Massachusetts Department of Environmental Protection
Bureau of Air and Waste – Air Quality
Major and Non-Major CPA FUEL & CPA PROCESS (AQ 02/03)
On-Line Form Detailed Data Instructions

Detailed Data Instructions for EPLACE AQ02/03- Major and Non-Major Comprehensive Plan Application (CPA) Form (Fuel and Process)

This document is to be used by applicants and their consultants who are preparing the online Air Quality Major and Non-Major Comprehensive Plan Approval Applications for Fuel Utilization, Process Facilities and Equipment, and Crematories. The document describes each of the data fields on the form and the information that is required to complete the form. The Instructions are in the order of the steps that will be found in the On-Line form. For guidance on how to navigate through the form, or review and certify an application, please see materials provided at: http://mass.gov/dep/aq-cpap or http://mass.gov/dep/aq-cpaf

These forms have been designed to maximize the flexibility for the preparer to move from screen to screen as needed. As such, there is limited information on the screen that is marked with a red asterisk as "Required" before you move to the next screen. Just because a data field is not marked as "required", DO NOT assume it is not necessary for an administratively or technically complete application. Please complete all data fields to the fullest extent possible as applicable to your proposed project

There are two kinds of Comprehensive Plan Approvals: Major and Non-Major. See 310 CMR 4.10(2)(b) and (c) linked here: http://www.mass.gov/eea/docs/dep/service/regulations/310cmr04.pdf for further guidance on which application might be required for your proposal.

An AQ02/03 Comprehensive Plan Approval for Fuel is required for:

- Boilers firing natural gas and having a heat input capacity of 40,000,000 Btu/hr or more
- Boilers firing ultra-low sulfur distillate fuel oil and having a heat input capacity of 30,000,000 Btu/hr or more
- Emergency turbines with a rated power output of more than 1 MW and/or in lieu of complying with 310 CMR 7.26(43) for engines or turbines, as described in 310 CMR (43)2 and 3
- Other fuel utilization units as specified at 310 CMR 7.02(5)(a)2

An AQ02/03 Comprehensive Plan Approval for Process is required for facilities with process equipment emitting 10 or more tons of an air contaminant per consecutive 12 month time period.

You can find a list of some kinds of facilities commonly subject to plan approvals and what kind of approval they must submit at: http://www.mass.gov/eea/docs/dep/air/approvals/aq/aqpaguid.pdf

I. GENERAL

Sharing an Application

In most cases preparation of an AQ02/03 is a collaborative affair involving more than one person. In order to facilitate such collaboration, the person who starts the application will receive an email with a PIN number. This person should forward the PIN number to other members of the team that will be working on the application. This includes the Massachusetts Registered Professional Engineer who will certify the application. The processes of creating an account, sharing and activating an application PIN are detailed in the ePLACE Quick Guide found at: http://www.mass.gov/eea/docs/dep/service/approvals/eplace-quickguide.pdf

There is a separate procedure for the final PE review and applicant certification of the application. See http://mass.gov/dep/aq-cpap or http://mass.gov/dep/aq-cpaf for special instruction on this process.

Navigating Tables

This application requires the completion of a number of tables. All tables are filled out the same way.

In order to add an item to a table, click “Add a Row.” If you want to add multiple rows at once, click the down arrow next to “Add a Row” and choose how many rows you want to add. A window will open with space for all requested information. Please provide answers to the applicable questions and click “Submit.”

If you need to edit any existing rows in the table, check the box next to that row and click “Edit Selected.” A window opens with the information from that row. Edit the information and click “Submit.”

If you need to delete an existing row, check the box next to that row and click “Delete Selected.”

Appending Supplemental Forms

The AQ02/03 allows the applicant to include such supplemental forms as required to more fully describe a proposed pollution control device, the analysis of Best Available Control Technology (BACT) or the PE and Applicant Certification. This process of appending supplemental forms starts in the main or “parent” application form. There you will identify which supplemental forms you intend to attach. Once the “Parent” form is completed and reviewed, the applicant will be directed to a page that lists the selected supplemental forms. Click “Start application” to begin completing a supplemental form.

If you wish to change the list of supplemental forms, add a second form of the same type or delete a form, you must return to the "parent" application and change your answers in the supplemental form table.

Once the last Supplemental form is started, a new supplemental form is added to the list. This is the certification form that must be completed by the Massachusetts registered professional Engineer and the Applicant or Responsible Official. See the guidance at http://mass.gov/dep/aq-cpaf for details on how to complete the certification.

PSD Applications

This form will be used to submit an application for a facility subject to Prevention of Significant Deteriorate but some additional attachments will be require. Please contact the appropriate regional office before completing the forms in order to discuss all of the required documents for a PSD Permit.

II. COMPLETING THE FORM

STEP 1 FACILITY

Facility Information

Use SEARCH first. It is best to enter the address of the facility (rather than name). Based on your search criteria a list will be returned. Select from the list or click "Cancel" to search again. You can search on a string of text. No wild cards are required. You can search on DEP Facility ID or AQID.

If you cannot find your existing facility or are filing an application for a facility that has not yet been constructed, you can add the facility. If the added facility has the same address as an existing facility, you will get a message asking if you want to use the existing facility. If you do not want to use this facility, click "No" then click "Clear" and re-enter the added facility with some unique location in the Street Name 2 field (Building number, Suite, Floor, etc.). To add a facility the following information will be required:

Data Field in Table	Description or Notes
Facility Name	The name of the facility that is the subject of the application
Street #	Physical location of the facility – not a mailing address
Street Name	Physical location of the facility – not a mailing address
Street Name 2	If needed, a unique identifier to differentiate this facility from another at the same address.
City	Physical location of the facility – not a mailing address
Zip code	Physical location of the facility – not a mailing address
Latitude	Latitude of the facility
Longitude	Longitude of the facility
DEP Facility ID	The account number of your facility in the MassDEP FMF

	system
AQ ID	7 digit ID number for Air Quality facilities

Once this information has been entered for the added facility, do not select the search or clear buttons. Move on to the Facility Owner Information section below.

Owner Information

First you should "Look Up" a previously entered contact, and select that contact as the owner. If an owner is incorrect or has changed, you need to add the new/correct owner first, and then you can remove the incorrect/previous owner. To add an owner, click the "Add New" button. At least one owner is required to be entered. To remove an owner, click "Delete" next to that owner in the Owner Information table.

Data Field in Table	Description or Notes
Individual/ Organization	Indicate if the owner of your facility is an individual or an organization
Organization Name	This is the Owner/Company name
Individual Owner Name	The name of the individual who owns a facility
Contact Person	The person who is the Owner's Contact
Telephone Number	Contact Phone number
Email	Contact Email
PO Box/Address	Street number, street name, or PO Box as mailing address for the Facility Owner
Country	Pick from drop down list
State	Pick from drop down list
Zip Code	USPS zip code

STEP 2: APPLICATION INFORMATION

Type of Application

Indicate if you are filing a BWP AQ02 Non-Major CPA or a BWP AQ03 Major CPA. (*See 310 CMR 4.10(2)(a) and (b)*)

Facility Related Information

Provide either the Standard Industrial Classification (SIC) Code or the North American Industry Classification System (NAICS) Code for the facility. SIC and NAICS Codes are used to classify businesses. More information about SIC Codes can be found at: https://www.osha.gov/pls/imis/sicsearch.html

You can get more information about NAICS Codes at:
https://www.census.gov/eos/www/naics/index.html

Data Field in Table	Description or Notes
Standard Industrial Classification (SIC) Code	4 digit code used to classify industries
North American Industry Classification System (NAICS) Code	Code used to classify business types

Project Coordination

Indicate if this project is subject to MEPA Review. If you indicate yes, you will need to provide the EEA File Number. MEPA is the Massachusetts Environmental Policy Act and requires the study of the environmental consequences of permits issued by Massachusetts state agencies. If yes, you must enter your EEA File Number. EEA Numbers are assigned when an Environmental Notification Form is submitted to the MEPA unit. You can find more information about MEPA at http://www.mass.gov/eea/agencies/mepa/ .

Indicate if this project is subject to review by the Energy Facility Siting Board. If yes, you must provide your Docket #. The Siting Board licenses construction of major energy infrastructure projects such as power plants and natural gas pipelines. You can find more information about the Energy Facility Siting Board at http://www.mass.gov/eea/energy-utilities-clean-tech/energy-facilities-siting-board/ .

Data Field in Table	Description or Notes
EEA Number	Number assigned to projects when an ENF form is submitted
Docket #	Number assigned to projects submitted to the Energy Facility Siting board for review

Existing Approvals

Please provide a complete list of all the Air Quality Plan Approvals, Emission Cap Notifications, 310 CMR 7.26 Compliance Certifications, and facility-wide emission caps. Add a row to the table for each one of these that you have, and provide the requested information in the window that opens.

If you have a Final Operating Permit for this facility, you may limit entries to only those approvals and other documents issued after the Operating Permit.

Data Field in Table	Description or Notes
Approval Type	Dropdown menu listing the relevant approval types
Other Approval Type	Use to list an approval type not in the approval type dropdown menu
DEP Approval # or Transmittal #	The approval or transmittal # of your approval type, if the approval has one
Air Contaminant	Choose the contaminant for this approval from the dropdown menu of air pollutants regulated by plan approvals
Specify	If you chose "Other" for Air Contaminant, indicate the air contaminant
Existing Facility-Wide Emission Cap(s) Per Consecutive 12 month Time Period (Tons):	For any existing caps, indicate the pollutant and the value for that cap This is a numeric field. If there is no cap, leave the field blank.

Proposed Project Description

Give a short description of the proposed project. Make sure to include relevant parameters and air pollution controls. Note that you can only receive a Plan Approval for an Emission Unit where the Best Available Control Technology (BACT) is being used. You can learn more about BACT at http://www.mass.gov/eea/agencies/massdep/air/approvals/best-available-control-technology-bact.html

Answer each of the questions about the project and equipment. If you indicate that you will attach a more detailed project description, you will be able to attach that description in the "Documents" section of your application. Also note that if you indicate that you are increasing an existing facility-wide emission cap or modifying previously approved equipment, you will need to provide a description.

If you are replacing approved equipment, list the plan approval numbers.

A note will pop up if you indicate that the project is subject to 310 CMR 7.00, Appendix A Nonattainment Review. This note reminds you that the project is subject to Lowest Achievable Emission Rate (LAER) requirements.

Emission Reduction Credit or Emission Offsets

If your project is subject to 310 CMR 7.00, Appendix A, new emissions must be offset through emission reductions at existing sources. You will need to provide information about the source and quantity of Emission Reduction Credit (ERC) or Emission Offsets that will be used for this project. You can review 310 CMR 7.00 at:
http://www.mass.gov/eea/docs/dep/service/regulations/310cmr07.pdf

Use the table to provide information about the facility providing the ERCs, and/or what is being shut down or curtailed to reduce emission at this facility.

Data Field in Table	Description or Notes
Source of Emission Reduction Credits or offsets	The facility where emissions are being reduced
Approval # authorizing generation of ERC	The identifying number for the federally enforceable Approval used to offset emission increases
Air contaminant	Choose the air contaminant reduced with this ERC
Actual baseline emissions	The actual emissions for the source of emission credits or offsets for a consecutive 12 month period, averaged over the previous 2 years
New potential emissions	The potential emissions for the source of emissions credits or offsets after project completion, over a consecutive 12 month period and after control.
ERC or Emission Offsets including offset ratio and required ERC set aside	For ozone precursors NOx and VOC, the regulatory 1.2:1 offset ratio and 1.05:1 set-aside result in a total ratio of 1.26:1 for ERC needed to offset new emissions

Prevention of Significant Deterioration (PSD) Information

Indicate if your project is subject to Prevention of Significant Deterioration (PSD). PSD applies to new major sources or major modifications to existing major sources of air emissions. You can learn more about the PSD at https://www.epa.gov/nsr/prevention-significant-deterioration-basic-information

Indicate if your application is proposing an emission limitation in order to avoid PSD Applicability or using netting to avoid Appendix A applicability. You must answer “Yes” if either of these is true of your proposed project.

If you said NO on for Appendix A or PSD applicability, you need to provide a brief description of how you reached that conclusion and attach an applicability analysis for both 310 CMR 7.0 Appendix A and PSD to your application.

Federal Regulation Applicability

Indicate if your proposal is subject to 40 CFR 60: New Source Performance Standards. 40 CFR 60 applies to particular types of stationary sources of air emissions that are newly constructed, modified or reconstructed.

Finally, indicate if your proposed project is subject to 40 CFR 61 or 63. 40 CFR 61 National Emission Standards for Hazardous Air Pollutants (NESHAPS).

Federal Applicability

If you answered "Yes" to the previous questions on Federal Regulation Applicability, you must complete the next table to list the particular subparts of the federal New Source Performance Standards (40 CFR 60) or the National Emission Standards for Hazardous Air Pollutants (NESHAPS) (40 CFR 61 and 63), that apply to the equipment or operations proposed in the Plan Application. Provide the Emission Unit #, and the federal standard Part and Subpart that is applicable. A list of subparts for new source performance standards can be reviewed at https://www.epa.gov/stationary-sources-air-pollution/new-source-performance-standards . A list of subparts for NESHAPS can be reviewed at https://www.epa.gov/stationary-sources-air-pollution/national-emission-standards-hazardous-air-pollutants-neshap-9. Other applicable requirements to consider include federal air regulation provisions not listed earlier in the application. These can include but are not limited to Acid Rain, Greenhouse Gas Emissions Reporting, refrigerant leaks, or accidental release prevention program rules.

Data Field in Table	Description or Notes
Emission Unit #	The number assigned to the emission unit subject to the requirement
Part	Dropdown menu listing the applicable Parts of the federal standard, 40 CFR
Sub Part	Indicate the relevant subpart of the federal standard, 40 CFR

There are three types of AQ02/03 applications; one each for fuel utilization facilities, process operations and crematories. In the next few pages the Equipment Detail screens for Fuel Utilization Facilities will be detailed. See page 11 for the Equipment Detail screens for Process Operations. A separate document has been prepared for the Crematory application.

Proposed Project Details: Fuel Utilization Equipment

Give the details for each proposed piece of equipment covered by this Plan Application. You must add one row to the table for each piece of equipment. You can group like pieces of equipment into a single emission unit if each piece of equipment in the group is identical. Otherwise they should be separated into individual emission units.

Data Field in Table	Description or Notes
Emission Unit #	The number assigned to the emission unit
New or Modified	Indicate if this equipment is new equipment, or existing equipment that is being modified
Equipment Type	Choose the kind of equipment for this emission unit from the dropdown menu
Specify if Other or if Other Ancillary Fuel Use	If you choose an equipment type of "Other", indicate the kind of equipment
Manufacturers Maximum Heat Input rating in Btu/Hr.	The maximum input heat rating given by the manufacturer for the equipment, in Btu/Hr.
Description of Equipment	Indicate the kind of equipment for this Emission Unit
Manufacturer	Give the manufacturer of the equipment
Model number or equivalent	Give the model number of the equipment, or the equivalent used by the manufacturer
Fuels Used	If only one fuel is used, choose "Primary". Additional rows will need to be added to add secondary or back up fuel(s)
Fuel Type	Choose the kind of fuel used for each of Primary, secondary, etc.
Sulfur Content of Fuel (% by weight)	Provide the sulfur content of the fuel as a % of the weight of the fuel

Proposed Equipment Burner Details

Provide information for each burner associated with your Emission Unit #s. The table will list the rows for Emission Units already listed in your application. Start by editing these rows, and then add additional rows for any remaining burners.

Data Field in Table	Description or Notes
Emission Unit #	The number assigned to the emission unit
Manufacturer and Model No of Equipment	Give the manufacturer and model number of the equipment
Manufacturers Fuel Firing Rate (Gal/hr. or MMCuft/hr.	The manufacturer's rated capacity for fuel firing, given in either gal/hr. or MMCuft/hr.
Type of Burner	Indicate the type of burner
Is the emission unit equipped with Flue Gas Recirculation	Indicate yes or no for this emission unit

Proposed Project Details: Process Equipment

Give the details for each proposed process or operation covered by this Plan Application. You must add 1 row to the table for each unit. You can group like processes or operations into a single emission unit if each process or operation in the group is identical. Otherwise they should be separated into individual emission units.

Data Field in Table	Description or Notes
Emission Unit #	The number assigned to the emission unit
New or Modified	Indicate if this equipment is new equipment, or existing equipment that is being modified
Equipment Type	Choose the kind of equipment for this emission unit from the dropdown menu. If the process has ancillary fuel burning equipment, include that as a separate line item
Specify if Other or if Other Ancillary Fuel Use	If you choose an equipment type of "Other" or "Ancillary Fuel Use", indicate the kind of equipment. More detail will be required in the next screen.
Description of Equipment	Describe the equipment or proposed process/ activity
Manufacturer	Give the manufacturer of the equipment
Model number or equivalent	Give the model number of the equipment, or the equivalent used by the manufacturer

Ancillary Combustion Equipment

This table summarizes information about ancillary combustion equipment associated with a process unit. You must add a row for each piece of ancillary combustion equipment.

Data Field in Table	Description or Notes
Emission Unit(s) # or group of Emission Units*	The number assigned to the process emission unit
Manufacturers Maximum Heat input rating in Btu/Hr.	The maximum heat input rating that the manufacturer gives this piece of equipment, in Btu/Hr.
Fuel Type*	Choose the kind of fuel used for this source
Fuel Used*	Indicate if this source uses primary or back-up fuel
Sulfur Content of Fuel (% by weight)	The % of the sulfur content in the fuel, based on weight
Manufacturers Fuel Firing Rate (Gal/hr. or MMCuft/hr.	The maximum fuel firing rate that the manufacturer gives this piece of equipment, in Gal/hr. or MMCuft/hr.
Type of Burner	The kind of burner in this unit
Is the Emission Unit equipped with Flue Gas Recirculation	Indicate if the emission unit has flue gas recirculation

Proposed Project Potential Emissions

List each if the pollutants that have the potential to be emitted from each of the proposed emission units. Click “Add a Row” to start.

Data Field in Table	Description or Notes
Emission Unit(s) # or group of Emission Units*	The number assigned to the Emission Unit
Pollutant	Choose the pollutant generated by this emission unit
Specify	If you indicate “Largest single HAP” or “Other” for pollutant, specify what the pollutant is
Potential Emissions uncontrolled (tons per 12 consecutive month period)	The amount of emissions that could be emitted by the unit in absence of emission control technology and operating at full capacity for 8760 hours per year (unless restricted by an enforceable regulation or permit)

Proposed Pollution Control Device (PCD)

Indicate if your proposed project has one or more Pollution Control Devices (PCD). If you indicate yes, you will be brought to the “PCD Equipment” on the next page. Otherwise you will go straight to a “Project Configuration” table.

PCD Equipment

If you indicated that you are proposing to connect new or modified equipment to a new or existing pollution control device, you will be asked to enter each pollution control device associated with the project into the PCD Equipment table.

Data Field in Table	Description or Notes
PCD ID Number	The ID number for this piece of Pollution Control equipment
PCD Description	Description of the PCD, include make/ model and type of PCD
New or Existing?	Indicate if this is a new or existing PCD
Emission Unit # (EU#) Served by PCD	The emission unit number or numbers that are vented to this PCD
Stack #	The ID number of the stack or stacks associated with PCD. If the PCD does not have stack, indicate "None"

PCD Efficiency

This table will be used to describe control efficiency of your pollution control devices. Add a row to the "PCD Efficiency" table for each piece of PCD Equipment and each pollutant controlled by the PCD.

Data Field in Table	Description or Notes
PCD ID Number	The ID number for this piece of PCD equipment
Air Contaminant	Choose the air contaminant associated with this PCD from the dropdown of contaminants regulated by plan approvals
Specify	If you chose "Other" as the air contaminant, you must specify what the contaminant is
Capture efficiency	The % weight of emission captured by the equipment. Only enter a number
Destruction or Removal Efficiency (DE) (Percent by weight)	The % weight of emission destroyed or removed by the equipment. Only enter a number.
Overall Control Efficiency (% by Weight)	OCE is Calculated as the (Capture efficiency) x (Destruction Efficiency). Enter as a number.

Project Configuration

This table summarizes the relationship between each emission unit, pollution control device and stack at the facility. You can edit the information for each existing row as needed, or add new rows to this table.

Data Field in Table	Description or Notes
Emission Unit # (EU#)	The number assigned to the emission unit
PCD ID Number	The ID number for this piece of PCD equipment
Stack #	The ID number for the stack with this emission unit

Stack Information

This table is used to summarize the stack configuration at your facility. If this project has no emissions vented through general room ventilation, no stack information is required but the table must contain at least one row of information. In this case, add a row and type “none” into the Stack # Field and Save that row.

Stacks need to be designed to prevent emissions downwash and adverse impacts on sensitive receptors, nearby structures and terrain. They should be vertical and rain protection accessories should not impede vertical gas flow.

Data Field in Table	Description or Notes
Stack #	The number assigned to the stack (or “None” if there are no stacks)
Stack height above ground (feet)	The height from ground to the top of the stack in feet
Stack height above roof (feet)	The height from the top of the roof to the top of the stack in feet
Stack exit diameter (inches)	The diameter of the stack at the top, in inches
Exhaust gas exit temperature (degrees F)	The temperature of gas when it leaves the stack, in degrees F
Exhaust gas flow rate (CFM)	The volumetric flow rate of exhaust gas leaving the stack, in cubic feet per minute
Stack liner material	The material that lines the interior of the stack

Emissions

Indicate if this project is proposing Top-Case BACT. BACT stands for Best Available Control Technology and must be used for new or substantially reconstructed sources of air emissions. Top-Case BACT lets you use past BACT determinations for similar emission units/processes to help define the BACT for your proposal. You can find more information on BACT Emissions at: http://www.mass.gov/eea/agencies/massdep/air/approvals/best-available-control-technology-bact.html

If you indicate that you are NOT proposing Top-Case BACT, then a BACT analysis will need to be attached to the application.

BACT Emissions

In the BACT Emissions table you are asked to provide the proposed emission rates by pollutant as well as proposed short and long term emission in tons.

Data Field in Table	Description or Notes
Emission Unit # (EU#)	The number assigned to the emission unit
Pollutant	Choose the pollutant emitted by this emission unit
Specify	If you chose “Single HAP” or “Other” for the pollutant, specify the pollutant
Fuel or Material Type	Indicate the Fuel or material that the BACT emission rate applies. Be specific in describing the associated material such as a fuel type, or a process raw material.
Proposed BACT Emission Rate (including unit of measure)	The emission rate that the applicant proposes as BACT. Include the unit of measure. If a performance standard rather than a number is proposed, describe it here. Production / material use limits will be covered in another table.
Proposed Maximum monthly emissions (in tons)	The maximum amount of this air emissions occurring on a monthly basis for this emission unit at your proposed facility, in tons.
Proposed consecutive 12 month time period emissions (in tons)	The maximum amount of this air emissions occurring in a consecutive 12 month period for this emission unit, in tons.

BACT Fuel Limits (AQ02/03 Fuel)

The BACT Fuel Limits table collects information on the amount and kind of fuel used by each emission unit. If you are not proposing a limitation on fuel use for an emission unit, enter “none” for proposed monthly fuel use limits, or give a fuel use number that gives the total maximum fuel use for the maximum fuel firing rate of each emission unit.

Data Field in Table	Description or Notes
Emission Unit # (EU#)	The number assigned to the emission unit
Fuel Used	Indicate if this source uses primary or back-up fuel
Fuel Type	Choose the kind of fuel used for this source
Proposed monthly fuel use limits (if any):	The limit on the amount of fuel used by this emission unit in a month. If you are not proposing a limit, enter “none” or give a value that reflects the fuel use at the maximum fuel firing rate.
Proposed 12-month consecutive period fuel use limits	The limit on the amount of fuel used by this emission unit in a consecutive 12 month period. If you are not proposing a limit, enter “none” or give a value that reflects the fuel use at the maximum fuel firing rate.
Unit of measure (fuel)	Indicate the unit of measure for your fuel use limits

Production/Operational Limits (AQ02/03 Process)

If you are including limits on production or operations at your proposed facility, this table is used to summarize them. These are limits on the amount of operations and production that will apply to this facility.

Data Field in Table	Description or Notes
EU#	The number assigned to the emission unit
Material type	Indicate the material that this applies to, such as coating, ink raw material use or fuel
Proposed monthly production or operational limits (if any) – including unit of measure	Any monthly limits on production or operations associated with this emission unit. This could include a limit on the amount of fuel or raw material used.
Proposed 12-month consecutive period production or operational limits, including unit of measure	Any consecutive 12-month limits on production associated with this emission unit

Administrative Controls

Indicate if you are proposing Administrative Controls on emissions from this project. If you indicate yes, please describe those controls. Administrative controls could include limits on the hours of operation/ days of operation or conditions / circumstances that will limit operation.

External Noise Information

Indicate if there is external sound generating equipment associated with this project.

Indicate if you have or plan to perform a sound study. If yes, you will need to attach study protocol and the results of any completed studies.

Sound Suppression Equipment

The Equipment table is used to document information about sound suppression equipment to be used at your facility. You must provide information about the kind of equipment and indicate the Emission Unit it is associated with.

Data Field in Table	Description or Notes
Emission Unit # / Stack#	The number assigned to the emission unit or stack, whichever is more relevant to the generation of sound.
Type of Sound Suppression Equipment (Measures?)	List the kind of sound equipment being used, such as mufflers, enclosures or administrative controls.
Equipment Manufacturer	The name of the manufacturer of the sound suppression equipment if applicable
Equipment Model No	The model number of the sound suppression equipment if applicable

Other Potential Impacts – Proposed Project Potential

Provide a description of the visible and odor emissions from this project and how they will be controlled.

Monitoring and Recordkeeping

For both Fuel and Process, the applicant will be asked to summarize the details of the proposed project's monitoring and record keeping procedures. The procedures must demonstrate your compliance status for all limitations and restrictions that are being proposed. Monitoring can be thought of in broad terms- what will you "watch" to ensure compliance. This could be anything from a Continuous Emission Monitoring to a fuel flow meter to monitoring SDS forms for VOC content of inks and coatings. Record keeping can include things like logs, meter charts, purchase records, raw material records etc. You can add multiple lines per emission unit to include multiple parameters monitored for each emission unit.

Data Field in Table	Description or Notes
Emission Unit # (EU#)	The number assigned to the emission unit
Parameters Monitored	Describe each parameter monitored for this emission unit using a separate row. Parameters could include such things as emissions, temperature, raw material use, raw material formulation, finished material production, pressure drop across a PCD, etc.
Method of Monitoring	Describe the method used to monitor this parameter. Methods include such things as CEMS, Flow Meters, purchase records, production records, etc.
Frequency of Monitoring	Indicate how frequently this parameter will be monitored (choose from pick list)
Frequency of Monitoring Hours	If “Other Frequency in Hours” was selected in the previous field, then insert the number of hours here (number only). An example of when this might be used is if you monitor on a shift basis and the shift is 10 hrs. long.
Record Keeping Procedures	Indicate the recordkeeping procedure for this parameter. You have a choice from a pick list of electronic or manual.
Frequency of Data Record	Indicate how frequently you will update and maintain your records for this parameter.
Frequency of Data Record Hours	If “Other “ was selected in the previous field, then insert the number of hours here (number only). An example of when this might be used is if you keep records on a shift basis and the shift is 10 hrs. long.

The above table is followed by a similar table with near identical questions but with a focus on Emissions. Here the applicant needs to identify each pollutant from each emission unit and indicate how that pollutant will be monitored.

For the fuel application, there is a similar table for monitoring Fuel use by fuel.

Monitoring and Recordkeeping – Fuel

Use the Fuel Monitoring Records table to explain how fuel data for each Emission Unit will be monitored and what the recordkeeping procedures are.

Data Field in Table	Description or Notes
Emission Unit # (EU#)	The number assigned to the emission unit
Fuel Used	Indicate if the particular fuel is primary or back-up (add rows to provide info for back-up as well as primary fuel if applicable)
Fuel Type	Choose the kind of fuel used for this source
Monitoring Method – Fuel	Indicate if you use Fuel Flow to monitor fuel, or choose Other
Specify	If you indicated “Other” for Monitoring Method – Fuel, you must indicate your monitoring method
Recordkeeping Procedures	Indicate how fuel records are kept
Frequency of Data Record	Choose the frequency with which data is recorded for this fuel
Specify if Other	If you chose “Other” for Frequency of Data Record, specify the frequency of emission monitoring data points

Energy Evaluation Survey

The energy evaluation survey is a series of 10 questions about energy use at your facility. The questions ask if an audit was conducted, what it found and what effect it will have on your project. It also asks about energy conservation and improvements in energy use. You must indicate “Yes” or “No” for each question.

Select Applicable Supplemental Form(s) – Equipment Details

This table is very important. It sets up the supplemental forms that will be appended to the main or “parent” application. Add a row for each supplemental document. Supplemental forms are required for each proposed air pollution control device at your facility. If you are NOT proposing a Top Case BACT, you must attach a form for that as well.

Data Field in Table	Description or Notes
Equipment Type	Choose the kind of equipment from the list
PCD ID #:	The ID number of the PCD associated with this piece of equipment

The supplemental forms selected here will be available to be completed once the main form is complete (see Step 7). If you wish to change the supplemental forms appended to the application, you must return to this table and make the change here. The changes will then be reflected in the supplemental form list.

Other Proposed Equipment

Indicate if you are proposing other air pollution control devices that are not on the list of PCDs. If you indicate yes, you will need to provide an explanation and description of the other PCDs. Also include attachments such as Manufacturer specifications when you upload supporting documents.

STEP 2: DOCUMENTS

The documents section is where the applicant will attach documents to support the application. The process of attaching a document is briefly as follows:

- Browse for the document you wish to attach
- Attach the document and click “continue”
- Choose the type of document from a drop down list
- Give a very brief description (less than 50 characters including spaces)
- Save

At the beginning of the section, the system will give you a list of the documents you are required to attach. This list is based on information provided in the application. Make sure each required document (at minimum) is attached or you will not able to move off this page. You can attach multiples of a single type such as multiple “Manufacturer Equipment Specifications”.

The “Documents” box gives a list of the required documents, such as your implementation schedule, copies of previous plan approvals or an expanded description of your consolidation plan. You can also attach optional documents if they will improve the completeness of the application. The BACT Analysis Supplemental Form is on this list although it is not technically a pollution control device. If you are NOT proposing top-case BACT then this supplemental form will be required (indicate a PCD# of “none”)

Once you click “Save,” it may take a few moments for the documents to load. Be patient. If you move off this page too quickly, the document may be lost.

If you have attached the wrong document or wish to change attachments, click on the “Actions” link next to the document and select “Delete.” To view the attached document, click on the document name.

STEP 4: SPECIAL FEES

310 CMR 4.00 identifies certain circumstances where special fees are applied. Most applicants will not be subject to special fees. If you are, pick the applicable fee type and provide supporting information on this page.

STEP 5: APPLICANTS & CONTRIBUTORS

This page is where all of the people who have worked on the application in ePLACE are listed, There is no entry on this page.

STEP 6: REVIEW & CERTIFICATION

Review all of the entries you have made in the application. If there are corrections to be made, click the "Edit Application" button at the top of the page and make the edits. If you wish to share a paper copy of the application with a client you can print screens from the review page. You can also instruct your client to log into the application and review the document on the review screen.

See separate instruction on how to share a document using the PIN number.

Once the Review and edit are complete, click Continue Application

Step 7: SUPPLEMENTAL FORMS, PE REVIEW AND APPLICANT CERTIFICATION (Authorization Forms)

This section of the application lists the supplemental forms that must be completed. The supplemental form list is based on entries in the Supplemental Form Table (see pg. 17).

For each form that you wish to complete, click "Start Application." The process of moving through any of these forms will be the same as for the previous parts of the application. If you need to leave your application, you can save your work by clicking "Save and resume later."

Once the last supplemental form is started, a new form will appear on the list called the "Certification Information " form (*NOTE: If no supplemental forms were indicated in the main application, then only the Certification Information Form will appear on the Supplemental Form List*).

The Certification Information form is to be used by the PE and Applicant or Responsible Official to document their final review and submittal. The Application Preparer or Applicant must first share the application with the Massachusetts Licensed Professional Engineer who will review the application and certify it. The PIN number created at the beginning of the application preparation process is used to share the application with the PE and gives the PE access to all forms associated with the application. The PE review should include the main application as well as the supplemental forms and communicate edits or changes that need to be made before they certify it.

At the conclusion of his/her review, the PE will open the Certification Information Form and complete Step 1 on that form. The PE's login information will be imported into the form and the PE must agree to the certification statement and provide their License number and the expiration date of that license. Once that is complete, the PE should click "Save and Resume Later." **At this point the application is locked and can no longer be changed.**

An email will be sent to the PE with another PIN Number. The PE should forward this email to the applicant or Responsible Official who will submit the application. The Applicant will need to activate this new PIN number in their account.

Once the Applicant or Responsible Official has activated that PIN in their account, they should access the application and proceed to the Certification Information form. The Applicant's information (name, address, contact info) should now be shown in the box labelled "Applicant Information." The Applicant must type in the name of the company, select the type of organization and select their title within that organization to validate that they are a legal signatory. Below that is the certification statement. The Applicant (signatory) must certify that the information contained on the form is true, accurate and complete by clicking a box of agreement. This places a date on the application making it ready for submittal.

Click the "Submit" button

STEP 8: PAY FEES

The fee for this application varies with exactly which application you submit:

- $2,370 for Non-Major Comprehensive Plan Approvals for Fuel or for Process
- $24,305 for Major Comprehensive Plan Approvals for Fuel or for Process

You can find more details on permit application fees at
http://www.mass.gov/eea/docs/dep/service/approvals/permitfees.pdf

Payment may be made by electronic check or credit card for a nominal processing fee. The electronic check fee is $0.35 per transaction. Credit card payments are 2.35% per transaction. Clicking on the PAY ONLINE button will bring you to the secure online payments portal. Once you have made payment, you will be returned to your application for submittal.

Payment may also be made by mail. However, review of your application will not begin until payment is received. By clicking on the Pay by Mail button, you will have submitted your application. You will receive a notification email with the location and address to send your payment. That information is also available in the instructions for this authorization.