-451-6027 x30178 (within Indiana)  
Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of GSD-14 is to identify adjacent landowners and occupants that are to be notified that an air permit application has been submitted.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

Owners And Occupants Notified		
Use this table to identify adjacent landowners and occupants that you have notified of your intent to construct pursuant to Indiana Code (IC) 13-15-8. If you need additional space, you may make copies of this form.		
<b>1. Owner / Occupant Name:</b> Current Resident		<b>2. Date Notified:</b>
<b>3. Address:</b> 2010 E Park Avenue		
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47805 –
<b>4. Electronic Mail:</b>	<b>5. Telephone Number:</b> ( ) -	
<b>6. Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Owner / Occupant Name:</b> Great Dane Limited Partnership		<b>Date Notified:</b>
<b>Address:</b> 222 N. LaSalle Street, Suite 920		
<b>City:</b> Chicago	<b>State:</b> IL	<b>ZIP Code:</b> 60601 –
<b>Electronic Mail:</b>	<b>Telephone Number:</b> ( ) -	
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Owner / Occupant Name:</b> Paul and Julie Mason		<b>Date Notified:</b>
<b>Address:</b> 6738 N Kylie Ln		
<b>City:</b> Monrovia	<b>State:</b> IN	<b>ZIP Code:</b> 46157 –
<b>Electronic Mail:</b>	<b>Telephone Number:</b> ( ) -	
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Owner / Occupant Name:</b> Case Equipment Corp c/o Marvin & Poer		<b>Date Notified:</b>
<b>Address:</b> P.O. Box 460369		
<b>City:</b> Houston	<b>State:</b> Tx	<b>ZIP Code:</b> 77056 –
<b>Electronic Mail:</b>	<b>Telephone Number:</b> ( ) -	
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Owner / Occupant Name:</b>		<b>Date Notified:</b>
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP Code:</b> –
<b>Electronic Mail:</b>	<b>Telephone Number:</b> ( ) -	
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		



**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-15: Government Officials Notified**  
 State Form 51608 (R3 / 1-10)  
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

- NOTES:**
- The purpose of GSD-15 is to identify local government officials that are to be notified that an air permit application has been submitted.
  - Detailed instructions for this form are available on the Air Permit Application Forms website.
  - All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for public inspection.

<b>Government Officials Notified</b>		
Use this table to identify local government officials that should be notified pursuant to Indiana Code (IC) 13-15-3-1 that an air permit application has been submitted. If you need additional space, you may make copies of this form.		
1. <b>Name:</b> Mr. Mark Clinkenbeard		2. <b>Date Notified:</b>
3. <b>Title:</b> County Commissioner		
4. <b>Address:</b> 650 S 1st Street		
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47807 –
5. <b>Electronic Mail:</b>		6. <b>Telephone Number:</b> ( ) -
7. <b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Name:</b> Mr. Todd Thacker		<b>Date Notified:</b>
<b>Title:</b> Council President, Vigo County Council		
<b>Address:</b> 127 Oak Street		
<b>City:</b> Terre Haute	<b>State:</b> IN	<b>ZIP Code:</b> 47807 –
<b>Electronic Mail:</b>		<b>Telephone Number:</b> ( ) -
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Name:</b>		<b>Date Notified:</b>
<b>Title:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP Code:</b> –
<b>Electronic Mail:</b>		<b>Telephone Number:</b> ( ) -
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
<b>Name:</b>		<b>Date Notified:</b>
<b>Title:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP Code:</b> –
<b>Electronic Mail:</b>		<b>Telephone Number:</b> ( ) -
<b>Method of Notification:</b> <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		



**PART C: Proposed Alternate Emission Factor**

Part C is intended to identify the proposed alternate emission factor (AEF) and to sufficiently describe the AEF such that IDEM staff can understand the process used to develop the AEF.

**7. Proposed AEF:** Briefly describe the proposed alternate emission factor.

-The emission factor for EP-01 and EP-02 is calculated based on the vapor pressure of the HCl. The vapor pressure is determined using the %HCl, temperature of the tank, and Table 3-4 provided in the TCEQ Guidance Package.

-A PM emission factor of 0.52 lb/ton provided by the TCEQ Guidance Package is used for EP-03.

**8. AEF Development Method:** What approach was, or will be used to develop the alternate emission factor?

Continuous Emissions Monitoring System (CEMS)

**A.** Is the CEM certified by IDEM?  Yes  No

**B.** Is the CEM operated and maintained in accordance with the applicable regulations?  Yes  No

Source Testing

**A.** Was testing conducted by a trade association or industry group?  Yes  No

Identify the trade association or industry group:

**B.** Was testing published and validated through peer review?  Yes  No

**C.** Was testing approved by IDEM?  Yes  No

Development of Material Balance Equations

Emission Modeling

Engineering Estimates

X Other – Please Specify: TCEQ Calculations Guidance Package for Hot Dip Galvanizing

**9. Supporting Data:** Have you attached the data supporting the development of your alternate emission factor?  Yes  No

**10. RM/TP Submittal:** Have you submitted the appropriate reference method or test protocol to IDEM?  Yes  No  NA

**11. Modeling Analysis:** Was any modeling conducted?  Yes  No  NA

**12. Modeling Summary:** Briefly describe any modeling that was conducted. *Attach additional information using [form GSD-05, Summary of Additional Information](#), as needed.*



# OAQ PROCESS INFORMATION APPLICATION

## PI-01: Miscellaneous Process

State Form 52534 (R2 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to obtain detailed information about the process. Complete one form for each process unit (or group of identical process units). This is a required form.
- Detailed instructions for this form are available online on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

### PART A: Process Information

Part A identifies the process. If there are multiple process units that are identical in nature, capacity, and use, you may use one form to summarize the data for the identical process units.

**1. Unit ID:** EP-01

**2. Installation Date:** 10/31/2025  
*(actual or anticipated)*

**3. How many (identical) process units are identified in this form?**  One  More than one (specify number) : 2

**4. Process Description:**  
Acid Degreaser Tanks

**5. Maximum Production Rate (specify units):** 646.00 ft2

**6. Fuel Used:**  Not Applicable  Natural Gas Only  Other – Attach completed PI-02F form.

**7. Add-On Control Technology:** Identify all control technologies used for this unit, and attach completed CE-01 (unless "none").

- |   |   |
|---|---|
| <input type="checkbox"/> None                                       | <input type="checkbox"/> Cyclone – Attach CE-03.  |
| <input type="checkbox"/> Baghouse / Fabric Filter – Attach CE-02.   | <input checked="" type="checkbox"/> Absorption / Wet Collector / Scrubber – Attach CE-05. |
| <input type="checkbox"/> Electrostatic Precipitator – Attach CE-04. | <input type="checkbox"/> Adsorber – Attach CE-07.   |
| <input type="checkbox"/> Oxidizer / Incinerator – Attach CE-06.     | <input type="checkbox"/> Reduction – Attach CE-09.  |
| <input type="checkbox"/> Condenser – Attach CE-08.                  | <input type="checkbox"/> Other (specify): – Attach CE-10.                                 |

**8. Control Techniques:** Identify all control techniques used for this process.

**9. Process Limitations / Additional Information:** Identify any acceptable process limitations. Attach additional information if necessary.

### PART B: Emission Factors

Part B identifies all emission factors used to calculate air emissions from this process.

10. Process Unit (& ID, if applicable)	11. Air Pollutant	12. Emission Factor		13. Source of Emission Factor (if not using AP-42, include calculations)
		value	units	
EP-01	HCl	0.00	lb/hr-ft2	<input type="checkbox"/> AP-42 <input checked="" type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other

### PART C: Processed Materials

Part C identifies the materials processed and the raw material usage.

14. Materials Processed	15. Raw Materials Usage Rate (lb/hr)
Steel	30000.00
Acidic Degreaser - 10% of tank mixture	

### PART D: Federal Rule Applicability

Part D identifies any federal rules that apply to the process.

**16. Is a New Source Performance Standard (NSPS) applicable to this source?**  Yes  No  
*Attach a completed FED-01 for each rule that applies.*

40 CFR Part 60, Subpart \_\_\_\_\_

**17. Is a National Emission Standard for Hazardous Air Pollutants (NESHAP) applicable to this source?**  Yes  No  
*Attach a completed FED-01 for each rule that applies.*

40 CFR Part 61, Subpart \_\_\_\_\_

40 CFR Part 63, Subpart \_\_\_\_\_

**18. Non-Applicability Determination:** *Provide an explanation if the process unit appears subject to a rule (based on the rule title or the source category), but the rule will not apply.*

The facility is not subject to 40 CFR Part 63 Subpart CCC because it is not a major source of HAPs.



# OAQ PROCESS INFORMATION APPLICATION

## PI-01: Miscellaneous Process

State Form 52534 (R2 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to obtain detailed information about the process. Complete one form for each process unit (or group of identical process units). This is a required form.
- Detailed instructions for this form are available online on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

### PART A: Process Information

Part A identifies the process. If there are multiple process units that are identical in nature, capacity, and use, you may use one form to summarize the data for the identical process units.

**1. Unit ID:** EP-02

**2. Installation Date:** 10/31/2025  
*(actual or anticipated)*

**3. How many (identical) process units are identified in this form?**  One  More than one (specify number) : 7

**4. Process Description:**

HCl Tanks

**5. Maximum Production Rate (specify units):** 2260.00 ft<sup>2</sup>

**6. Fuel Used:**  Not Applicable  Natural Gas Only  Other – Attach completed PI-02F form.

**7. Add-On Control Technology:** Identify all control technologies used for this unit, and attach completed CE-01 (unless "none").

- None
- Baghouse / Fabric Filter – Attach CE-02.
- Electrostatic Precipitator – Attach CE-04.
- Oxidizer / Incinerator – Attach CE-06.
- Condenser – Attach CE-08.
- Other (specify):
- Cyclone – Attach CE-03.
- Absorption / Wet Collector / Scrubber – Attach CE-05.
- Adsorber – Attach CE-07.
- Reduction – Attach CE-09.
- Attach CE-10.

**8. Control Techniques:** Identify all control techniques used for this process.

**9. Process Limitations / Additional Information:** Identify any acceptable process limitations. Attach additional information if necessary.

**PART B: Emission Factors**

Part B identifies all emission factors used to calculate air emissions from this process.

10. Process Unit (& ID, if applicable)	11. Air Pollutant	12. Emission Factor		13. Source of Emission Factor (if not using AP-42, include calculations)
		value	units	
EP-02	HCl	0.00	lb/hr-ft2	<input type="checkbox"/> AP-42 <input checked="" type="checkbox"/> Other
	HCl	1.05	lb/yr-ft2	<input type="checkbox"/> AP-42 <input checked="" type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other
				<input type="checkbox"/> AP-42 <input type="checkbox"/> Other

**PART C: Processed Materials**

Part C identifies the materials processed and the raw material usage.

14. Materials Processed	15. Raw Materials Usage Rate (lb/hr)
Steel	30000.00
Hydrochloric Acid - ranges from 6-18% and averages 12% in tank mixture	

**PART D: Federal Rule Applicability**

Part D identifies any federal rules that apply to the process.

16. Is a **New Source Performance Standard (NSPS)** applicable to this source?  Yes  No  
*Attach a completed FED-01 for each rule that applies.*

40 CFR Part 60, Subpart \_\_\_\_\_

17. Is a **National Emission Standard for Hazardous Air Pollutants (NESHAP)** applicable to this source?  Yes  No  
*Attach a completed FED-01 for each rule that applies.*

40 CFR Part 61, Subpart \_\_\_\_\_

40 CFR Part 63, Subpart \_\_\_\_\_

18. **Non-Applicability Determination:** Provide an explanation if the process unit appears subject to a rule (based on the rule title or the source category), but the rule will not apply.

The facility is not subject to 40 CFR Part 63 Subpart CCC because it is not a major source of HAPs.



# OAQ PROCESS INFORMATION APPLICATION

## PI-01: Miscellaneous Process

State Form 52534 (R2 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to obtain detailed information about the process. Complete one form for each process unit (or group of identical process units). This is a required form.
- Detailed instructions for this form are available online on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

### PART A: Process Information

Part A identifies the process. If there are multiple process units that are identical in nature, capacity, and use, you may use one form to summarize the data for the identical process units.

**1. Unit ID:** EP-03

**2. Installation Date:** 10/31/2025  
*(actual or anticipated)*

**3. How many (identical) process units are identified in this form?**  One  More than one (specify number) : \_\_\_\_\_

**4. Process Description:**

Zinc Kettle

**5. Maximum Production Rate (specify units):** 30000.00 lb/hr

**6. Fuel Used:**  Not Applicable  Natural Gas Only  Other – Attach completed PI-02F form.

**7. Add-On Control Technology:** Identify all control technologies used for this unit, and attach completed CE-01 (unless "none").

- None
- Baghouse / Fabric Filter – Attach CE-02.  Cyclone – Attach CE-03.
- Electrostatic Precipitator – Attach CE-04.  Absorption / Wet Collector / Scrubber – Attach CE-05.
- Oxidizer / Incinerator – Attach CE-06.  Adsorber – Attach CE-07.
- Condenser – Attach CE-08.  Reduction – Attach CE-09.
- Other (specify): \_\_\_\_\_ – Attach CE-10.

**8. Control Techniques:** Identify all control techniques used for this process.

**9. Process Limitations / Additional Information:** Identify any acceptable process limitations. Attach additional information if necessary.

**PART B: Emission Factors**

Part B identifies all emission factors used to calculate air emissions from this process.

10. Process Unit (& ID, if applicable)	11. Air Pollutant	12. Emission Factor		13. Source of Emission Factor (if not using AP-42, include calculations)	
		value	units		
EP-03	PM	0.52	lb/ton	<input type="checkbox"/> AP-42	<input checked="" type="checkbox"/> Other
	Nickel	0.20	%PM	<input type="checkbox"/> AP-42	<input checked="" type="checkbox"/> Other
				<input type="checkbox"/> AP-42	<input type="checkbox"/> Other
				<input type="checkbox"/> AP-42	<input type="checkbox"/> Other
				<input type="checkbox"/> AP-42	<input type="checkbox"/> Other
				<input type="checkbox"/> AP-42	<input type="checkbox"/> Other

**PART C: Processed Materials**

Part C identifies the materials processed and the raw material usage.

14. Materials Processed	15. Raw Materials Usage Rate (lb/hr)
Steel	30000.00
Molten Zinc	1,370,000

**PART D: Federal Rule Applicability**

Part D identifies any federal rules that apply to the process.

16. Is a **New Source Performance Standard (NSPS)** applicable to this source?  Yes  No  
 Attach a completed FED-01 for each rule that applies.

40 CFR Part 60, Subpart \_\_\_\_\_

17. Is a **National Emission Standard for Hazardous Air Pollutants (NESHAP)** applicable to this source?  Yes  No  
 Attach a completed FED-01 for each rule that applies.

40 CFR Part 61, Subpart \_\_\_\_\_

40 CFR Part 63, Subpart \_\_\_\_\_

18. **Non-Applicability Determination:** Provide an explanation if the process unit appears subject to a rule (based on the rule title or the source category), but the rule will not apply.

The facility is not subject to 40 CFR Part 63 Subpart CCC because it is not a major source of HAPs.



# OAQ PROCESS INFORMATION APPLICATION

## PI-02A: Combustion Unit Summary

State Form 52535 (R2 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to summarize all of the combustion process units.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

Form ID	Form Title	Guidance on when to submit the form
PI-02A	Combustion Unit Summary	Complete once for each application.
PI-02B	Boilers & Process Heaters	Complete once for each boiler or process heater.
PI-02C	Turbines & Internal Combustion Engines	Complete once for each turbine or internal combustion engine.
PI-02D	Incinerators & Combustors	Complete once for each incinerator or combustor.
PI-02E	Kilns	Complete once for each kiln.
PI-02F	Fuel Use	Complete once for each emissions unit that burns fuel <b>other than natural gas.</b>
PI-02G	Emission Factors	Complete once for each emissions unit.
PI-02H	Federal Rule Applicability	Complete once for each emissions unit.

### Summary of Combustion Units

This table summarizes all the combustion units at the source. If there are multiple combustion units that are identical in nature, capacity, and use, you may use one row to summarize the identical units.

1. Combustion Unit Type	2. Number of Identical Units	3. Unit ID(s)	4. Date of Installation or Modification <i>(actual or anticipated)</i>	5. Heat Input Rate of each unit <i>(MMBtu/hr)</i>	6. Emergency / Back-Up Unit?
Process Heaters	1	EP-04	10/31/2025	2.16	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Process Heater	1	EP-05	10/31/2025	0.85	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Internal Combustion Engine	2	EP-06	10/31/2025	11.04	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No





**OAQ PROCESS INFORMATION APPLICATION**  
**PI-02B: Combustion – Boilers, Process Heaters & Furnaces**

State Form 52536 (R2 / 1-10)

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to specify details that pertain only to boilers, process heaters and furnaces.
- For the purposes of this form, a process heater is any combustion unit that provides heat directly or indirectly to the process.
- Complete one PI-02B form for each emissions unit. If there are multiple emission units that are identical in nature, capacity, and use, you may use one PI-02B form to summarize the units.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

**PART A: Process Unit Details**

Part A specifies operating information that is unique to boilers, process heaters and furnaces. Definitions and additional explanation of terminology are included in the instructions for this form.

**1. Unit ID:** EP-04

**2. Type of Combustion Unit**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Boiler:                    | <input type="checkbox"/> Industrial Boiler          | <input type="checkbox"/> Commercial Boiler      |
|   | <input type="checkbox"/> Institutional Boiler       | <input type="checkbox"/> Horseshoe Boiler       |
| <input checked="" type="checkbox"/> Process Heater: | <input type="checkbox"/> Dutch Oven                 | <input checked="" type="checkbox"/> Drying Oven |
|   | <input type="checkbox"/> Fuel Cell                  | <input type="checkbox"/> Space Heater           |
| <input type="checkbox"/> Furnace:                   | <input type="checkbox"/> Crucible                   | <input type="checkbox"/> Crucible Pot           |
|   | <input type="checkbox"/> Cupola                     | <input type="checkbox"/> Electric Arc           |
|   | <input type="checkbox"/> Electric Induction         | <input type="checkbox"/> Open Hearth            |
|   | <input type="checkbox"/> Open Hearth, Oxygen Lanced | <input type="checkbox"/> Pot                    |
|   | <input type="checkbox"/> Reverberatory              | <input type="checkbox"/> Sweat                  |

**3. Combustion Process**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Cyclone Burner                    | <input type="checkbox"/> Fluidized Bed – <i>Circulating</i> | <input type="checkbox"/> Fluidized Bed – <i>Bubbling</i>      |
| <input type="checkbox"/> Overfeed Stoker / Traveling Grate | <input type="checkbox"/> Pulverized – <i>Dry Bottom</i>     | <input type="checkbox"/> Pulverized – <i>Wet Bottom</i> Other |
| <input type="checkbox"/> Spreader Stoker                   | <input type="checkbox"/> Underfeed Stoker                   | <input checked="" type="checkbox"/> (specify): <u>NG</u>      |

**4. Heat Transfer Method:**  Watertube  Firetube  Cast Iron

**5. Transfer Surface Arrangement**  
*(check all that apply):*  Horizontal  Straight  
 Vertical  Bent Tube

**6. Firing Configuration:**  Cyclone  Fluidized Bed Combustor  Front Wall  
 Horizontally Opposed  Normal  Stoker  
 Suspension  Tangential

**7. Heat Transfer Method**  
*(process heaters only):*  Direct  Indirect

**8. Fuel Used:**  Natural Gas Only  Other – *Attach completed PI-02F.*

**PART B: Emission Controls and Limitations**

Part B identifies control technology, control techniques or other process limitations that impact air emissions.

**9. Add-On Control Technology:** *Identify all control technologies used for this process. Attach completed CE-01 (unless "none").*

- None
- Baghouse / Fabric Filter – Attach CE-02.
- Cyclone – Attach CE-03.
- Electrostatic Precipitator – Attach CE-04.
- Absorption / Wet Collector / Scrubber – Attach CE-05.
- NO<sub>x</sub> Reduction – Attach CE-09.
- Other (specify): \_\_\_\_\_ – Attach CE-10.

**10. Control Techniques:** *Identify all control techniques used for this process.*

- None (explain): \_\_\_\_\_
- Ammonia Injection
- Biased Burner Firing
- Burning Oil / Water Emulsions
- Burners Out Of Service
- Duct Injection
- Flue Gas Recirculation
- Flyash Reinjection
- Furnace Injection
- Load Reduction
- Low Excess Air
- Low NO<sub>x</sub> Burners
- Overfire Air
- Reburn
- Reduced Air Preheat
- Spray Drying
- Staged Combustion
- Other (specify): \_\_\_\_\_ – Attach completed GSD-09.

**11. Process Limitations / Additional Information:** *Identify any acceptable process limitations. Attach additional information if necessary.*

**PART C: Previously Installed Boilers**

Part C identifies all boilers that were installed prior to submitting this application.

**12. Are there any Previously Installed Boilers present at this source?**

- No – Proceed to Part D.
- Yes →  Information attached.       Information is contained in operating permit:

**PART D: Furnace Details**

Part D identifies details that pertain only to furnaces. If there are no furnaces identified with this application, completion of this table is not required.

**13. Material Melted:**

**14. Maximum Melt Rate** (specify units):

**15. Flux Type:** \_\_\_\_\_  MSDS attached.

**16. Flux Amount** (specify units):

**17. Oven Throughput Material:**



**OAQ PROCESS INFORMATION APPLICATION**  
**PI-02B: Combustion – Boilers, Process Heaters & Furnaces**

State Form 52536 (R2 / 1-10)

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to specify details that pertain only to boilers, process heaters and furnaces.
- For the purposes of this form, a process heater is any combustion unit that provides heat directly or indirectly to the process.
- Complete one PI-02B form for each emissions unit. If there are multiple emission units that are identical in nature, capacity, and use, you may use one PI-02B form to summarize the units.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

**PART A: Process Unit Details**

Part A specifies operating information that is unique to boilers, process heaters and furnaces. Definitions and additional explanation of terminology are included in the instructions for this form.

**1. Unit ID:** EP-05

**2. Type of Combustion Unit**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Boiler:                    | <input type="checkbox"/> Industrial Boiler          | <input type="checkbox"/> Commercial Boiler |
|   | <input type="checkbox"/> Institutional Boiler       | <input type="checkbox"/> Horseshoe Boiler  |
| <input checked="" type="checkbox"/> Process Heater: | <input type="checkbox"/> Dutch Oven                 | <input type="checkbox"/> Drying Oven       |
|   | <input type="checkbox"/> Fuel Cell                  | <input type="checkbox"/> Space Heater      |
| <input type="checkbox"/> Furnace:                   | <input type="checkbox"/> Crucible                   | <input type="checkbox"/> Crucible Pot      |
|   | <input type="checkbox"/> Cupola                     | <input type="checkbox"/> Electric Arc      |
|   | <input type="checkbox"/> Electric Induction         | <input type="checkbox"/> Open Hearth       |
|   | <input type="checkbox"/> Open Hearth, Oxygen Lanced | <input type="checkbox"/> Pot               |
|   | <input type="checkbox"/> Reverberatory              | <input type="checkbox"/> Sweat             |

**3. Combustion Process**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Cyclone Burner                    | <input type="checkbox"/> Fluidized Bed – <i>Circulating</i> | <input type="checkbox"/> Fluidized Bed – <i>Bubbling</i>                          |
| <input type="checkbox"/> Overfeed Stoker / Traveling Grate | <input type="checkbox"/> Pulverized – <i>Dry Bottom</i>     | <input type="checkbox"/> Pulverized – <i>Wet Bottom</i>                           |
| <input type="checkbox"/> Spreader Stoker                   | <input type="checkbox"/> Underfeed Stoker                   | <input checked="" type="checkbox"/> Other ( <i>specify</i> ): <u>N/A NG-fired</u> |

**4. Heat Transfer Method:**  Watertube  Firetube  Cast Iron

**5. Transfer Surface Arrangement**  
*(check all that apply):*  Horizontal  Straight  
 Vertical  Bent Tube

**6. Firing Configuration:**  Cyclone  Fluidized Bed Combustor  Front Wall  
 Horizontally Opposed  Normal  Stoker  
 Suspension  Tangential

**7. Heat Transfer Method**  
*(process heaters only):*  Direct  Indirect

**8. Fuel Used:**  Natural Gas Only  Other – *Attach completed PI-02F.*

### PART B: Emission Controls and Limitations

Part B identifies control technology, control techniques or other process limitations that impact air emissions.

**9. Add-On Control Technology:** *Identify all control technologies used for this process. Attach completed CE-01 (unless "none").*

- None
- Baghouse / Fabric Filter – Attach CE-02.
- Electrostatic Precipitator – Attach CE-04.
- NO<sub>x</sub> Reduction – Attach CE-09.
- Cyclone – Attach CE-03.
- Absorption / Wet Collector / Scrubber – Attach CE-05.
- Other (specify): \_\_\_\_\_ – Attach CE-10.

**10. Control Techniques:** *Identify all control techniques used for this process.*

- None (explain): \_\_\_\_\_
  - Ammonia Injection
  - Burners Out Of Service
  - Flyash Reinjection
  - Low Excess Air
  - Reburn
  - Staged Combustion
  - Biased Burner Firing
  - Duct Injection
  - Furnace Injection
  - Low NO<sub>x</sub> Burners
  - Reduced Air Preheat
  - Other (specify): \_\_\_\_\_
  - Burning Oil / Water Emulsions
  - Flue Gas Recirculation
  - Load Reduction
  - Overfire Air
  - Spray Drying
- Attach completed GSD-09.

**11. Process Limitations / Additional Information:** *Identify any acceptable process limitations. Attach additional information if necessary.*

### PART C: Previously Installed Boilers

Part C identifies all boilers that were installed prior to submitting this application.

**12. Are there any Previously Installed Boilers present at this source?**

- No – Proceed to Part D.
- Yes →  Information attached.  Information is contained in operating permit:

### PART D: Furnace Details

Part D identifies details that pertain only to furnaces. If there are no furnaces identified with this application, completion of this table is not required.

**13. Material Melted:**

**14. Maximum Melt Rate** (specify units):

**15. Flux Type:**

MSDS attached.

**16. Flux Amount** (specify units):

**17. Oven Throughput Material:**



**OAQ PROCESS INFORMATION APPLICATION**  
**PI-02C: Combustion – Turbines & Reciprocating**  
**Internal Combustion Engines**

State Form 52537 (R2 / 1-10)

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to specify details that pertain only to turbines and internal combustion engines.
- Complete one PI-02C form for each emissions unit. If there are multiple emission units that are identical in nature, capacity, and use, you may use one PI-02C form to summarize the units.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

**PART A: Process Unit Details**

Part A specifies operating information that is unique to turbines and reciprocating internal combustion engines. Definitions and additional explanation of terminology are included in the instructions for this form.

**1. Unit ID:** EP-06

**2. Type of Combustion Unit**

- |   |  |
|---|--|
| <input type="checkbox"/> Turbine:   | <input type="checkbox"/> Simple Cycle<br><input type="checkbox"/> Regenerative Cycle<br><input type="checkbox"/> Cogeneration<br><input type="checkbox"/> Combined Cycle |
| <input checked="" type="checkbox"/> Reciprocating Internal Combustion Engine: | <input type="checkbox"/> 2-stroke lean-burn<br><input type="checkbox"/> 4-stroke lean-burn      Unknown at this time<br><input type="checkbox"/> 4-stroke rich-burn      |

**3. Combustion Process:**  Diffusion Flame Combustion      Unknown at this time  
 Lean-Premix Staged Combustion

**4. Ignition Type:**  Spark  
 Compression

**5. Power Output:** 1578.00 horsepower (hp)  
 megawatts (MW)

**6. Duty Cycle:** 500 hours per year (hr/yr)

**7. Fuel Used:**  Natural Gas Only  
 Other – Attach completed PI-02F.

**8. Does this combustion unit supply power to an emergency generator?**       Yes       No

This space was intentionally left blank.

### PART B: Emission Controls and Limitations

Part B identifies control technology, control techniques or other process limitations that impact air emissions.

**9. Add-On Control Technology:** *Identify all control technologies used for this process. Attach completed CE-01 (unless "none").*

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> None                    |   |
| <input type="checkbox"/> Catalytic Oxidation – Attach CE-06 | <input type="checkbox"/> NO <sub>x</sub> Reduction – Attach CE-09 |
| <input type="checkbox"/> Other (specify):                   | – Attach CE-10.   |

**10. Control Techniques:** *Identify all control techniques used for this process.*

- |  |   |
|--|---|
| <input type="checkbox"/> None (explain):                       |   |
| <input type="checkbox"/> Air-To-Fuel Ratio Adjustments         | <input type="checkbox"/> Aromatic Content Increase          |
| <input type="checkbox"/> Boiling Point adjusted to 10% and 90% | <input type="checkbox"/> Cetane Number                      |
| <input type="checkbox"/> Charge Cooling                        | <input type="checkbox"/> Combustion Chamber Modifications   |
| <input type="checkbox"/> Derating                              | <input type="checkbox"/> Electronic Timing & Metering       |
| <input type="checkbox"/> Exhaust Gas Recirculation             | <input type="checkbox"/> Fuel Additives                     |
| <input type="checkbox"/> Fuel Injection Pressure               | <input type="checkbox"/> Injection Rate Control             |
| <input type="checkbox"/> Injection Timing Retard               | <input type="checkbox"/> Injector Nozzle Geometry           |
| <input type="checkbox"/> Lean Combustion                       | <input checked="" type="checkbox"/> Low Sulfur Content Fuel |
| <input type="checkbox"/> Oil Consumption Control               | <input type="checkbox"/> Pre-ignition Chamber Combustion    |
| <input type="checkbox"/> Rapid Spill Nozzles                   | <input type="checkbox"/> Turbocharging                      |
| <input type="checkbox"/> Two Stage Lean / Lean Combustion      | <input type="checkbox"/> Two Stage Rich / Lean Combustion   |
| <input type="checkbox"/> Water/Fuel Emulsions                  | <input type="checkbox"/> Water / Steam Injection            |
| <input type="checkbox"/> Other (specify):                      | – Attach completed GSD-09.                                  |

**11. Process Limitations / Additional Information:** *Identify any acceptable process limitations. Attach additional information if necessary.*

The facility is still in the process of selecting the 1,000 kw emergency generators. The horsepower listed is an estimate.



**OAQ PROCESS INFORMATION APPLICATION**

**PI-02F: Combustion – Fuel Use**

State Form 52540 (R2 / 1-10)

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to identify each fuel that will be used in the combustion unit. Definitions and additional explanation of terminology are included in the instructions for this form.
- Complete one form PI-02F for each combustion unit. If the unit has any capability of using a fuel, even if on a backup or intermittent basis, complete the applicable section. Using a fuel that is not specified in the permit is a violation of the permit.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

**PART A: Process Unit Identification**

**1. Unit ID:** EP-06

**PART B: Gaseous Fuels**

Part B identifies the gaseous fuels that will be used in the combustion unit.

2. Fuel Type:	3. Percent of Fuel Use <i>(by volume)</i>	4. Primary or Secondary Fuel?	5. Component Percentages:	6. Heating Value:
<input type="checkbox"/> Natural Gas		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur:	<i>(Btu/ft<sup>3</sup>)</i>
<input type="checkbox"/> Liquefied Petroleum Gas <input type="checkbox"/> <i>Commercial- Propane</i> <input type="checkbox"/> <i>Engine Fuel Propane (HD-5)</i> <input type="checkbox"/> <i>Commercial- Butane</i>		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Butane: Propane:	<i>(Btu/ft<sup>3</sup>)</i>
<input type="checkbox"/> Process Gas *		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur:	<i>(Btu/ft<sup>3</sup>)</i>
<input type="checkbox"/> Landfill Gas *		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur:	<i>(Btu/ft<sup>3</sup>)</i>
<input type="checkbox"/> Other <i>(specify):</i>		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	: :	<i>(Btu/ft<sup>3</sup>)</i>

\* Indicate the source of the process or landfill gas:

**PART C: Liquid Fuels**

Part C identifies the liquid fuels that will be used in the combustion unit.

7. Fuel Type:	8. Percent of Fuel Use <i>(by volume)</i>	9. Primary or Secondary Fuel?	10. Component Percentages:	11. Heating Value:	12. Percent Heat:
<input type="checkbox"/> Residual Fuel Oil <input type="checkbox"/> No. 5 – Heavy <input type="checkbox"/> No. 5 – Light <input type="checkbox"/> No. 6 (Bunker C)		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur:	<i>(Btu/gal)</i>	
<input checked="" type="checkbox"/> Distillate Fuel Oil <input type="checkbox"/> No. 1 <input checked="" type="checkbox"/> No. 2 (Diesel) <input type="checkbox"/> No. 4	100.00%	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: 15 ppm	140000.00 <i>(Btu/gal)</i>	100.00%
<input type="checkbox"/> Gasoline		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur:	<i>(Btu/gal)</i>	
<input type="checkbox"/> Waste Oil		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Ash: Lead Chlorine:	<i>(Btu/gal)</i>	
<input type="checkbox"/> Liquid Waste *		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Fluorine: Chlorine:	<i>(Btu/gal)</i>	
<input type="checkbox"/> Other <i>(specify)</i> :		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	: :	<i>(Btu/gal)</i>	

\* RCRA alpha-numeric codes for Special or Hazardous Waste to be Burned:

This space was intentionally left blank.

**PART D1: Solid Fuels – Coal**

Part D1 identifies all variations of coal that will be used in the combustion unit.

13. Fuel Type:	14. Percent of Fuel Use <i>(by volume)</i>	15. Primary or Secondary Fuel?	16. Component Percentages:	17. Heating Value:	18. Basis:
<input type="checkbox"/> Anthracite Coal <input type="checkbox"/> <i>Anthracite</i> <input type="checkbox"/> <i>Culm</i>		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Ash: Moisture:	<i>(Btu/lb)</i>	<input type="checkbox"/> Dry <input type="checkbox"/> Moist
<input type="checkbox"/> Bituminous Coal		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Ash: Moisture:	<i>(Btu/lb)</i>	<input type="checkbox"/> Dry <input type="checkbox"/> Moist
<input type="checkbox"/> Sub-bituminous Coal		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Ash: Moisture:	<i>(Btu/lb)</i>	<input type="checkbox"/> Dry <input type="checkbox"/> Moist
<input type="checkbox"/> Lignite Coal		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Ash: Moisture:	<i>(Btu/lb)</i>	<input type="checkbox"/> Dry <input type="checkbox"/> Moist
<input type="checkbox"/> Coke		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Ash: Moisture:	<i>(Btu/lb)</i>	<input type="checkbox"/> Dry <input type="checkbox"/> Moist
<input type="checkbox"/> Other Coal <i>(specify)</i> :		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Ash: Moisture:	<i>(Btu/gal)</i>	<input type="checkbox"/> Dry <input type="checkbox"/> Moist

This space was intentionally left blank.

**PART D2: Other Solid Fuels**

Part D2 identifies the solid fuels, other than coal, that will be used in the combustion unit.

19. Fuel Type:	20. Percent of Fuel Use <i>(by volume)</i>	21. Primary or Secondary Fuel?	22. Component Percentages:	23. Heating Value:	24. Percent Heat:
<input type="checkbox"/> Wood or Wood Waste <input type="checkbox"/> <i>Wood Only</i> <input type="checkbox"/> <i>Wood Residue Only</i> <input type="checkbox"/> <i>Wood and Wood Residue</i>		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Moisture:	<i>(Btu/ton)</i>	
<input type="checkbox"/> Tires or Tire Derived Fuel <input type="checkbox"/> <i>Whole Tires</i> <input type="checkbox"/> <i>Tire Derived Fuel</i>		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Sulfur: Chromium: Chlorine:	<i>(Btu/lb)</i>	
<input type="checkbox"/> Bagasse		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	Ash: Moisture:	<i>(Btu/lb)</i>	
<input type="checkbox"/> Solid Waste *		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	:	<i>(Btu/lb)</i>	
<input type="checkbox"/> Other <i>(specify)</i> :		<input type="checkbox"/> Primary <input type="checkbox"/> Secondary	:	<i>(Btu/lb)</i>	

\*RCRA alpha-numeric codes for Special or Hazardous Waste to be Burned:

**PART E: Fuel Consumption Limitations**

Use the space provided to specify any fuel consumption limitations that are acceptable for the combustion unit.



**OAQ PROCESS INFORMATION APPLICATION**  
**PI-02G: Combustion – Emission Factors**  
 State Form 52541 (R2 / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to specify the emission factors used to calculate potential to emit from the combustion unit.
- Complete one PI-02G form for each emissions unit. If there are multiple emission units that are identical in nature, capacity, and use, you may use one PI-02G form to summarize the units.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

**Emission Factors**

This table identifies all emission factors used to calculate air emissions from the combustion unit.

1. Unit ID: EP-04					
2. Air Pollutant:	3. Emission Factor		4. Source of Emission Factor <i>(if not using AP-42, include calculations)</i>		
	value	units			
Carbon Monoxide (CO)	84.00	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Lead (Pb)	0.00	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Hazardous Air Pollutant (HAP) <i>(specify):</i> See Attached Emission Calculations		lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Nitrogen Oxides (NO <sub>x</sub> )	100.00	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Mercury (Hg)	0.00	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter (PM)	7.60	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter less than 10µm (PM <sub>10</sub> )	7.60	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter less than 2.5µm (PM <sub>2.5</sub> )	7.60	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Sulfur Dioxide (SO <sub>2</sub> )	0.60	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Volatile Organic Compounds (VOC)	5.50	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A

This space was intentionally left blank.



**OAQ PROCESS INFORMATION APPLICATION**  
**PI-02G: Combustion – Emission Factors**  
 State Form 52541 (R2 / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to specify the emission factors used to calculate potential to emit from the combustion unit.
- Complete one PI-02G form for each emissions unit. If there are multiple emission units that are identical in nature, capacity, and use, you may use one PI-02G form to summarize the units.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

**Emission Factors**

This table identifies all emission factors used to calculate air emissions from the combustion unit.

1. Unit ID: EP-05					
2. Air Pollutant:	3. Emission Factor		4. Source of Emission Factor <i>(if not using AP-42, include calculations)</i>		
	value	units			
Carbon Monoxide (CO)	84.00	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Lead (Pb)	0.00	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Hazardous Air Pollutant (HAP) <i>(specify):</i> See Attached Emission Calculations		lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Nitrogen Oxides (NO <sub>x</sub> )	100.00	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Mercury (Hg)	0.00	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter (PM)	7.60	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter less than 10µm (PM <sub>10</sub> )	7.60	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter less than 2.5µm (PM <sub>2.5</sub> )	7.60	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Sulfur Dioxide (SO <sub>2</sub> )	0.60	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Volatile Organic Compounds (VOC)	5.50	lb/mmescf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A

This space was intentionally left blank.



**OAQ PROCESS INFORMATION APPLICATION**  
**PI-02G: Combustion – Emission Factors**  
 State Form 52541 (R2 / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of this form is to specify the emission factors used to calculate potential to emit from the combustion unit.
- Complete one PI-02G form for each emissions unit. If there are multiple emission units that are identical in nature, capacity, and use, you may use one PI-02G form to summarize the units.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

**Emission Factors**

This table identifies all emission factors used to calculate air emissions from the combustion unit.

<b>1. Unit ID:</b> EP-06					
<b>2. Air Pollutant:</b>	<b>3. Emission Factor</b>		<b>4. Source of Emission Factor</b> <i>(if not using AP-42, include calculations)</i>		
	<i>value</i>	<i>units</i>			
Carbon Monoxide (CO)	0.85	lb/MMBtu	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Lead (Pb)			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> N/A
Hazardous Air Pollutant (HAP) <i>(specify):</i> See Attached Emission Calculations		lb/mmBtu	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Nitrogen Oxides (NO <sub>x</sub> )	3.20	lb/MMBtu	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Mercury (Hg)			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter (PM)	0.07	lb/MMBtu	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter less than 10µm (PM <sub>10</sub> )	0.06	lb/MMBtu	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter less than 2.5µm (PM <sub>2.5</sub> )	0.06	lb/MMBtu	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Sulfur Dioxide (SO <sub>2</sub> )	0.00	lb/MMBtu	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Volatile Organic Compounds (VOC)	0.09	lb/MMBtu	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A

This space was intentionally left blank.



**OAQ PROCESS INFORMATION APPLICATION**  
**PI-02H: Combustion – Federal Rule Applicability**  
 State Form 52542 (R2 / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
 www.IN.gov/idem

NOTES:

- The purpose of this form is to identify any federal rules that apply to the emission unit.
- Complete one PI-02H form for each emissions unit. If there are multiple emission units that are identical in nature, capacity, and use, you may use one PI-02H form to summarize the units.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for anyone to inspect and photocopy.

Federal Rule Applicability		
This table identifies any federal rules that apply to the process.		
1. Is a <b>New Source Performance Standard (NSPS)</b> applicable to this source? <i>If yes, attach a completed FED-01 for each rule that applies.</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2. Unit IDs
<input type="checkbox"/> 40 CFR Part 60, Subpart Cb	Large Municipal Waste Combustors ( <i>constructed before 9/20/1994</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart Ce	Hospital/Medical/Infectious Waste Incinerators	
<input type="checkbox"/> 40 CFR Part 60, Subpart D	Fossil-Fuel-Fired Steam Generators ( <i>constructed after 8/17/1971</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart Da	Electric Utility Steam Generating Units ( <i>constructed after 9/18/1978</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart Db	Industrial-Commercial-Institutional Generating Units	
<input type="checkbox"/> 40 CFR Part 60, Subpart Dc	Small Industrial-Commercial-Institutional Generating Units	
<input type="checkbox"/> 40 CFR Part 60, Subpart E	Incinerators	
<input type="checkbox"/> 40 CFR Part 60, Subpart Ea	Municipal Waste Combustors ( <i>constructed after 12/20/1989 and before 9/20/1994</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart Eb	Large Municipal Waste Combustors ( <i>constructed after 9/20/1994 or modified / reconstructed after 6/19/1996</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart Ec	Hospital/Medical/Infectious Waste Incinerators ( <i>constructed after 6/20/1996</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart O	Sewage Treatment Plants ( <i>sludge burners</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart Y	Coal Preparation Plants	
<input type="checkbox"/> 40 CFR Part 60, Subpart GG	Stationary Gas Turbines	
<input type="checkbox"/> 40 CFR Part 60, Subpart AAA	New Residential Wood Heaters	
<input type="checkbox"/> 40 CFR Part 60, Subpart AAAA	Small Municipal Waste Combustion Units ( <i>constructed after 8/30/1999 or modified / reconstructed after 6/6/2001</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart BBBB	Small Municipal Waste Combustion Units ( <i>constructed on or before 8/30/1999</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart CCCC	Commercial and Industrial Solid Waste Incineration Units ( <i>constructed after 11/30/1999 or modified / reconstructed after 6/1/2001</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart DDDD	Commercial and Industrial Solid Waste Incineration Units ( <i>constructed on or before 11/30/1999</i> )	
<input type="checkbox"/> 40 CFR Part 60, Subpart KKKK	Stationary Combustion Turbines	

**Federal Rule Applicability (continued)**

This table identifies any federal rules that apply to the process.

3. Is a <b>National Emission Standard for Hazardous Air Pollutants (NESHAP)</b> applicable to this source? <i>If yes, attach a completed FED-01 for each rule that applies.</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	4. <b>Unit IDs</b>
<input type="checkbox"/> 40 CFR Part 63, Subpart MM	Combustion Sources at Kraft, Soda, and Sulfite Pulp & Paper Mills	
<input type="checkbox"/> 40 CFR Part 63, Subpart EEE	Hazardous Waste Combustion	
<input type="checkbox"/> 40 CFR Part 63, Subpart YYYY	Stationary Combustion Turbines	
<input checked="" type="checkbox"/> 40 CFR Part 63, Subpart ZZZZ	Reciprocating Internal Combustion Engines (RICE)	EP-06
<input type="checkbox"/> 40 CFR Part 63, Subpart DDDDD	Industrial, Commercial, and Institutional Boilers and Process Heaters	

**5. Non-Applicability Determination:** *Provide an explanation if the process unit appears subject to a rule (based on the rule title or the source category), but the rule will not apply.*

The facility is not subject to 40 CFR Part 63, Subpart DDDDD because it is not a major source of HAPs.

This space was intentionally left blank.





**OAQ CONTROL EQUIPMENT APPLICATION**  
**CE-02: Particulate Control – Baghouse / Fabric Filter**  
 State Form 51953 (R2 / 1-10)  
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

- NOTES:
- The purpose of CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
  - Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
  - Detailed instructions for this form are available on the Air Permit Application Forms website.
  - All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for any one to inspect and photocopy.

**PART A: Identification and Description of Control Equipment**

Part A identifies the particulate control device and describes its physical properties.

1. Control Equipment ID:	CD-02
2. Installation Date:	10/31/2025
3. Bags or Cartridges?	<input checked="" type="checkbox"/> Bags <input type="checkbox"/> Cartridges
4. Filter Material:	Polypropylene
5. Number of Bags/Cartridges per Compartment:	168
6. Number of Compartments:	8
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	3.00 per high pressure setpoint
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	2.5 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**PART B: Operational Parameters**

Part B provides the operational parameters of the control device and the pollutant laden gas stream. Appropriate units must be included if the standard units are not used. For each applicable parameter, provide the inlet and outlet values or provide the differential value.

	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM	49440.00	49440.00	
16. Gas Stream Temperature	°F	140.00	100.00	
17. Gas Stream Pressure	inches of water			0.00 to 6.00
18. Moisture Content	%	3.00%	3.00%	
19. Particle Size Range	micrometers	2-10.00	Unknown	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

**PART C: Pollutant Concentrations**

Part C provides the pollutant concentrations of the pollutant laden gas stream.

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input checked="" type="checkbox"/> b. Hazardous Air Pollutant (HAP) ( <i>specify</i> ): Nickel as PM	lb/hr	0.02	0.00	100.00%	99.50%
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	lb/hr	7.80	0.04	100.00%	99.50%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM <sub>10</sub> )	lb/hr	7.80	0.04	100.00%	99.50%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM <sub>2.5</sub> )	lb/hr	7.49	0.04	100.00%	99.50%
<input type="checkbox"/> f. Other Pollutant ( <i>specify</i> ):					

**PART D: Monitoring, Record Keeping, & Testing Procedures**

Part D identifies any existing or proposed monitoring, record keeping, & testing procedures that may need to be included in the permit.

27. Item(s) Monitored:				
28. Monitoring Frequency:				
29. Item(s) Recorded:				
30. Record Keeping Frequency:				
31. Pollutant(s) Tested:				
32. Test Method(s):				
33. Testing Frequency:				

**PART E: Preventive Maintenance Plan**

Part E verifies that a complete Preventive Maintenance Plan (PMP) has been prepared for the control device, if applicable. Use this table as a checklist to ensure that the PMP is complete.

**34. Do you have a Preventive Maintenance Plan (PMP)?**

No PMP is needed.     Yes – the following items are identified on the PMP:

- A. Identification of the individual(s) responsible for inspecting, maintaining and repairing emission control devices.
- B. Description of the items or conditions that will be inspected.
- C. Schedule for inspection of items or conditions described above.
- D. Identification and quantification of the replacement parts that will be maintained in inventory for quick replacement.

**PART F: Determination of Integral Control**

Part F provides explanation to determine whether the control device should be considered integral to the process.

**35. Has IDEM already made an integral control determination for this device?**

*If "Yes", provide the following:*

No     Yes

Permit Number:

Issuance Date:

Determination:

Integral     Not Integral

**36. Is this device integral to the process?**

*If "Yes", provide the reason(s) why the device is integral.*

No     Yes



**OAQ CONTROL EQUIPMENT APPLICATION**  
**CE-05: Particulate Control – Wet Collector /**  
**Scrubber / Absorption**  
 State Form 52622 (R / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
 www.IN.gov/idem

NOTES:

- The purpose of CE-05 is to identify all the parameters that describe the wet collector, scrubber, or absorption unit. This is a required form.
- Complete this form once for each wet collector, scrubber, or absorption unit (or once for each set of identical units).
- Detailed instructions for this form are available online on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment			
Part A identifies the particulate control device and describes its physical properties.			
<b>1. Control Equipment ID:</b>	CD-01		
<b>2. Installation Date:</b>	10/31/25		
<b>3. Device Used:</b>	<input type="checkbox"/> Wet Collector	<input checked="" type="checkbox"/> Scrubber	<input type="checkbox"/> Absorption
<b>4. Scrubber Type:</b>	<input type="checkbox"/> Packed Bed <input type="checkbox"/> Fiber Bed <input type="checkbox"/> Ionizing <input type="checkbox"/> Spray Dryer	<input checked="" type="checkbox"/> Spray Tower <input type="checkbox"/> Tray Tower <input type="checkbox"/> Bubble Cap <input type="checkbox"/> Impingement <input type="checkbox"/> Sieve <input type="checkbox"/> Valve	<input type="checkbox"/> Venturi <input type="checkbox"/> Fixed Throat <input type="checkbox"/> Variable Throat <input type="checkbox"/> Other (specify): <input type="checkbox"/> Not Applicable
<b>5. Operational Design:</b>	<input checked="" type="checkbox"/> Cross Current	<input type="checkbox"/> Counter Current	<input type="checkbox"/> Co-Current <input type="checkbox"/> Other (specify):
<b>6. Nozzle Design:</b>	<input type="checkbox"/> Pneumatic	<input type="checkbox"/> Rotary	<input checked="" type="checkbox"/> Atomizing <input type="checkbox"/> Other (specify):
<b>7. Number of Scrubber Modules:</b>	2	<input type="checkbox"/> Not Applicable	
<b>8. Packing Media:</b>	<input checked="" type="checkbox"/> Not Applicable		
<b>9. Media Surface Area (specify units):</b>	<input checked="" type="checkbox"/> Not Applicable		
<b>10. Fiber Density (specify units):</b>	<input checked="" type="checkbox"/> Not Applicable		
<b>11. Scrubbing Liquid:</b>	Water	Average pH: 0.1	Solubility: 3% HCL <input type="checkbox"/> Not Applicable
<b>12. Liquid to Air Ratio (Ex: 1.3 : 1.0):</b>	15.0 : 1.0		
<b>13. Mist Elimination / Entrainment Separation: Specify number of chevrons, mesh pads, or cyclones, if applicable.</b>			
	<input checked="" type="checkbox"/> Chevron: 1	<input type="checkbox"/> Mesh Pad: _____	<input checked="" type="checkbox"/> Cyclone: 1 <input type="checkbox"/> Not Applicable
<b>14. Is the device Electrostatically Enhanced?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable		
<b>15. Does the device use Condensation Growth?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		
<b>16. Is a Demister used with this device?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>17. Is a Settling Pond used with this device? If yes, describe the settling pond below.</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**PART B: Operational Parameters**

Part B provides the operational parameters of the control device and the pollutant laden gas stream. Appropriate units must be included if the standard units are not used.

	A. Units	B. Inlet	C. Outlet	D. Differential
<b>18. Scrubbing Liquid Flow Rate</b> (Use 0.00 if not applicable.)	GPM	660.43	Unknown	
<b>19. Recirculation Liquid Flow Rate</b> (Use 0.00 if not applicable.)	GPM	3%HCl	Unknown	
<b>20. Gas Stream Flow Rate</b>	ACFM	41199.00	41199.00	
<b>21. Gas Stream Temperature</b>	°F	<100.00	<100.00	
<b>22. Gas Stream Pressure</b>	inches of water			0.00 to 8.00
<b>23. Moisture Content</b>	%	55.00%	Unknown	
<b>24. Average Particle Size</b>	micrometers	10.00 - 25.00	Unknown	to
<b>25. Other</b> (specify):				

**PART C: Pollutant Concentrations**

Part C provides the pollutant concentrations of the pollutant laden gas stream.

	26. Units	27. Inlet	28. Outlet	29. Efficiency (%):	
				Capture	Control
<input checked="" type="checkbox"/> <b>a. Hazardous Air Pollutant (HAP)</b> (specify): HCl	lb/hr	2.77	0.28	100.00%	90.00%
<input type="checkbox"/> <b>b. Particulate Matter (PM)</b>					
<input type="checkbox"/> <b>c. Particulate Matter less than 10µm (PM<sub>10</sub>)</b>					
<input type="checkbox"/> <b>d. Particulate Matter less than 2.5µm (PM<sub>2.5</sub>)</b>					
<input type="checkbox"/> <b>e. Volatile Organic Compounds (VOC)</b>					
<input type="checkbox"/> <b>f. Other Pollutant</b> (specify):					

**PART D: Monitoring, Record Keeping, & Testing Procedures**

Part D identifies any existing or proposed monitoring, record keeping, & testing procedures that may need to be included in the permit.

<b>30. Item(s) Monitored:</b>				
<b>31. Monitoring Frequency:</b>				
<b>32. Item(s) Recorded:</b>				
<b>33. Record Keeping Frequency:</b>				
<b>34. Pollutant(s) Tested:</b>				
<b>35. Test Method(s):</b>				
<b>36. Testing Frequency:</b>				

**PART E: Preventive Maintenance Plan**

Part E verifies that a complete Preventive Maintenance Plan (PMP) has been prepared for the control device, if applicable. Use this table as a checklist to ensure that the PMP is complete.

**37. Do you have a Preventive Maintenance Plan (PMP)?**

No PMP is needed.       Yes – the following items are identified on the PMP:

**A.** Identification of the individual(s) responsible for inspecting, maintaining and repairing emission control devices.

**B.** Description of the items or conditions that will be inspected.

**C.** Schedule for inspection of items or conditions described above.

**D.** Identification and quantification of the replacement parts that will be maintained in inventory for quick replacement.



**Part C: Performance Testing Requirements**

Part C identifies the performance testing requirements that are applicable to the process or emission unit.

6. Performance Testing: NA

7. Date of Initial Performance Test:

8. Test Methods:

9. Was the initial performance test approved by IDEM?  Yes: Date approved: \_\_\_\_\_  No

10. Did the initial performance test show compliance with the rule?  Yes  No: Date of next performance test: \_\_\_\_\_

**Part D: Important Dates**

Part D identifies specific dates associated with the federal standard that are applicable to the process or emission unit.

11. Date Initial Notification was Submitted: NA

12. Initial Compliance Date:  Startup: \_\_\_\_\_  Other: \_\_\_\_\_

13. Other Dates  
Description: \_\_\_\_\_ Date: \_\_\_\_\_  
Description: \_\_\_\_\_ Date: \_\_\_\_\_  
Description: \_\_\_\_\_ Date: \_\_\_\_\_

**Part E: Other Information**

Part E identifies any additional information pertaining to the applicable federal rule. Attach additional information using form GSD-09 as necessary.

Empty box for additional information.



**Part C: Performance Testing Requirements**

Part C identifies the performance testing requirements that are applicable to the process or emission unit.

6. Performance Testing: NA

7. Date of Initial Performance Test:

8. Test Methods:

9. Was the initial performance test approved by IDEM?  Yes: Date approved: \_\_\_\_\_  No

10. Did the initial performance test show compliance with the rule?  Yes  No: Date of next performance test: \_\_\_\_\_

**Part D: Important Dates**

Part D identifies specific dates associated with the federal standard that are applicable to the process or emission unit.

11. Date Initial Notification was Submitted: NA

12. Initial Compliance Date:  Startup: \_\_\_\_\_  Other: \_\_\_\_\_

13. Other Dates  
Description: \_\_\_\_\_ Date: \_\_\_\_\_  
Description: \_\_\_\_\_ Date: \_\_\_\_\_  
Description: \_\_\_\_\_ Date: \_\_\_\_\_

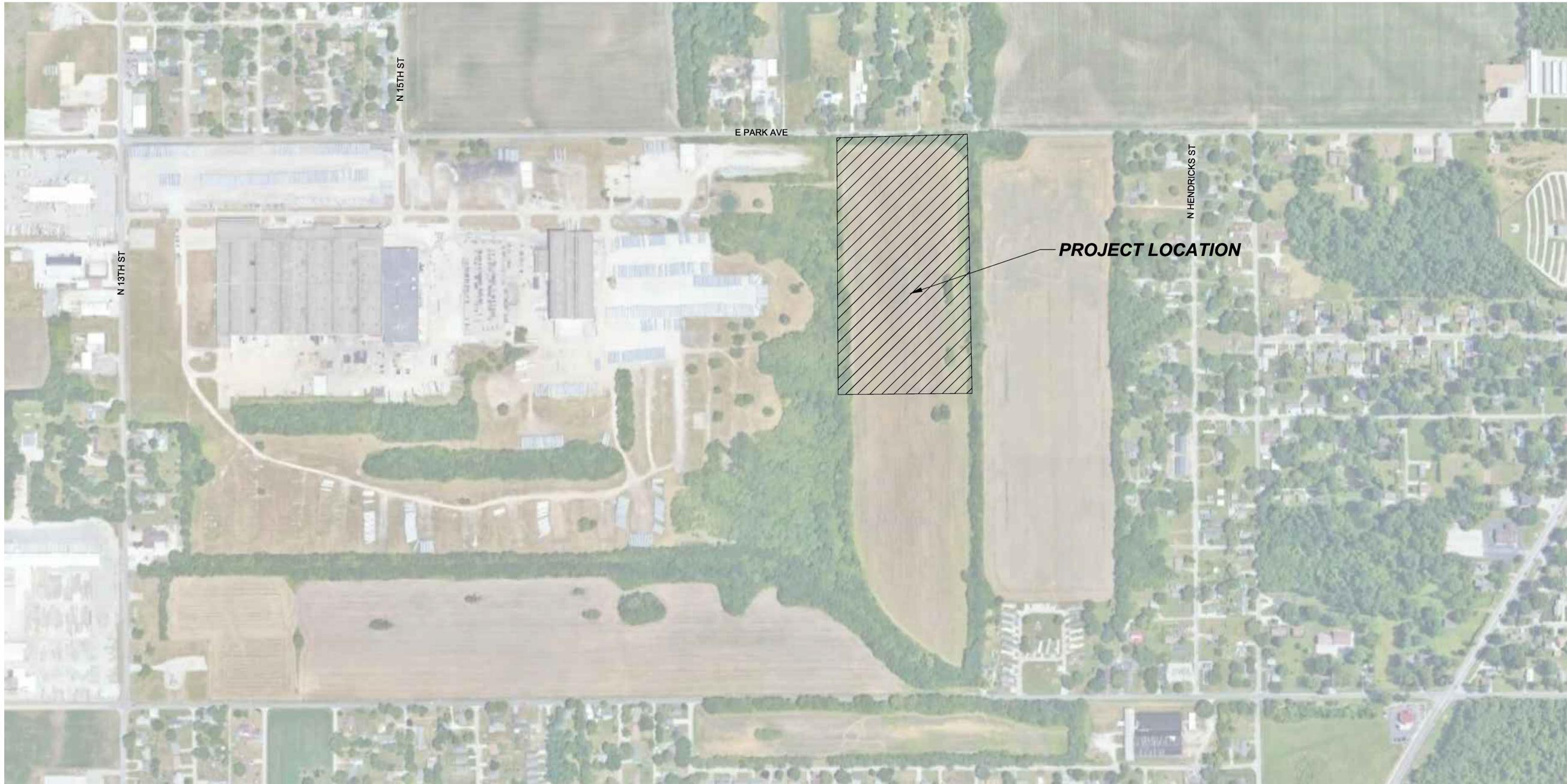
**Part E: Other Information**

Part E identifies any additional information pertaining to the applicable federal rule. Attach additional information using form GSD-09 as necessary.

Empty box for additional information.

## Attachment B

### Site Figures and Process Flow Diagram



**HARWOOD**

civil · landscape architecture  
structural · mechanical · electrical  
plumbing / fire protection · security  
lighting design · telecommunications

255 North 21st Street,  
Milwaukee, Wisconsin 53233  
414.475.5554 · hecl.com

Project Name:  
**ZINKPOWER  
INDIANA**

Client:



2109 E Park Ave  
Terre Haute, IN 47805

Issuance:

**LEGEND:**

UTILITY	GRADING	SITE
<b>EXISTING:</b> WATERMAIN BURIED ELECTRIC OVERHEAD WIRE GAS LINE SANITARY SEWER STORM SEWER <b>PROPOSED:</b> UTILITY POLE LIGHT POLE SANITARY MANHOLE FIRE HYDRANT WATER VALVE STORM SEWER STRUCTURE WATERMAIN ELECTRICAL LINE GAS LINE SANITARY SEWER STORM SEWER WATER VALVE STORM SEWER STRUCTURE FLARED END SECTION	<b>EXISTING:</b> MAJOR CONTOUR MINOR CONTOUR EXISTING SPOT ELEVATION <b>PROPOSED:</b> MAJOR CONTOUR MINOR CONTOUR SPOT ELEVATION (FINISHED GRADE, TOP OF PAVEMENT, FLANGE OF CURB) DOOR ELEVATION GROUND GRADE AT BUILDING SPOT ELEVATION (TIC - TOP OF CURB, SEP - EDGE OF PAVEMENT) RETAINING WALL SPOT ELEVATION (T/W - GROUND GRADE AT TOP OF WALL, B/W - GROUND GRADE AT BOTTOM) FLARED END SECTION (PIPE SIZE, INVERT ELEVATION) DRAINAGE FLOW DIRECTION EMERGENCY OVERFLOW ROUTE	<b>EXISTING:</b> EXISTING PARKING COUNT EXISTING SIGN EXISTING ADA PARKING SPACE <b>PROPOSED:</b> PARKING COUNT ADA PARKING SPACE SIGN TRUNCATED DOMES PAVEMENT MARKING DIRECTIONAL ARROWS

**GENERAL NOTES AND SPECIFICATIONS:**

- THE EXISTING SITE INFORMATION ON THIS PLAN WAS TAKEN FROM A SITE SURVEY PROVIDED BY ALIGN SURVEY. THE ENGINEER MAKES NO WARRANTY OR REPRESENTATION WITH REFERENCE TO THE ACCURACY AND COMPLETENESS OF THE EXISTING CONDITIONS INDICATED OR NOT INDICATED ON THE ENGINEERING PLANS PROVIDED. VERIFY THE LOCATION OF ALL EXISTING SITE CONDITIONS INCLUDING UNDERGROUND UTILITIES, UNDERGROUND UTILITY ELEVATIONS, BUILDING SETBACKS AND EXISTING BUILDING LOCATIONS. THE CONTRACTOR SHALL INFORM THE OWNER AND ENGINEER OF ANY DISCREPANCIES PRIOR TO COMMENCING WORK WITH QUESTIONS REGARDING THE EXISTING SURVEY SHALL BE DIRECTED TO THE PARTIES LISTED ABOVE.
- BEFORE PROCEEDING WITH ANY UTILITY CONSTRUCTION, EXCAVATE EACH EXISTING LATERAL TO BE CONNECTED TO (VERIFYING ELEVATION, LOCATION AND SIZE). SHOULD THE EXISTING UTILITY NOT BE AS INDICATED ON THE PLAN, THE ENGINEER SHALL BE NOTIFIED IMMEDIATELY FOR EVALUATION.
- ALL UTILITY CONSTRUCTION SHALL ADHERE TO THE STANDARD SPECIFICATIONS FOR SEWER AND WATER CONSTRUCTION IN INDIANA (LATEST EDITION) AS WELL AS, VIGO COUNTY.
- ALL PERMITS MUST BE RECEIVED FROM THE MUNICIPALITY PRIOR TO THE START OF CONSTRUCTION. IT IS THE CONTRACTOR'S RESPONSIBILITY TO ENSURE ALL APPLICABLE PERMITS ARE RECEIVED PRIOR TO STARTING CONSTRUCTION.
- NOTIFY THE PUBLIC WORKS INSPECTION DEPT. AT LEAST 48 HOURS BEFORE STARTING CONSTRUCTION.
- BACKFILL REQUIREMENTS AND ROADWAYS/SIDEWALK RESTORATION SHALL ADHERE TO LOCAL STANDARDS (GRANULAR BACKFILL UNDER OR WITHIN 5' OF CURBS, SIDEWALK, OR PAVEMENT. SPOIL MAY BE USED ELSEWHERE. SLURRY BACKFILL WILL BE REQUIRED IN PUBLIC ROADWAYS.)
- ALL BUILDING UTILITIES SHALL BE VERIFIED WITH THE ARCHITECTURAL PLANS PRIOR TO CONSTRUCTION.
- ALL PROPOSED WATERMAIN SHALL BE PVC, CLASS 200, AWWA C900 WITH ELASTOMERIC JOINTS CONFORMING TO ASTM D-1784 (UNLESS OTHERWISE NOTED).
- PROPOSED SANITARY SEWER PIPE SHALL BE PVC, ASTM D-3034, SDR 35 WITH RUBBER GASKETED JOINTS CONFORMING TO ASTM D-1798 (UNLESS OTHERWISE NOTED).
- PROPOSED STORM SEWER SHALL BE RCP, AASHTO M 170, CLASS II, III, IV, OR V. (UNLESS OTHERWISE NOTED).
- A MEANS TO LOCATE BURIED UNDERGROUND EXTERIOR NONMETALLIC UTILITIES MUST BE PROVIDED. PROVIDE TRACER WIRE OR OTHER METHODS IN ORDER TO BE LOCATED
- ALL MANHOLES, CATCH BASINS, INLETS, VALVES BOXES, ETC WITHIN THE PROJECT AREA SHALL BE RESET AND ADJUSTED TO MATCH FINISH GRADE.
- ALL EXCAVATED OR STRIPPED MATERIALS NOT BEING REPLACED IN UTILITY TRENCHES OR BEING USED FOR FILL SHALL BE REMOVED FROM THE SITE, UNLESS OTHERWISE DIRECTED BY THE OWNER.
- SEE ARCHITECTURAL PLANS FOR EXACT BUILDING & FOUNDATION DETAILS AND ORIENTATION.
- ALL ON-SITE CONCRETE CURBS AND GUTTER TO BE 18" WIDE VERTICAL FACE, UNLESS OTHERWISE NOTED. REVERSE OR REGULAR STYLE CURB DENOTED ON PLANS.
- ALL CURB ELEVATIONS ARE EDGE OF PAVEMENT UNLESS OTHERWISE NOTED. SEE CURB DETAIL FOR TOP OF CURB ELEVATIONS.
- ALL CURB RADII ARE MEASURED TO THE FACE OF CURB UNLESS OTHERWISE NOTED.
- CONTRACTOR SHALL MATCH PROPOSED CONCRETE CURB AND GUTTER, SIDEWALK AND PAVEMENT TO EXISTING IN ELEVATION AND ALIGNMENT.
- ALL CONCRETE FOR CURB AND GUTTER, ROADWAY AND SIDEWALKS MUST CONFORM TO THE STANDARD SPECIFICATIONS FOR READY MIXED CONCRETE. MINIMUM 28 DAY COMPRESSIVE STRENGTH TEST MUST EQUAL 4000 PSI.
- PROTECT ALL PROPERTY CORNERS.
- CONTRACTOR IS RESPONSIBLE FOR REPAIRING ANY DAMAGE TO EXISTING UTILITIES OR SITE IMPROVEMENTS. DOCUMENT ALL EXISTING DAMAGE PRIOR TO START OF CONSTRUCTION AND NOTIFY CONSTRUCTION MANAGER OF ANY FINDINGS.
- PROJECT SAFETY ON-SITE SHALL BE THE SOLE RESPONSIBILITY OF THE CONTRACTOR.
- AS-BUILTS ARE TO BE PROVIDED TO THE CLIENT TRACKING ANY CHANGES THAT OCCURRED DURING CONSTRUCTION.

**CIVIL SHEET INDEX:**

C1.10	PROJECT LOCATION AND GENERAL NOTES
C1.11	SITE PLAN - OVERALL
C1.12	SITE PLAN - NORTH
C1.13	SITE PLAN - CENTER
C1.14	SITE PLAN - SOUTH
C1.20	GRADING PLAN - OVERALL
C1.21	GRADING PLAN - NORTH
C1.22	GRADING PLAN - CENTER
C1.23	GRADING PLAN - SOUTH
C1.30	EROSION CONTROL PLAN - NORTH
C1.31	EROSION CONTROL PLAN - SOUTH
C1.40	EXISTING SURVEY
C5.00	CONSTRUCTION DETAILS
C5.10	CONSTRUCTION DETAILS
C5.00	SPECIFICATIONS



IN ACCORDANCE WITH INDIANA STATUTE IC 8-1, DAMAGE TO TRANSMISSION FACILITIES, EXCAVATOR SHALL BE SOLELY RESPONSIBLE TO PROVIDE ADVANCE NOTICE TO THE DESIGNATED ONE CALL SYSTEM NOT LESS THAN TWO WORKING DAYS PRIOR TO COMMENCEMENT OF ANY EXCAVATION REQUIRED TO PERFORM WORK CONTAINED ON THESE DRAWINGS. AND FURTHER, EXCAVATOR SHALL COMPLY WITH ALL OTHER REQUIREMENTS OF THIS STATUTE RELATIVE TO EXCAVATOR'S WORK.

Scale: SCALE: 1" = 200'



Date: 05/24/2024

Project Number:

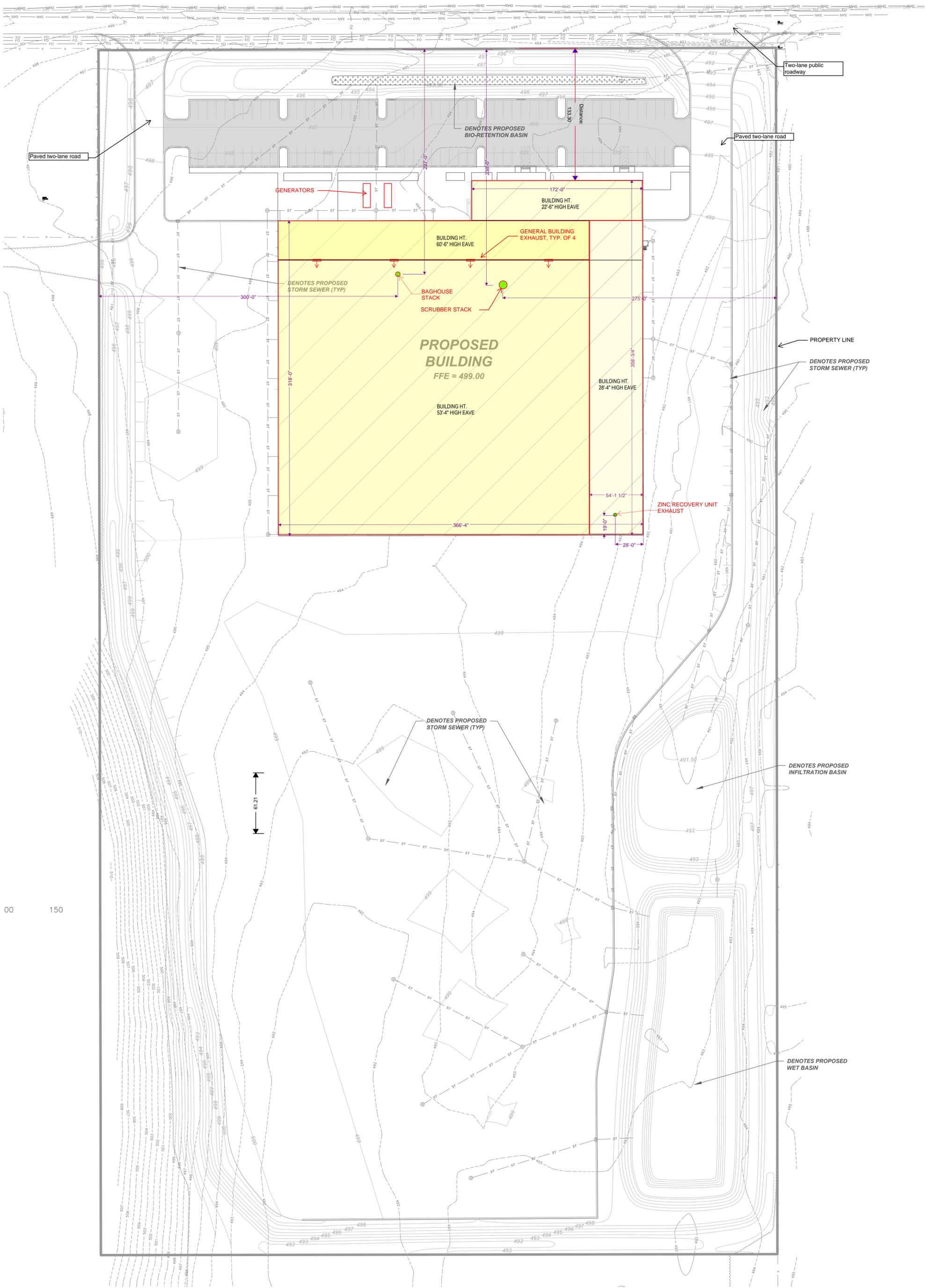
24-1015.00

Sheet Name:

PROJECT  
LOCATION &  
GENERAL NOTES

Sheet Number:

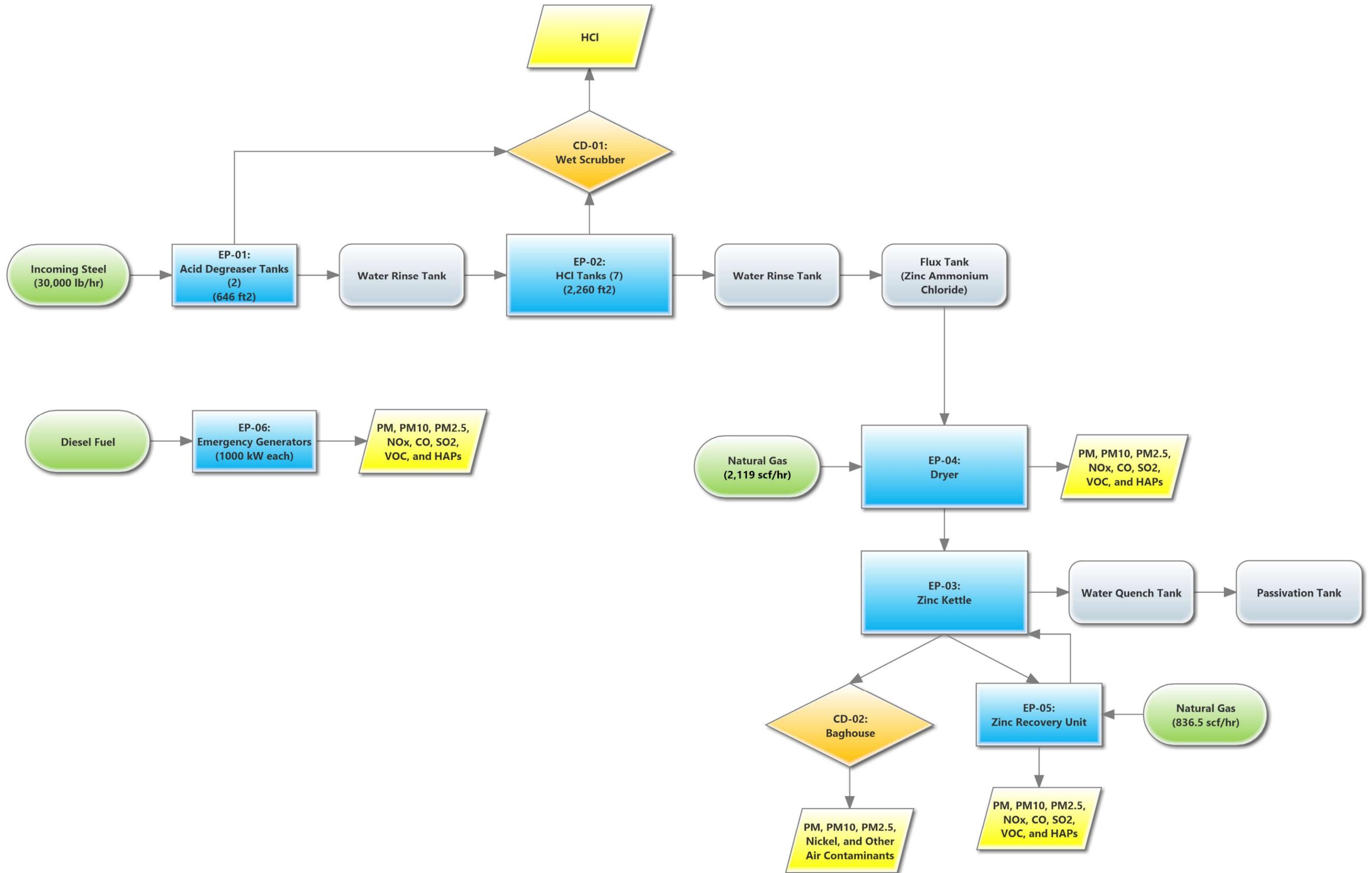
C1.10



ZinkPower Indiana  
**SITE EXHIBIT - 5-30-24**

00 150

Process Flow Diagram  
ZINKPOWER – Terre Haute, LLC



## Attachment C

### Summary of Emissions and Emission Calculations

**Potential to Emit Summary**  
**ZINKPOWER - Terre Haute, LLC**  
**Terre Haute, IN**

Pollutant	Uncontrolled Emissions		Controlled Emissions	
	lb/hr	tpy	lb/hr	tpy
PM	9.36	34.63	1.60	0.63
PM10	9.09	34.56	1.33	0.56
PM2.5	8.74	33.18	1.29	0.55
NOx	70.97	18.68	70.97	18.68
CO	19.02	5.55	19.02	5.55
SOx	0.035	0.014	0.035	0.014
Lead	1.5E-06	5.1E-06	1.5E-06	5.1E-06
VOC	2.00	0.55	2.00	0.55
HAPs	2.82	1.33	0.33	0.15

**Acid Degreaser Tank Emissions  
ZINKPOWER - Terre Haute, LLC  
Terre Haute, IN**

**EP-01: Acid Degreaser Tanks (2)**

**TCEQ Hot Dip Galvanizing Calculations Guidance Package**

*Calculate Evaporation Rate:*

$$E = 25[0.46 + 0.117(V)] \log[760 / (760 - P_v)]$$

where:

E = Evaporation rate from tank, lb/hr-ft<sup>2</sup>

V = Air velocity across surface of tank, ft/s

P<sub>v</sub> = Vapor pressure of HCl, mmHg

1 , from TCEQ Guidance  
0.0023 , from Table 3-4 of TCEQ Guidance  
for 4% HCl at 40°C

$$E = 1.90E-05 \text{ lb/hr-ft}^2$$

*Calculate Uncontrolled Emissions:*

$$ER_1 = E \times A$$

where:

ER<sub>1</sub> = Uncontrolled HCl Emission Rate, lb/hr

A = surface area of tanks, ft<sup>2</sup>

646 , total for both tanks

$$ER_1 = 0.012 \text{ lb/hr}$$
$$0.05 \text{ tpy}$$

*Calculate Controlled Emissions from Wet Scrubber (CD-01)*

$$ER_4 = ER_1 \times (1 - AE/100)$$

where:

ER<sub>4</sub> = Controlled HCl Emission Rate, lb/hr

AE = Abatement device control efficiency, %

90 , from manufacturer data for wet scrubber

$$ER_4 = 1.22E-03 \text{ lb/hr}$$
$$0.005 \text{ tpy}$$

**HCl Tank Emissions**  
**ZINKPOWER - Terre Haute, LLC**  
**Terre Haute, IN**

**EP-02: HCl Tanks (7)**

**TCEQ Hot Dip Galvanizing Calculations Guidance Package**

*Calculate Evaporation Rate:*

$$E = 25[0.46 + 0.117(V)] \log[760 / (760 - P_v)]$$

where:

E = Evaporation rate from tank, lb/hr-ft<sup>2</sup>

V = Air velocity across surface of tank, ft/s

P<sub>v</sub> = Vapor pressure of HCl, mmHg

1 , from TCEQ Guidance

0.148 , from Table 3-4 of TCEQ Guidance

for HCl hourly max concentration of 18% at 25°C.

P<sub>v</sub> = Vapor pressure of HCl, mmHg

0.0145 , from Table 3-4 of TCEQ Guidance

for HCl annual avg. concentration of 12% at 25°C.

$$E = 0.00122 \text{ lb/hr-ft}^2$$

$$E = 1.05 \text{ lb/yr-ft}^2$$

*Calculate Uncontrolled Emissions:*

$$ER_1 = E \times A$$

where:

ER<sub>1,H</sub> = Hourly Uncontrolled HCl Emission Rate, lb/hr

ER<sub>1,A</sub> = Annual Uncontrolled HCl Emission Rate, tons/yr

A = surface area of tanks, ft<sup>2</sup>

2,260 , total for all seven tanks

$$ER_{1,H} = 2.76 \text{ lb/hr}$$

$$ER_{1,A} = 1.18 \text{ tpy}$$

*Calculate Controlled Emissions from Wet Scrubber (CD-01)*

$$ER_4 = ER_1 \times (1 - FE/100) \times (1 - AE/100)$$

where:

ER<sub>4,H</sub> = Hourly Controlled HCl Emission Rate, lb/hr

ER<sub>4,A</sub> = Annual Controlled HCl Emission Rate, tons/yr

AE = Abatement device control efficiency, %

90 , from manufacturer data for wet scrubber

$$ER_{4,H} = 0.276 \text{ lb/hr}$$

$$ER_{4,A} = 0.118 \text{ tpy}$$

**Zinc Kettle Emissions**  
**ZINKPOWER - Terre Haute, LLC**  
**Terre Haute, IN**

**EP-03: Zinc Kettle**

**TCEQ Hot Dip Galvanizing Calculations Guidance Package**

Maximum Hourly Production: 30,000 lb/hr  
 Maximum Annual Production: 131,400 tpy  
 Baghouse Control Efficiency: 99.5% from AP-42, Appendix B-2

Zinc Kettle Emission Factor: 0.52 lbs PM10/ton

Hourly Uncontrolled Emissions: 7.8 lb PM10/hr  
 Annual Uncontrolled Emissions: 34.16 tpy

Hourly Controlled Emissions: 0.04 lb PM10/hr  
 Annual Controlled Emissions: 0.17 tpy

<b>Speciated Zinc Kettle Emissions*</b>					
Pollutant	% of PM10	Uncontrolled Emissions		Controlled Emissions	
		(lb/hr)	(tpy)	(lb/hr)	(tpy)
PM10	100%	7.8	34.16	0.04	0.17
PM2.5	96%	7.49	32.80	0.04	0.16
NH4Cl	68%	5.30	23.23	0.03	0.12
ZnO	16%	1.25	5.47	0.01	0.03
ZnCl2	4%	0.31	1.37	0.002	0.01
Zn	5%	0.39	1.71	0.002	0.01
NH3	1%	0.08	0.34	0.000	0.002
Bi	0.10%	0.008	0.03	3.90E-05	1.71E-04
Ni	0.20%	0.016	0.07	7.80E-05	3.42E-04
Al	0.004%	3.12E-04	0.001	1.56E-06	6.83E-06

Note: Nickel is considered a HAP

\*Percentages for Bismuth, Nickel, and Aluminum provided by ZINKPOWER.  
 Remaining pollutant percentages were obtained from TCEQ Guidance.

# Dryer Emissions

## ZINKPOWER - Terre Haute, LLC

### Terre Haute, IN

EP-04: Dryer

AP-42 Chapter 1.4 - Natural Gas Combustion

**Dryer Specifications**

Natural Gas Flowrate (scf/hr)	2,119
Heat Value of Natural Gas (Btu/scf)	1020
Max Design Rate (MMBtu/hr)	2.16

Pollutant	Emission Factor (lb/10 <sup>6</sup> scf) AP-42 Chapter 1.4	Potential Emissions	
		lb/hr	tpy
NO <sub>x</sub> *	100	0.21	0.93
CO*	84	0.18	0.78
Lead	0.0005	1E-06	5E-06
PM <sub>10</sub> (Filterable)	1.9	0.00	0.02
PM <sub>10</sub> (Condensable)	5.7	0.01	0.05
PM <sub>10</sub> (Total)	7.6	0.02	0.07
PM <sub>2.5</sub> (Filterable)	1.9	0.00	0.02
PM <sub>2.5</sub> (Condensable)	5.7	0.01	0.05
PM <sub>2.5</sub> (Total)	7.6	0.02	0.07
SO <sub>2</sub>	0.6	0.00	0.01
TOC	11	0.02	0.10
VOC	5.5	0.01	0.05
<b>Hazardous Air Pollutants</b>			
2-Methylnaphthalene	2.40E-05	5.09E-08	2.22737E-07
3-Methylcholanthrene	1.80E-06	3.81E-09	1.67053E-08
7,12-Dimethylbenz(a)anthracene	1.60E-05	3.39E-08	1.48491E-07
Acenaphthene	1.80E-06	3.81E-09	1.67053E-08
Acenaphthylene	1.80E-06	3.81E-09	1.67053E-08
Anthracene	2.40E-06	5.09E-09	2.22737E-08
Benz(a)anthracene	1.80E-06	3.81E-09	1.67053E-08
Benzene	2.10E-03	4.45E-06	1.94895E-05
Benzo(a)pyrene	1.20E-06	2.54E-09	1.11368E-08
Benzo(b)fluoranthene	1.80E-06	3.81E-09	1.67053E-08
Benzo(g,h,i)perylene	1.20E-06	2.54E-09	1.11368E-08
Benzo(k)fluoranthene	1.80E-06	3.81E-09	1.67053E-08
Chrysene	1.80E-06	3.81E-09	1.67053E-08
Dibenzo(a,h)anthracene	1.20E-06	2.54E-09	1.11368E-08
Dichlorobenzene	1.20E-03	2.54E-06	1.11368E-05
Fluoranthene	3.00E-06	6.36E-09	2.78421E-08
Fluorene	2.80E-06	5.93E-09	2.5986E-08
Formaldehyde	7.50E-02	1.59E-04	7.0E-04
Hexane	1.80E+00	3.81E-03	1.7E-02
Indeno(1,2,3-cd)pyrene	1.80E-06	3.81E-09	1.67053E-08
Naphthalene	6.10E-04	1.29E-06	5.66123E-06
Phenanathrene	1.70E-05	3.60E-08	1.57772E-07
Pyrene	5.00E-06	1.06E-08	4.64035E-08
Toluene	3.40E-03	7.20E-06	3.15544E-05
Arsenic	2.04E-04	4.32E-07	1.89326E-06
Beryllium	1.20E-05	2.54E-08	1.11368E-07
Cadmium	1.10E-03	2.33E-06	1.02088E-05
Chromium	1.40E-03	2.97E-06	1.2993E-05
Cobalt	8.40E-05	1.78E-07	7.79579E-07
Manganese	3.80E-04	8.05E-07	3.52667E-06
Mercury	2.60E-04	5.51E-07	2.41298E-06
Nickel	2.10E-03	4.45E-06	1.94895E-05
Selenium	2.40E-05	5.09E-08	2.22737E-07
<b>Total HAPs</b>		4.00E-03	1.75E-02

\* = Emission Factor for Uncontrolled Small Boilers (<100 MMBtu/hr)

# Zinc Recovery Unit Emissions

## ZINKPOWER - Terre Haute, LLC

### Terre Haute, IN

EP-05: Zinc Recovery Unit  
 AP-42 Chapter 1.4 - Natural Gas Combustion

**Equipment Specifications**

Energy Usage per Burn (kW)	250
BTU/hr Per kW	3413.04
Energy Usage per Burn (Btu/hr)	853,260
Heat Value of Natural Gas (Btu/scf)	1,020
Natural Gas Usage per Burn (scf/hr)	836.5
Average Time Per Burn (hr)	4.0
Burns per Day	2
Burn Days per Week	5
Weeks per Year	52
Annual Natural Gas Use (scf/yr)	1,739,981

Pollutant	Emission Factor (lb/10 <sup>6</sup> scf) AP-42 Chapter 1.4	Potential Emissions	
		lb/hr	tpy
NOx*	100	0.08	0.087
CO*	84	0.070	0.073
Lead	0.0005	4E-07	4E-07
PM <sub>10</sub> (Filterable)	1.9	0.002	0.002
PM <sub>10</sub> (Condensable)	5.7	0.005	0.005
PM <sub>10</sub> (Total)	7.6	0.006	0.007
PM <sub>2.5</sub> (Filterable)	1.9	0.002	0.002
PM <sub>2.5</sub> (Condensable)	5.7	0.005	0.005
PM <sub>2.5</sub> (Total)	7.6	0.006	0.007
SO2	0.6	0.001	0.001
TOC	11	0.009	0.010
VOC	5.5	0.005	0.005
<b>Hazardous Air Pollutants</b>			
2-Methylnaphthalene	2.40E-05	2.01E-08	2.09E-08
3-Methylcholanthrene	1.80E-06	1.51E-09	1.57E-09
7,12-Dimethylbenz(a)anthracene	1.60E-05	1.34E-08	1.39E-08
Acenaphthene	1.80E-06	1.51E-09	1.57E-09
Acenaphthylene	1.80E-06	1.51E-09	1.57E-09
Anthracene	2.40E-06	2.01E-09	2.09E-09
Benz(a)anthracene	1.80E-06	1.51E-09	1.57E-09
Benzene	2.10E-03	1.76E-06	1.83E-06
Benzo(a)pyrene	1.20E-06	1.00E-09	1.04E-09
Benzo(b)fluoranthene	1.80E-06	1.51E-09	1.57E-09
Benzo(g,h,i)perylene	1.20E-06	1.00E-09	1.04E-09
Benzo(k)fluoranthene	1.80E-06	1.51E-09	1.57E-09
Chrysene	1.80E-06	1.51E-09	1.57E-09
Dibenzo(a,h)anthracene	1.20E-06	1.00E-09	1.04E-09
Dichlorobenzene	1.20E-03	1.00E-06	1.04E-06
Fluoranthene	3.00E-06	2.51E-09	2.61E-09
Fluorene	2.80E-06	2.34E-09	2.44E-09
Formaldehyde	7.50E-02	6.27E-05	6.52E-05
Hexane	1.80E+00	1.51E-03	1.57E-03
Indeno(1,2,3-cd)pyrene	1.80E-06	1.51E-09	1.57E-09
Naphthalene	6.10E-04	5.10E-07	5.31E-07
Phenanathrene	1.70E-05	1.42E-08	1.48E-08
Pyrene	5.00E-06	4.18E-09	4.35E-09
Toluene	3.40E-03	2.84E-06	2.96E-06
Arsenic	2.04E-04	1.71E-07	1.77E-07
Beryllium	1.20E-05	1.00E-08	1.04E-08
Cadmium	1.10E-03	9.20E-07	9.57E-07
Chromium	1.40E-03	1.17E-06	1.22E-06
Cobalt	8.40E-05	7.03E-08	7.31E-08
Manganese	3.80E-04	3.18E-07	3.31E-07
Mercury	2.60E-04	2.17E-07	2.26E-07
Nickel	2.10E-03	1.76E-06	1.83E-06
Selenium	2.40E-05	2.01E-08	2.09E-08
<b>Total HAPs</b>		1.58E-03	1.64E-03

\* Emission Factor for Uncontrolled Small Boilers (<100 MMBtu/hr)

**Emergency Generator Emissions  
ZINKPOWER - Terre Haute, LLC  
Terre Haute, IN**

EP-06: 1,000 kW Emergency Generators (2)  
AP-42 Chapter 3.4 - Large Stationary Diesel Engines

**Emergency Generator Specifications**

Max Design Rate (kW)	1,000	per generator
Est. Engine Horsepower	1,578	
Max Design Rate (MMBtu/hr)	11.04	
Hours per year	500	

Pollutant	Emission Factor (lb/MMBtu) AP-42 Table 3.4-1 & 3.4.2	Per Generator		Two Generators	
		lb/hr	tpy	lb/hr	tpy
NOx	3.2	35.3	8.8	70.7	17.7
CO	0.85	9.4	2.3	18.8	4.7
SOx	0.00152	0.02	4.18E-03	0.03	8.4E-03
PM	0.0697	0.77	0.19	1.5	0.38
PM <sub>10</sub>	0.0573	0.63	0.16	1.3	0.32
PM <sub>2.5</sub>	0.0556	0.61	0.15	1.2	0.31
VOC	0.09	1.0	0.2	2.0	0.5
<i>Hazardous Air Pollutants</i>	Emission Factor (lb/MMBtu) AP-42 Table 3.4-3	lb/hr	tpy	lb/hr	tpy
Benzene	7.76E-04	8.57E-03	2.14E-03	1.71E-02	4.28E-03
Toluene	2.81E-04	3.10E-03	7.76E-04	6.21E-03	1.55E-03
Xylenes	1.93E-04	2.13E-03	5.33E-04	4.26E-03	1.07E-03
Formaldehyde	7.89E-05	8.71E-04	2.18E-04	1.74E-03	4.36E-04
Acetaldehyde	2.52E-05	2.78E-04	6.96E-05	5.57E-04	1.39E-04
Acrolein	7.88E-06	8.70E-05	2.18E-05	1.74E-04	4.35E-05
Naphthalene	1.30E-04	1.44E-03	3.59E-04	2.87E-03	7.18E-04
<b>Total HAPs</b>		1.65E-02	4.12E-03	3.30E-02	8.24E-03

## Attachment D

### TCEQ Calculations Guidance Package – Hot Dip Galvanizing

Air Permits Division

# Calculations Guidance Package

## Hot Dip Galvanizing



Compiled, published, and distributed by the  
Air Permits Division  
Texas Commission on Environmental Quality  
Post Office Box 13087 - MC 163  
Austin, Texas 78711-3087  
(512) 239-1250

# HOT DIP GALVANIZING

## I. INSTRUCTIONS

This manual was developed for the purpose of providing a guide for calculating emissions at hot-dip galvanizing facilities. Tables are provided for identifying the input data required and the emission calculation results. In most cases, the upper portions of the tables are used to record input data/calculation parameters. Use the equations which follow the table to perform the emission calculations and record the results in the lower portion of the table.

**NOTE:** Some of the calculations are made using data from TCEQ Tables 6, 11, and 13. You should complete these forms for maximum operating conditions and actual equipment specifications for your facility.

The information provided below will be used throughout the calculations and establishes limitations for the permit.

## A. GALVANIZING FACILITY CAPACITY DATA

AP = Maximum annual production (tons/year) \_\_\_\_\_.  
DP = Maximum daily production (tons/year) \_\_\_\_\_.  
HD = Hours of operation per day \_\_\_\_\_.  
DW = Number of days operated per week \_\_\_\_\_.  
WY = Number of weeks operated per year \_\_\_\_\_.  
HY = Maximum number of hours operated per year \_\_\_\_\_.  
ZN = Tons of zinc used per year \_\_\_\_\_.

## B. DEGREASING/CLEANING OPERATIONS

1. Number of degreasing tanks \_\_\_\_\_.  
2. Degreasing Tank Parameters  
Tank #1: \_\_\_\_\_ feet (ft) wide X \_\_\_\_\_ feet (ft) long  
Tank #2: \_\_\_\_\_ feet (ft) wide X \_\_\_\_\_ feet (ft) long  
Type of degreasing compound used: \_\_\_\_\_.  
Concentration of degreasing compound: \_\_\_\_\_.  
Temperature of degreasing tank solution: \_\_\_\_\_.  
Type of heat source: \_\_\_\_\_.

**NOTE:** The permit engineer will review the above data and determine if degreasing tank emissions will be considered.

## C. ACID/PICKLE TANK EMISSIONS

**INSTRUCTIONS:** Acid/pickle tank emissions are calculated using the procedure below. If the applicant chooses to not calculate the pickle tank emissions, then all the operating parameters must be provided with the permit application so that the permit engineer can calculate the emissions.

## 1. Acid Tank Data

Number of pickle tanks at facility: \_\_\_\_\_

Tank #1: \_\_\_\_\_ feet (ft) wide X \_\_\_\_\_ feet (ft) long

Tank #2: \_\_\_\_\_ feet (ft) wide X \_\_\_\_\_ feet (ft) long

Type acid used: \_\_\_\_\_

Maximum acid concentration: \_\_\_\_\_ % weight/weight (w/w)

Minimum acid concentration: \_\_\_\_\_ % w/w. (concentration at recharge)

Temperature of acid tanks: \_\_\_\_\_ degrees F.

Fume suppressant used? \_\_\_\_\_ Yes; \_\_\_\_\_ No

Submit a copy of the Material Safety Data Sheet (MSDS) for the acid, the fume suppressant, and any other chemicals or additives used.

Are capture hoods used over the acid tanks? \_\_\_\_\_ Yes; \_\_\_\_\_ No

Are any exhaust fans located near the tanks? \_\_\_\_\_ Yes; \_\_\_\_\_ No

If yes, show their location on the plot plan and indicate the fan size (diameter), flow rate (CFM), and the height of the fan discharge point above the ground where it exhausts to the atmosphere.

## 2. Acid Pickle Tank Emission Calculation Procedure.

**HYDROCHLORIC (HCl) ACID TANK TABLE**  
**TABLE 2**

<b>HCl Pickle Tanks</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
A = Surface area of tank (ft <sup>2</sup> )					
T = Operating temperature (C°)					
Conc. = Percent concentration of HCL by weight (% w/w)					
V = Air velocity across surface of tank (fps)					
P <sub>v</sub> = Vapor pressure of HCl (mmHg from Table 3-1 thru 3-4 in the Appendix)					
E = Evaporation rate from tank (lb/hr-ft <sup>2</sup> )					
ER <sub>1</sub> = Emission rate Uncontrolled (lb/hr)					
FE = Suppressant efficiency 1 - (%)/100					
CE = Hood capture efficiency (%)					
AE= Abatement device efficiency 1 - (%)/100					
ER <sub>4</sub> = Emission rate Controlled (lb/hr)					
FUG = Fugitive emissions (lb/hr)					
OY= Annual operating hours					
AFUG = Annual HCl fugitive emission rate (tons/year)					
AER = Annual HCl emission rate (tons/year)					

**SUPPLEMENTARY INFORMATION**  
**TABLE 2a**

<b>HCl Pickle Tanks</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
ER <sub>1</sub> (enter into TABLE 2) (lbs/hr)					
ER <sub>2</sub> (lbs/hr)					
ER <sub>3</sub> (lbs/hr)					
(ER <sub>2</sub> - ER <sub>3</sub> ) (lbs/hr)					
ER <sub>4</sub> (enter into TABLE 2) (lbs/hr)					

#### **D. HYDROCHLORIC (HCl) ACID TANK EMISSIONS CALCULATIONS**

The following calculations are made with data provided by the applicant. To assist in these calculations, TABLE 2, TABLE 2a, and TABLES 3-1 thru 3-4 (regarding partial pressures of HCl over aqueous solutions of HCl located in the Appendix) are provided for your use. A completed TABLE 2 and TABLE 2a, in addition to the applicant's calculations, will serve to expedite the permit review process.

#### **E. CALCULATION STEPS**

1. Calculate the surface area (A) of each tank in square feet and enter the value of A into TABLE 2.
2. Enter the operating temperature (T) in degrees centigrade (C°), acid concentration (conc.) by weight percent, and air velocity (V) in feet per second (fps) across the surface of each tank into TABLE 2.
3. Determine the vapor pressure (P<sub>v</sub>) of the HCl solution from the appropriate TABLES 3-1 thru 3-4 (Appendix). Using the temperature (T, C°) and the percent acid concentration (Conc.) determine the partial pressure of the solution in mmHg and enter the value of P<sub>v</sub> into TABLE 2.
4. Calculate the evaporation rate of HCl from the tank using the following equation and enter the value of E (lb/hr-ft<sup>2</sup>) into TABLE 2 (Requires a calculator with logarithmic functions):

$$E = 25[0.46 + 0.117(V)]\log[(760 - P_a)/(760 - P_v)] \text{ (lb/hr-ft}^2\text{)}$$

P<sub>a</sub> = 0 for this calculation.

5. Calculate and enter into TABLES 2 and 2a the uncontrolled emission rate,

$$ER_1 = E \times A \text{ (lb/hr)}$$

6. Do you use a suppressant (foam, fume, or mechanical) in your HCl tank? If yes, complete the following then go to 7.

$$FE = [1 - (\%)/100], \text{ where \% is the efficiency of the suppressant.}$$

The efficiency of the suppressant can usually be found in the manufacturer's literature or by contacting the manufacturer of your particular suppressant.

Enter the value of FE into TABLE 2, then calculate the following (enter the value of ER<sub>2</sub> into TABLE 2a):

$$ER_2 = ER_1 \times FE \text{ (lbs/hr)}$$

If you do not use a fume suppressant, complete the following (enter the value of ER<sub>2</sub> into TABLE 2a) then go to 7.

$$ER_2 = ER_1$$

**7.** Do you use a capture hood on your HCl tank? If yes, complete the following appropriate calculation, then go to 10. If no, skip to 8.

If you use a hood, and do not use a fume suppressant, calculate the following (enter the value of ER<sub>3</sub> into TABLE 2a), then go to 10:

$$ER_3 = ER_2 \times CE/100 \text{ (lbs/hr) (Hood, no fume suppressant)}$$

**Note:** CE is the percent capture efficiency of your hood design. Hoods designed in accordance with the Industrial Ventilation, A Manual of Recommended Practice, can be conservatively considered to have 98% capture efficiency.

If you use a hood, and also use a fume suppressant, calculate the following (enter the value of ER<sub>3</sub> into TABLE 2a), then go to 10:

$$ER_3 = ER_2 \times CE/100 \text{ (lbs/hr) (Hood and a fume suppressant)}$$

**8.** If you do not use a capture hood, but use a fume suppressant use the following (enter the value of ER<sub>3</sub> into TABLE 2a), then go to 12.

$$ER_3 = ER_2 \text{ (lbs/hr) (No hood, use a fume suppressant)}$$

If you do not use a capture hood, and also do not use a fume suppressant, then go to 9.

**9.** You will not be authorized to operate a HCl pickle tank without the use of, as a minimum, a fume suppressant or a capture hood.

**10.** Do you have an abatement device that controls the emissions from your hood exhaust? If yes, complete the following calculations, enter the values of AE and ER<sub>4</sub> into TABLE 2, then go to 13. If not, then go to 11.

The efficiency of the abatement device you propose to use, or you are using, can be determined from the manufacturers literature or by contacting the manufacturer directly.

$AE = [1-(\%)/100]$ , where % is the abatement device efficiency.

$$ER_4 = ER_3 \times AE \text{ (lbs/hr)}$$

**11.** Without an abatement device your hourly emission rate is the same as calculated in 7. Complete the following, enter the value of ER<sub>4</sub> into TABLES 2 and 2a, then go to 13:

$$ER_4 = ER_3 \text{ (lbs/hr)}$$

**12.** Calculate the hourly fugitive emission rate from the tank and enter the value of FUG into TABLE 2, then go to 14:

Fugitive emissions are those emissions that escape into the building. These emissions are eventually emitted to the atmosphere through a building vent (exhaust fan, open door, window, etc.). You are given a 50% capture efficiency for the building.

$$\text{FUG} = (\text{ER}_3) (0.5) \text{ (lbs/hr) (Fume suppressant only)}$$

**13.** Calculate the fugitive emission rate from the tank and enter the value of FUG into TABLE 2, then go to 15:

Fugitive emissions are those emissions that are not captured by the hood system and; therefore, escape into the building. These emissions are eventually emitted to the atmosphere through a building vent (exhaust fan, open door, window, etc.). You are given a 50% capture efficiency for the building.

$$\text{FUG} = (\text{ER}_2 - \text{ER}_3)(0.5) \text{ (lbs/hr)}$$

**14.** Calculate your annual fugitive emission rate (AFUG) and enter the value of AFUG into TABLE 2:

$$\text{AFUG} = (\text{FUG} \times \text{OY})/2000 \text{ (tons/year)}$$

**15.** Calculate your annual emission rate (AER) and the annual fugitive rate (AFUG) and enter the values of AER and AFUG into TABLE 2.

$$\text{AER} = (\text{ER}_4 \times \text{OY})/2000 \text{ (tons/year)}$$

$$\text{AFUG} = (\text{FUG} \times \text{OY})/2000 \text{ (tons/year)}$$

#### SULFURIC ACID EMISSION CALCULATIONS

If sulfuric acid is used as a pickling agent, use the above Steps 5 through 15 and TABLES 2 and 2a. Begin with Step 5 and use 0.00015 lbs/hr-ft<sup>2</sup> for "E," the emission factor for sulfuric acid.

**F. GALVANIZING/ZINC KETTLE UNCONTROLLED EMISSIONS**

Galvanizing Facility Parameters			
Parameter	Zinc Kettle		
	1	2	3
<b>HP</b> = Maximum Hourly Production in Pounds/Hour of Galvanized Product (lbs/hr)			
<b>AP</b> = Maximum Annual Production in Tons/Year of Galvanized Product (tpy)			
<b>AH</b> = Maximum Annual Operating Hours Per Year (hrs/yr)			
<b>EF</b> = Zinc Kettle Emission Factor (lbs/hr)	0.52	0.52	0.52
<b>EH</b> = Hourly Uncontrolled PM <sub>10</sub> Emissions (lbs/hr)*			
<b>EA</b> = Actual Uncontrolled PM <sub>10</sub> Emissions (tpy)**			

\* EH= HP/2000 X EF  
 \*\* EA= AP/2000 X EF

**Note:** The above calculations must be completed for each galvanizing kettle that exhausts to its own control device. For all kettles exhausting to a common control device, then this calculation may be made only once using an AP and HP for all kettles exhausting to the same control device.

**G. GALVANIZING/ZINC KETTLE CONTROLLED EMISSIONS**

Galvanizing Facility Parameters			
Parameter	Zinc Kettle		
	1	2	3
<b>EH</b> = (See Previous Table) (lbs/hr)			
<b>EA</b> = (See Previous Table) (lbs/hr)			
<b>CE</b> = Kettle Hood Capture Efficiency (%)			
<b>AE</b> = Control Device Efficiency (%)			
<b>EHC</b> = Hourly Controlled PM <sub>10</sub> Emissions (lbs/hr)*			
<b>EAC</b> = Annual Controlled PM <sub>10</sub> Emissions (tpy)**			
<b>FH</b> = Hourly Fugitive PM <sub>10</sub> Emissions (lbs/hr)***			
<b>FA</b> = Actual Fugitive PM <sub>10</sub> Emissions (tpy)****			

\* EHC= EH X CE/100 X [1- (AE/100)] =  
 \*\* EAC= EA X CE/100 X [1-(AE/100)] =  
 \*\*\* FH= EH X [1-(CE/100)] =  
 \*\*\*\* FA= EA X [1-(CE/100)] =

**Note:** This quantity must be completed for each galvanizing kettle that exhausts to its own control device. For all kettles exhausting to a common control device, then this calculation may be made only once using an AP and HP for all kettles exhausting to the same control device.

## 1. Speciated Zinc Kettle Emissions

### (a) Hourly Controlled Emissions (lbs/hr)

<u>Contaminant</u>	%
PM <sub>10</sub> =	1.00 x EAC = _____
NH <sub>4</sub> Cl =	0.68 x EAC = _____
ZnO =	0.16 x EAC = _____
ZnCl <sub>2</sub> =	0.04 x EAC = _____
Zn =	0.05 x EAC = _____
NH <sub>3</sub> =	0.01 x EAC = _____

### (b) Hourly Fugitive Emissions (lbs/hr)

<u>Contaminant</u>	%
PM <sub>10</sub> =	1.00 x EHC = _____
NH <sub>4</sub> Cl =	0.68 x EHC = _____
ZnO =	0.16 x EHC = _____
ZnCl <sub>2</sub> =	0.04 x EHC = _____
Zn =	0.05 x EHC = _____
NH <sub>3</sub> =	0.01 x EHC = _____

### (c) Annual Controlled Emissions (tpy)

<u>Contaminant</u>	%
PM <sub>10</sub> =	1.00 x FH = _____
NH <sub>4</sub> Cl =	0.68 x FH = _____
ZnO =	0.16 x FH = _____
ZnCl <sub>2</sub> =	0.04 x FH = _____
Zn =	0.05 x FH = _____
NH <sub>3</sub> =	0.01 x FH = _____

### (d) Annual Fugitive Emissions (lbs/hr)

<u>Contaminant</u>	%
PM <sub>10</sub> =	1.00 X FA = _____
NH <sub>4</sub> Cl =	0.68 X FA = _____
ZnO =	0.16 X FA = _____
ZnCl <sub>2</sub> =	0.04 X FA = _____
Zn =	0.05 X FA = _____
NH <sub>3</sub> =	0.01 X FA = _____

**E. HEAT SOURCE EMISSIONS**

The following calculations must be completed for each heat source, i.e. zinc kettle burner, boiler, tank heater, etc.

**1. Heat Source Parameters (From the completed TCEQ Table 6 to be filled out by the applicant)**

<u>Parameter</u>	<u>Design Max</u>	<u>Annual Average</u>
Total Flow Rate (SFM)		
FRH = Total Flow Rate (SCF/hr)		
Avg. Heat Content (BTU/SCF)		
Total Heat Rate (BTU/hr)		

**2. Emission Factors (Refer to AP-42 natural gas Chapter 1.4)**

Contaminant	Emission Factor
PM	_____ (EPM)
SO <sub>2</sub>	_____ (ESO <sub>2</sub> )
CO	_____ (ECO)
NO <sub>x</sub>	_____ (ENO <sub>x</sub> )
VOC	_____ (EVOC)

**3. Emission Calculation (lbs/hr)**

Use FRH (from above) at design maximums (FRH<sub>max</sub>) in the following calculations:

$$PM = EPM \times FRH_{max}$$

$$SO_2 = ESO_2 \times FRH_{max}$$

$$CO = ECO \times FRH_{max}$$

$$NO_x = ENO_x \times FRH_{max}$$

$$VOC = EVOC \times FRH_{max}$$

**4. Emission Calculation (tons/yr)**

Use FRH<sub>avg</sub> in the following calculations.

HY (Hours of operation per year) =

$$PM = EPM \times FRH_{avg} \times HY / 2000$$

$$SO_2 = ESO_2 \times FRH_{avg} \times HY / 2000$$

$$CO = ECO \times FRH_{avg} \times HY / 2000$$

$$NO_x = ENO_x \times FRH_{avg} \times HY / 2000$$

$$VOC = EVOC \times FRH_{avg} \times HY / 2000$$

# HOT DIP GALVANIZING FACILITY EXAMPLE CALCULATIONS

## I. INSTRUCTIONS

This manual was developed for the purpose of providing a guide for calculating emissions at hot-dip galvanizing facilities. Tables are provided for identifying the input data required and the emission calculation results. In most cases, the upper portions of the tables are used to record input data/calculation parameters. Use the equations which follow the table to perform the emission calculations and record the results in the lower portion of the table.

**NOTE:** Some of the calculations are made using data from TCEQ Tables 6, 11, and 13. You should complete these forms for maximum operating conditions and actual equipment specifications for your facility.

The information provided below will be used throughout the calculations and establishes limitations for the permit.

### A. GALVANIZING FACILITY CAPACITY DATA

AP = Maximum annual production (tons/year) 20,000.  
DP = Maximum daily production (tons/year) 100.  
HD = Hours of operation per day 24.  
DW = Number of days operated per week 5.  
WY = Number of weeks operated per year 52.  
HY = Maximum number of hours operated per year 6,240.  
ZN = Tons of zinc used per year 1,200.

### B. DEGREASING/CLEANING OPERATIONS

1. Number of degreasing tanks 2.  
2. Degreasing Tank Parameters  
Tank #1: 5 feet (ft) wide X 45 feet (ft) long  
Tank #2: 5 feet (ft) wide X 45 feet (ft) long  
Type of degreasing compound used: Sodium Hydroxide.  
Concentration of degreasing compound: 10%.  
Temperature of degreasing tank solution: 200 degrees F.  
Type of heat source: NG Fired Tube Heater.

**NOTE:** The permit engineer will review the above data and determine if degreasing tank emissions will be considered.

**C. ACID/PICKLE TANK EMISSIONS**

INSTRUCTIONS: Acid/pickle tank emissions are calculated using the procedure below. If the applicant chooses to not calculate the pickle tank emissions, then all the operating parameters must be provided with the permit application so that the permit engineer can calculate the emissions.

1. Acid Tank Data

Number of pickle tanks at facility:   2    
Tank #1:   5   feet (ft) wide X   45   feet (ft) long  
Tank #2:   5   feet (ft) wide X   45   feet (ft) long  
Type acid used: Hydrochloric (HCl)  
Maximum acid concentration:  16  % weight/weight (w/w)  
Minimum acid concentration:   8  % w/w. (concentration at recharge)  
Temperature of acid tanks: ambient degrees F.  
Fume suppressant used?  X  Yes;        No

Submit a copy of the Material Safety Data Sheet (MSDS) for the acid, the fume suppressant, and any other chemicals or additives used.

Are capture hoods used over the acid tanks?        Yes;  X  No  
Are any exhaust fans located near the tanks?  X  Yes;        No

If yes, show their location on the plot plan and indicate the fan size (diameter), flow rate (CFM), and the height of the fan discharge point above the ground where it exhausts to the atmosphere.

2. Acid Pickle Tank Emission Calculation Procedure.

**HYDROCHLORIC (HCl) ACID TANK TABLE**  
**TABLE 2**

HCl Pickle Tanks	1	2	3	4	5
A = Surface area of tank (ft <sup>2</sup> )	225	225			
T = Operating temperature (C°)	30	30			
Conc. = Percent concentration of HCL by weight (% w/w)	16	16			
V = Air velocity across surface of tank (fps)	1.0	1.0			
P <sub>v</sub> = Vapor pressure of HCl (mmHg from Table 3-1 thru 3-4 in the Appendix)	0.106	0.106			
E = Evaporation rate from tank (lb/hr-ft <sup>2</sup> )	0.0009	0.0009			
ER <sub>1</sub> = Emission rate Uncontrolled (lb/hr)	0.196	0.196			
FE = Suppressant efficiency 1 - (%)/100	0.05	0.05			
CE = Hood capture efficiency (%)	N/A	N/A			
AE = Abatement device efficiency 1 - (%)/100	N/A	N/A			
ER <sub>4</sub> = Emission rate Controlled (lb/hr)	0.0098	0.0098			
FUG = Fugitive emissions (lb/hr)	0.0049	0.0049			
OY = Annual operating hours	8760	8760	Tanks	Emit	All the Time
AFUG = Annual HCl fugitive emission rate (tons/year)	0.021	0.021			
AER = Annual HCl emission rate (tons/year)	N/A	N/A			

**SUPPLEMENTARY INFORMATION**  
**TABLE 2a**

HCl Pickle Tanks	1	2	3	4	5
ER <sub>1</sub> (enter into TABLE 2) (lbs/hr)	0.196	0.196			
ER <sub>2</sub> (lbs/hr)	0.0098	0.0098			
ER <sub>3</sub> (lbs/hr)	0.0098	0.0098			
(ER <sub>2</sub> - ER <sub>3</sub> ) (lbs/hr)	N/A	N/A			
ER <sub>4</sub> (enter into TABLE 2) (lbs/hr)	0.0098	0.0098			

## **D. HYDROCHLORIC (HCl) ACID TANK EMISSIONS CALCULATIONS**

The following calculations are made with data provided by the applicant. To assist in these calculations, TABLE 2, TABLE 2a, and TABLES 3-1 thru 3-4 (regarding partial pressures of HCl over aqueous solutions of HCl located in the Appendix) are provided for your use. A completed TABLE 2 and TABLE 2a, in addition to the applicant's calculations, will serve to expedite the permit review process.

## **E. CALCULATION STEPS**

**1.** Calculate the surface area (A) of each tank in square feet and enter the value of A into TABLE 2.

**2.** Enter the operating temperature (T) in degrees centigrade (C°), acid concentration (conc.) by weight percent, and air velocity (V) in feet per second (fps) across the surface of each tank into TABLE 2.

**3.** Determine the vapor pressure (P<sub>v</sub>) of the HCl solution from the appropriate TABLES 3-1 thru 3-4 (Appendix). Using the temperature (T, C°) and the percent acid concentration (Conc.) determine the partial pressure of the solution in mmHg and enter the value of P<sub>v</sub> into TABLE 2.

**4.** Calculate the evaporation rate of HCl from the tank using the following equation and enter the value of E (lb/hr-ft<sup>2</sup>) into TABLE 2 (Requires a calculator with logarithmic functions):

$$E = 25[0.46 + 0.117(V)]\log[(760 - P_a)/(760 - P_v)] \text{ (lb/hr-ft}^2\text{)}$$

P<sub>a</sub> = 0 for this calculation.

**5.** Calculate and enter into TABLES 2 and 2a the uncontrolled emission rate,

$$ER_1: ER_1 = E \times A \text{ (lb/hr)}$$

**6.** Do you use a suppressant (foam, fume, or mechanical) in your HCl tank? If yes, complete the following then go to 7.

$$FE = [1 - (\%)/100], \text{ where } \% \text{ is the efficiency of the suppressant.}$$

The efficiency of the suppressant can usually be found in the manufacturer's literature or by contacting the manufacturer of your particular suppressant.

Enter the value of FE into TABLE 2, then calculate the following (enter the value of ER<sub>2</sub> into TABLE 2a):

$$ER_2 = ER_1 \times FE \text{ (lbs/hr)}$$

If you do not use a fume suppressant, complete the following (enter the value of ER<sub>2</sub> into TABLE 2a) then go to 7.

$$ER_2 = ER_1$$

**7.** Do you use a capture hood on your HCl tank? If yes, complete the following appropriate calculation, then go to 10. If no, skip to 8.

If you use a hood, and do not use a fume suppressant, calculate the following (enter the value of  $ER_3$  into TABLE 2a), then go to 10:

$$ER_3 = ER_2 \times CE/100 \text{ (lbs/hr) (Hood, no fume suppressant)}$$

**Note:** CE is the percent capture efficiency of your hood design. Hoods designed in accordance with the Industrial Ventilation, A Manual of Recommended Practice, can be conservatively considered to have 98% capture efficiency.

If you use a hood, and also use a fume suppressant, calculate the following (enter the value of  $ER_3$  into TABLE 2a), then go to 10:

$$ER_3 = ER_2 \times CE/100 \text{ (lbs/hr) (Hood and a fume suppressant)}$$

**8.** If you do not use a capture hood, but use a fume suppressant use the following (enter the value of  $ER_3$  into TABLE 2a), then go to 12.

$$ER_3 = ER_2 \text{ (lbs/hr) (No hood, use a fume suppressant)}$$

If you do not use a capture hood, and also do not use a fume suppressant, then go to 9.

**9.** You will not be authorized to operate a HCl pickle tank without the use of, as a minimum, a fume suppressant or a capture hood.

**10.** Do you have an abatement device that controls the emissions from your hood exhaust? If yes, complete the following calculations, enter the values of AE and  $ER_4$  into TABLE 2, then go to 13. If not, then go to 11.

The efficiency of the abatement device you propose to use, or you are using, can be determined from the manufacturers literature or by contacting the manufacturer directly.

$AE = [1-(\%)/100]$ , where % is the abatement device efficiency.

$$ER_4 = ER_3 \times AE \text{ (lbs/hr)}$$

**11.** Without an abatement device your hourly emission rate is the same as calculated in 7. Complete the following, enter the value of  $ER_4$  into TABLES 2 and 2a, then go to 13:

$$ER_4 = ER_3 \text{ (lbs/hr)}$$

**12.** Calculate the hourly fugitive emission rate from the tank and enter the value of FUG into TABLE 2, then go to 14:

Fugitive emissions are those emissions that escape into the building. These emissions are eventually emitted to the atmosphere through a building vent (exhaust fan, open door, window, etc.). You are given a 50% capture efficiency for the building.

$$\text{FUG} = (\text{ER}_3) (0.5) \text{ (lbs/hr) (Fume suppressant only)}$$

**13.** Calculate the fugitive emission rate from the tank and enter the value of FUG into TABLE 2, then go to 15:

Fugitive emissions are those emissions that are not captured by the hood system and; therefore, escape into the building. These emissions are eventually emitted to the atmosphere through a building vent (exhaust fan, open door, window, etc.). You are given a 50% capture efficiency for the building.

$$\text{FUG} = (\text{ER}_2 - \text{ER}_3) (0.5) \text{ (lbs/hr)}$$

**14.** Calculate your annual fugitive emission rate (AFUG) and enter the value of AFUG into TABLE 2:

$$\text{AFUG} = (\text{FUG} \times \text{OY})/2000 \text{ (tons/year)}$$

**15.** Calculate your annual emission rate (AER) and the annual fugitive rate (AFUG) and enter the values of AER and AFUG into TABLE 2.

$$\text{AER} = (\text{ER}_4 \times \text{OY})/2000 \text{ (tons/year)}$$

$$\text{AFUG} = (\text{FUG} \times \text{OY})/2000 \text{ (tons/year)}$$

#### SULFURIC ACID EMISSION CALCULATIONS

If sulfuric acid is used as a pickling agent, use the above Steps 5 through 15 and TABLES 2 and 2a. Begin with Step 5 and use 0.00015 lbs/hr-ft<sup>2</sup> for "E", the emission factor for sulfuric acid.

## F. GALVANIZING/ZINC KETTLE UNCONTROLLED EMISSIONS

Galvanizing Facility Parameters			
Parameter	Zinc Kettle		
	1	2	3
<b>HP</b> = Maximum Hourly Production in Pounds/Hour of Galvanized Product (lbs/hr)	10,000		
<b>AP</b> = Maximum Annual Production in Tons/Year of Galvanized Product (tpy)	20,000		
<b>AH</b> = Maximum Annual Operating Hours Per Year (hrs/yr)	6,240		
<b>EF</b> = Zinc Kettle Emission Factor (lbs/hr)	0.52	0.52	0.52
<b>EH</b> = Hourly Uncontrolled PM <sub>10</sub> Emissions (lbs/hr)*	2.6		
<b>EA</b> = Annual Uncontrolled PM <sub>10</sub> Emissions (tpy)**	5.2		

\* EH= 10,000/2000 X 0.52 = 2.6 lbs/hr

\*\* EA= 20,000/2000 X 0.52 = 5.2 tons/yr

**Note:** The above calculations must be completed for each galvanizing kettle that exhausts to its own control device. For all kettles exhausting to a common control device, then this calculation may be made only once using an AP and HP for all kettles exhausting to the same control device.

## G. GALVANIZING/ZINC KETTLE CONTROLLED EMISSIONS

Galvanizing Facility Parameters			
Parameter	Zinc Kettle		
	1	2	3
<b>EH</b> = (See Previous Table) (lbs/hr)	2.6		
<b>EA</b> = (See Previous Table) (lbs/hr)	5.2		
<b>CE</b> = Kettle Hood Capture Efficiency (%)	98%		
<b>AE</b> = Control Device Efficiency (%)	99%		
<b>EHC</b> = Hourly Controlled PM <sub>10</sub> Emissions (lbs/hr)*	0.03		
<b>EAC</b> = Annual Controlled PM <sub>10</sub> Emissions (tpy)**	0.05		
<b>FH</b> = Hourly Fugitive PM <sub>10</sub> Emissions (lbs/hr)***	0.05		
<b>FA</b> = Actual Fugitive PM <sub>10</sub> Emissions (tpy)****	0.104		

\* EHC= 2.6 X 0.98 X 0.01 = 0.02 lbs/hr

\*\* EAC= 5.2 X 0.98 x 0.01 = 0.05 tons/yr

\*\*\* FH= 2.6 X 0.02 = 0.05 lbs/hr

\*\*\*\* FA= 5.2 X 0.02 = 0.104 tons/yr

**Note:** This quantity must be completed for each galvanizing kettle that exhausts to its own control device. For all kettles exhausting to a common control device, then this calculation may be made only once using an AP and HP for all kettles exhausting to the same control device.

## 1. Speciated Zinc Kettle Emissions

### (a) Hourly Controlled Emissions (lbs/hr)

<u>Contaminant</u>	%
PM <sub>10</sub> =	1.00 x 0.03 = <u>0.03</u>
NH <sub>4</sub> Cl =	0.68 x 0.03 = <u>0.02</u>
ZnO =	0.16 x 0.03 = <u>0.005</u>
ZnCl <sub>2</sub> =	0.04 x 0.03 = <u>0.0012</u>
Zn =	0.05 x 0.03 = <u>0.0045</u>
NH <sub>3</sub> =	0.01 x 0.03 = <u>0.0003</u>

### (b) Hourly Fugitive Emissions (lbs/hr)

<u>Contaminant</u>	%
PM <sub>10</sub> =	1.00 x 0.05 = <u>0.05</u>
NH <sub>4</sub> Cl =	0.68 x 0.05 = <u>0.034</u>
ZnO =	0.16 x 0.05 = <u>0.008</u>
ZnCl <sub>2</sub> =	0.04 x 0.05 = <u>0.002</u>
Zn =	0.05 x 0.05 = <u>0.003</u>
NH <sub>3</sub> =	0.01 x 0.05 = <u>0.0005</u>

### (c) Annual Controlled Emissions (tpy)

<u>Contaminant</u>	%
PM <sub>10</sub> =	1.00 x 0.05 = <u>0.05</u>
NH <sub>4</sub> Cl =	0.68 x 0.05 = <u>0.034</u>
ZnO =	0.16 x 0.05 = <u>0.008</u>
ZnCl <sub>2</sub> =	0.04 x 0.05 = <u>0.002</u>
Zn =	0.05 x 0.05 = <u>0.003</u>
NH <sub>3</sub> =	0.01 x 0.05 = <u>0.0005</u>

### (d) Annual Fugitive Emissions (lbs/hr)

<u>Contaminant</u>	%
PM <sub>10</sub> =	1.00 X 0.104 = <u>0.104</u>
NH <sub>4</sub> Cl =	0.68 X 0.104 = <u>0.071</u>
ZnO =	0.16 X 0.104 = <u>0.017</u>
ZnCl <sub>2</sub> =	0.04 X 0.104 = <u>0.0042</u>
Zn =	0.05 X 0.104 = <u>0.005</u>
NH <sub>3</sub> =	0.01 X 0.104 = <u>0.001</u>

## E. HEAT SOURCE EMISSIONS

The following calculations must be completed for each heat source, i.e. zinc kettle burner, boiler, tank heater, etc.

### 1. Tube Heater Parameters (From the completed TCEQ Table 6 to be filled out by the applicant)

<u>Parameter</u>	<u>Design Max</u>	<u>Annual Average</u>
Total Flow Rate (SFM)	10	5
FRH = Total Flow Rate (SCF/hr)	600	300
Avg. Heat Content (BTU/SCF)	1,050	
Total Heat Rate (BTU/hr)	630,000	

### 2. Emission Factors (Refer to AP-42 natural gas Chapter 1.4)

Contaminant	Emission Factor
PM	<u>12</u> (EPM)
SO <sub>2</sub>	<u>0.6</u> (ESO <sub>2</sub> )
CO	<u>21</u> (ECO)
NO <sub>x</sub>	<u>100</u> (ENO <sub>x</sub> )
VOC	<u>5.8</u> (EVOC)

### 3. Emission Calculation (lbs/hr)

Use FRH<sub>max</sub> in the following calculations:

$$PM = 12 \times 0.0006 = 0.007$$

$$SO_2 = 0.6 \times 0.0006 = 0.0004$$

$$CO = 21 \times 0.0006 = 0.013$$

$$NO_x = 100 \times 0.0006 = 0.06$$

$$VOC = 5.8 \times 0.0006 = 0.0035$$

### 4. Emission Calculation (tons/yr)

Use FRH<sub>avg</sub> in the following calculations.

$$HY \text{ (Hours of operation per year)} = 6,240$$

$$PM = 12 \times 0.0003 \times 6,240 / 2,000 = 0.011$$

$$SO_2 = 0.6 \times 0.0003 \times 6,240 / 2,000 = 0.00056$$

$$CO = 21 \times 0.0003 \times 6,240 / 2,000 = 0.0197$$

$$NO_x = 100 \times 0.0003 \times 6,240 / 2,000 = 0.094$$

$$VOC = 5.8 \times 0.0003 \times 6,240 / 2,000 = 0.0054$$

## E. HEAT SOURCE EMISSIONS

The following calculations must be completed for each heat source, i.e. zinc kettle burner, boiler, tank heater, etc.

### 1. Kettle Heater Parameters (From the completed TCEQ Table 6 to be filled out by the applicant)

Parameter	Design Max	Annual Average
Total Flow Rate (SFM)	120	60
FRH = Total Flow Rate (SCF/Hr)	7,200	3,600
Avg. Heat Content (BTU/SCF)	1,050	
Total Heat Rate (BTU/Hr)	7,560,000	

### 2. Emission Factors (Refer to AP-42 natural gas Chapter 1.4)

Contaminant	Emission Factor
PM	<u>12</u> (EPM)
SO <sub>2</sub>	<u>0.6</u> (ESO <sub>2</sub> )
CO	<u>21</u> (ECO)
NO <sub>x</sub>	<u>100</u> (ENO <sub>x</sub> )
VOC	<u>5.8</u> (EVOC)

### 3. Emission Calculation (lbs/hr)

Use FRH<sub>max</sub> in the following calculations:

$$\text{PM} = 12 \times 0.0072 = 0.086$$

$$\text{SO}_2 = 0.6 \times 0.0072 = 0.004$$

$$\text{CO} = 21 \times 0.0072 = 0.15$$

$$\text{NO}_x = 100 \times 0.0072 = 0.72$$

$$\text{VOC} = 5.8 \times 0.0072 = 0.042$$

### 4. Emission Calculation (tons/yr)

Use FRH<sub>avg</sub> in the following calculations.

$$\text{HY (Hours of operation per year)} = 6,240$$

$$\text{PM} = 12 \times 0.0036 \times 6,240 / 2,000 = 0.135$$

$$\text{SO}_2 = 0.6 \times 0.0036 \times 6,240 / 2,000 = 0.0067$$

$$\text{CO} = 21 \times 0.0036 \times 6,240 / 2,000 = 0.24$$

$$\text{NO}_x = 100 \times 0.0036 \times 6,240 / 2,000 = 1.12$$

$$\text{VOC} = 5.8 \times 0.0036 \times 6,240 / 2,000 = 0.07$$

**APPENDIX:**  
**PARTIAL PRESSURES ( $P_v$ ) OF HCl OVER AQUEOUS  
SOLUTIONS OF HCl**

## PARTIAL PRESSURES (P<sub>v</sub>) OF HCl OVER AQUEOUS SOLUTIONS OF HCl

Table 3-4

Note: %HCL, weight percent; Temperature, centigrade (C°); partial pressures, mmHg.

% HCl	0°	5°	10°	15°	20°	25°	30°	35°	40°	45°	50°	60°	70°	80°	90°	100°	110°
2	...	...	0.0000117	0.000023	0.000044	0.000084	0.000151	0.000275	0.00047	0.00083	0.00104	0.0038	0.01	0.0245	0.058	0.132	0.28
4	0.000018	0.000036	0.000069	0.000131	0.00024	0.00044	0.00077	0.00134	0.0023	0.00385	0.0064	0.0165	0.0405	0.095	0.21	0.46	0.93
6	0.000066	0.000125	0.000234	0.000425	0.00076	0.00131	0.00225	0.0038	0.0062	0.0102	0.0163	0.04	0.094	0.206	0.44	0.92	1.78
8	0.000118	0.000323	0.000583	0.00104	0.00178	0.0031	0.00515	0.0085	0.0136	0.022	0.0344	0.081	0.183	0.39	0.82	1.64	3.1
10	0.00042	0.00075	0.00134	0.0232	0.00395	0.0067	0.0111	0.0178	0.0282	0.045	0.069	0.157	0.35	0.73	1.48	2.9	5.4
12	0.00099	0.00175	0.00305	0.0052	0.008	0.0145	0.0234	0.037	0.058	0.091	0.136	0.305	0.66	1.34	2.65	5.1	9.3
14	0.0024	0.00415	0.0071	0.0118	0.0196	0.0316	0.05	0.078	0.121	0.185	0.275	0.6	1.25	2.5	4.8	9	16
16	0.0056	0.0095	0.0016	0.0265	0.0428	0.0685	0.106	0.163	0.247	0.375	0.55	1.17	2.4	4.66	8.8	16.1	28
18	0.0135	0.0225	0.037	0.06	0.095	0.148	0.228	0.345	0.515	0.77	1.11	2.3	4.55	8.6	15.7	28	48
20	0.0316	0.052	0.084	0.132	0.205	0.32	0.48	0.72	1.06	1.55	2.21	4.4	8.5	15.6	28.1	49	83
22	0.0734	0.119	0.187	0.294	0.45	0.68	1.02	1.5	2.18	3.14	4.42	8.6	16.3	29.3	52	90	146
24	0.175	0.277	0.43	0.66	1	1.49	2.17	3.14	4.5	6.4	8.9	16.9	31	54.5	94	157	253
26	0.41	0.64	0.98	1.47	2.17	3.2	4.56	6.5	9.2	12.7	17.5	32.5	58.5	100	169	276	436
28	1	1.52	2.27	3.36	4.9	7.05	9.9	13.8	19.1	26.4	35.7	64	112	188	309	493	760
30	2.4	3.57	5.23	7.6	10.6	15.1	21	28.6	39.4	53	71	124	208	340	542	845	...
32	5.7	8.3	11.8	16.8	23.5	32.5	44.5	60	81	107	141	238	390	623	970	...	...
34	13.1	18.8	26.4	36.8	50.5	68.5	92	122	161	211	273	450	720	...	...	...	...
36	29	41	56.4	78	105.5	142	188	246	322	416	535	860	...	...	...	...	...
38	63	87	117	158	210	277	360	464	598	758	955	...	...	...	...	...	...
40	130	176	233	307	399	515	627	830	...	...	...	...	...	...	...	...	...
42	253	332	430	560	709	900	...	...	...	...	...	...	...	...	...	...	...
44	510	655	840	...	...	...	...	...	...	...	...	...	...	...	...	...	...
46	940	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...