
AQ08A - Emission Control Plan NOx/VOC State Only Review Application

MassDEP, Bureau of Air & Waste





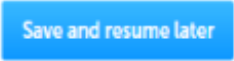

EEA ePlace Portal

Overview

- ❑ This presentation is to assist in completing a new **AQ08A - Emission Control Plan NOx/VOC State Only Review Application**
- ❑ Submit this plan to show how and when your facility will use pollution control technologies to reduce air emissions
- ❑ An ECP is a plan that demonstrates how and when a facility will comply with Reasonably Available Control Technology (RACT) regulations for emissions of Volatile Organic Compounds (VOC) or Oxides of Nitrogen (NOx). Regulation 310 CMR 7.18(20) provides for an ECP for VOC emissions. Regulation 310 CMR 7.19(3) provides for an ECP for NOx emissions.
- ❑ This presentation will take you screen by screen through the EEA ePLACE online permitting application process



General Navigation

- ❑ Always Click  to move to the next page.
- ❑ Do NOT use the Browser Back Button  as this will take you out of the system
- ❑ Any field with a red asterisk (*) is required before you can move off the page.
- ❑ Click  to save your work and resume at a later time.
- ❑ Click on the tool tips where applicable to get more details. 
- ❑ Suggested preferred browsers are Chrome and Microsoft Edge



How to Apply

First time users:

- ❑ Click or type this address on your browser:
<https://eplace.eea.mass.gov/citizenaccess>
- ❑ Follow the prompts to create a new user account
- ❑ Log into your account in EEA ePlace using your username/password

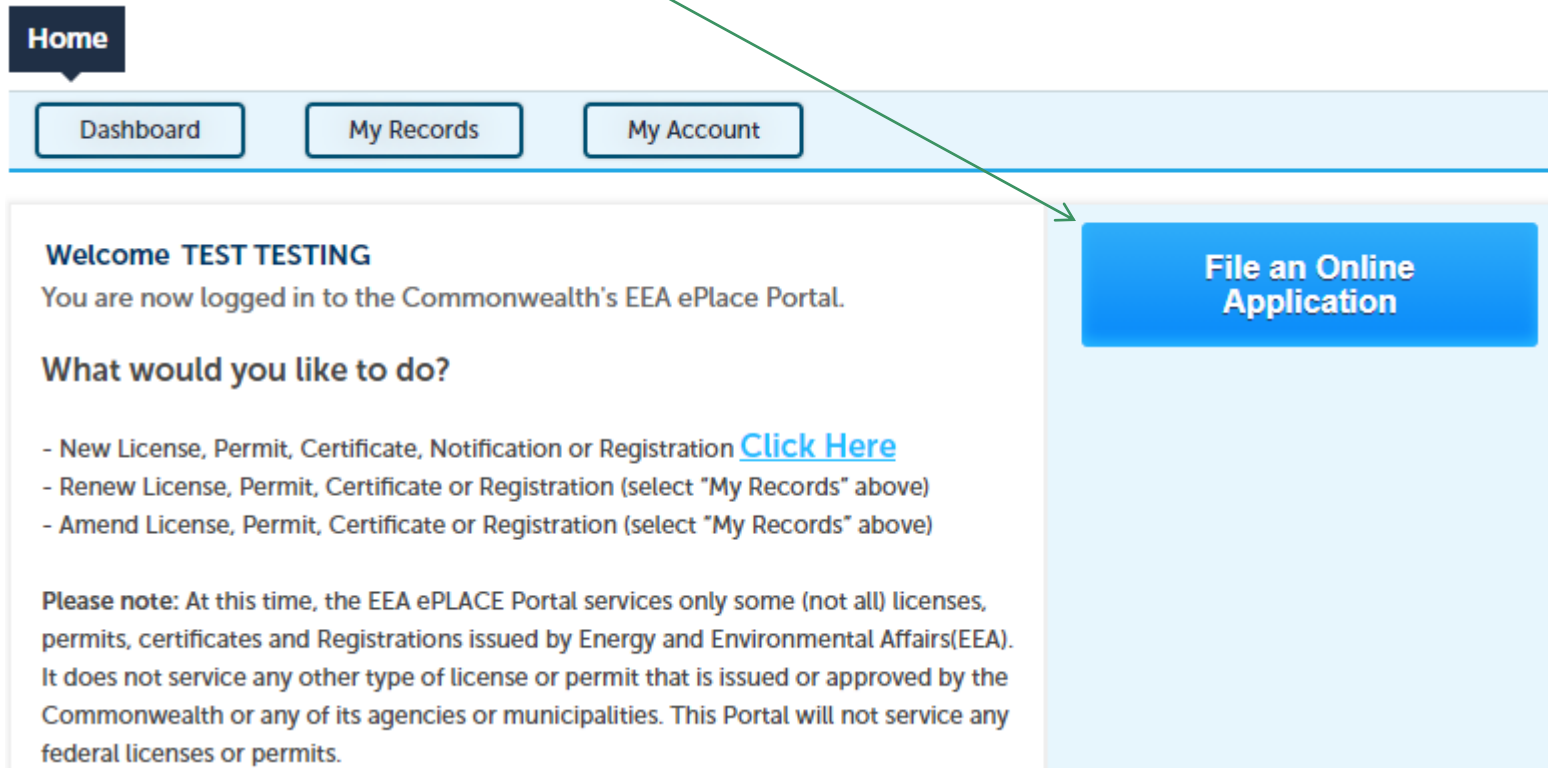
The screenshot shows the EEA ePLACE Portal homepage. At the top is a navigation bar with links: State Offices & Courts, State A-Z Topics, State Forms, and Accessibility FAQs. Below this is the EEA ePLACE Portal header with the Massachusetts state seal. A secondary navigation bar contains links: Announcements, Accessibility Support, Register for an Account, Reports (2), and Login. The main content area includes a 'Need Help?' section with contact information for the ePLACE Help Desk Team, a 'Contact:' section listing Energy and Environmental Affairs, MASSDEP, MDAR, and DCR, and a 'Convenience Fee' notice. A 'Home' button is visible. The main content area is divided into two columns. The left column contains a 'Welcome to the Commonwealth of Massachusetts ePLACE Portal' message, 'Options for Licensees and Applicants' (Apply for, Renew, or Amend a License, Permit, Certificate, Notification or Registration; Make Payments Online), and 'ePLACE Portal Account Registration' instructions. The right column contains a 'Login' section with fields for 'User Name or E-mail' and 'Password', a 'Login' button, and a 'Remember me on this computer' checkbox. A 'New Users: Register for an Account' link is also present. A 'Please note:' section at the bottom right states that ePLACE Portal services only issue some (not all) licenses, permits, and certificates issued by Energy and Environmental Affairs (EEA).



EEA ePlace Portal

File an Online Application

❑ Click here to start



Home

Dashboard My Records My Account

Welcome TEST TESTING
You are now logged in to the Commonwealth's EEA ePlace Portal.

What would you like to do?

- New License, Permit, Certificate, Notification or Registration [Click Here](#)
- Renew License, Permit, Certificate or Registration (select "My Records" above)
- Amend License, Permit, Certificate or Registration (select "My Records" above)

Please note: At this time, the EEA ePLACE Portal services only some (not all) licenses, permits, certificates and Registrations issued by Energy and Environmental Affairs (EEA). It does not service any other type of license or permit that is issued or approved by the Commonwealth or any of its agencies or municipalities. This Portal will not service any federal licenses or permits.

File an Online Application

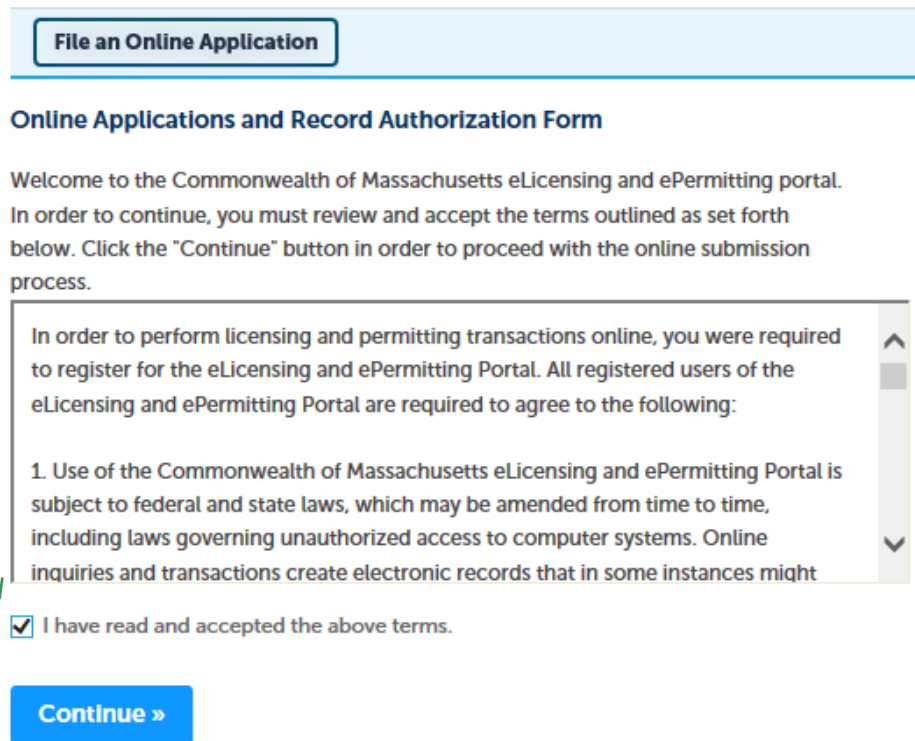


EEA ePlace Portal

File an Online Application

☐ Read and accept the Terms and Conditions

☐ Click the checkbox and click “Continue”



File an Online Application

Online Applications and Record Authorization Form

Welcome to the Commonwealth of Massachusetts eLicensing and ePermitting portal. In order to continue, you must review and accept the terms outlined as set forth below. Click the "Continue" button in order to proceed with the online submission process.

In order to perform licensing and permitting transactions online, you were required to register for the eLicensing and ePermitting Portal. All registered users of the eLicensing and ePermitting Portal are required to agree to the following:

1. Use of the Commonwealth of Massachusetts eLicensing and ePermitting Portal is subject to federal and state laws, which may be amended from time to time, including laws governing unauthorized access to computer systems. Online inquiries and transactions create electronic records that in some instances might

☒ I have read and accepted the above terms.

Continue »



Apply for an AQ08A Application

- ❑ Click on “Apply for a DEP Authorization-Air Quality (AQ) to expand the list of applications
- ❑ You can also search for the application on the search bar field

Home

Dashboard My Records My Account

Commonwealth of Massachusetts EEA ePLACE (ePermitting) Online Services

New Applicants:
The Commonwealth of Massachusetts EEA ePLACE (ePermitting) portal provides the ability to file applications for licenses, permits, certificates, notifications and registrations. From the listing below, please click on the appropriate link to expand the options, select the service that you would like to use and click the continue button.

Existing Applicants:
Click Home and use the "My Records" tab to renew or amend a license, permit, certification or registration. If they are not listed under the "My Records" tab, please select the "Link your account" option found in section below. You will be prompted for a "record identification code" and "authorization code." from the Account Link notification you received. If you have not received a notification letter, please contact the ePLACE Help Desk Team at (844) 733-7522 or (844) 73-ePLACE between the hours of 7:30 AM - 5:00 PM Monday-Friday.

For easier and quicker way to find your application from the list below, Use Search Bar. Type in the name of your application or a keyword in the search field and click search for results.

- ▶ Apply for a DCR Authorization - Construction and Vehicle Access Permits
- ▶ Apply for a DCR Authorization - Special Use Permits
- ▶ **Apply for a DEP Authorization - Air Quality (AQ)**
- ▶ Apply for a DEP Authorization - Drinking Water (DW)
- ▶ Apply for a DEP Authorization - Hazardous Waste (HW)
- ▶ Apply for a DEP Authorization - NPDES (WM)
- ▶ Apply for a DEP Authorization - Laboratory Certification Program (LES)
- ▶ Apply for a DEP Authorization - Solid Waste (SW)
- ▶ Apply for a DEP Authorization - Toxic Use Reduction (TUR)
- ▶ Apply for a DEP Authorization - Watershed Management (WM)
- ▶ Apply for a DEP Authorization - Water Pollution Residuals (WP)
- ▶ Apply for a DEP Authorization - Water Pollution Wastewater (WP)
- ▶ Apply for a DEP Authorization - Waterways Chapter 91 (WW)
- ▶ Apply for a DEP Authorization - 401 Water Quality Certification (WW)
- ▶ Apply for a MDAR Authorization
- ▶ Apply for an EEA General Request
- ▶ Link Your Account - For MassDEP Only
- ▶ Other



Apply for an AQ08A Application

- ❑ Select “AQ08A - Emission Control Plan NOx/VOC State Only Review Application” and click continue at the bottom of the page to start your application

▼ Apply for a DEP Authorization - Air Quality (AQ)

- ☐ AQ - General Administrative Amendment
- ☐ AQ01 - Limited Plan Approval for Fuel Utilization Emission Unit(s) Application
- ☐ AQ01 - Limited Plan Approval for Process Emission Unit(s) Application
- ☐ AQ01M - Permit Maintenance Application
- ☐ AQ02 - Comprehensive Plan Approval Crematory Application
- ☐ AQ02 - Non-Major Comprehensive Plan Approval Fuel Application
- ☐ AQ02 - Non-Major Comprehensive Plan Approval Process Application
- ☐ AQ03 - Major Comprehensive Plan Approval Fuel Application
- ☐ AQ03 - Major Comprehensive Plan Approval Process Application
- ☐ AQ09 - Restricted Emission Status Application
- ☐ AQ14 - Initial Operating Permit Application
- ☐ AQ18 - Creation of Emission Reduction Credits Application
- ☐ AQ30 - CO2 Budget Emission Control Plan Application
- ☐ AQ33 - LPA/CPA Consolidation Application
- ☐ AQ34 - LPA or CPA Administrative Amendment
- ☐ AQMM - Modeling Submittal Application
- ☒ AQ08A - Emission Control Plan NOx/VOC State Only Review Application
- ☐ AQ08B - Emission Control Plan NOx/VOC State and EPA Review Application
- ☐ AQ022 - Emission Control Plan Municipal Waste Combustor Application
- ☐ AQ 50% or 25% Facility Emission Cap Application

- Apply for a DEP Authorization - Drinking Water (DW)
- Apply for a DEP Authorization - Hazardous Waste (HW)
- Apply for a DEP Authorization - NPDES (WM)
- Apply for a DEP Authorization - Laboratory Certification Program (LES)
- Apply for a DEP Authorization - Solid Waste (SW)
- Apply for a DEP Authorization - Toxic Use Reduction (TUR)
- Apply for a DEP Authorization - Watershed Management (WM)
- Apply for a DEP Authorization - Water Pollution Residuals (WP)
- Apply for a DEP Authorization - Water Pollution Wastewater (WP)
- Apply for a DEP Authorization - Waterways Chapter 91 (WW)
- Apply for a DEP Authorization - 401 Water Quality Certification (WW)
- Apply for a MDAR Authorization
- Apply for an EEA General Request
- Link Your Account - For MassDEP Only
- Other

Continue »



EEA ePlace Portal

Contact Information: Important NOTE

- ❑ There are three contact sections in the next screen:
 - ❑ **Permittee:** the person or signatory authority responsible for signing and accepting all conditions of the Permit
 - ❑ If you are the Permittee, click “Add New” button and select the checkbox “Use Login Information”
 - ❑ If you are not the Permittee you have the option to Add New and enter all the Permittee Information or if the Permittee has an EEA ePlace account, then you have the option to look them up under “Look Up” option
 - ❑ **Permittee Company:** here enter the company information the Permittee is affiliated with, if applicable.
 - ❑ **Application Contributors:** use this section if multiple users will be coordinating in the preparation of this application
 - ❑ If you are unable to find the correct contributor, click on the “Save and resume later” button. Advise the contributor to create an account in the EEA ePLACE Portal and then resume the application.



Step 1: Contact Information

- ❑ Add Permittee, please read the section instructions and add accordingly
- ❑ Add Permittee Company
- ❑ Look Up “Application Contributors”, if applicable
- ❑ Click “Continue Application” to proceed

1 Contact Information 2 Facility Information 3 Application Information 4 Special Fee Provision 5 Documents & Signatory 6 7

Step 1: Contact Information > Page 1 of 1

[Instructions](#)

Permittee

Permittee is the person or signatory authority whom is responsible for the application. If you are preparing the application on behalf of the Permittee, please select "I'm Permittee".

Note – If you are unable to find the correct Permittee, click on "save account in the EEA ePLACE Portal and then resume the application."

[I'm Permittee](#) [Look Up](#)

Permittee Company

Please add the company information that the Permittee is affiliated with.

[Add New](#)

Application Contributors

If multiple preparers will be part of filing out this application, you will need to add them here.

Note – If you are unable to find the correct Preparer, click on "save account in the EEA ePLACE Portal and then resume the application."

[Look Up](#)

Showing 0-0 of 0

Contact Type	Name	Organization
No records found.		

[Continue Application »](#)

[Save and resume later](#)

Please fill the below Information:

☐ Use Login Information

* Individual/Organization: Individual

* First Name: Middle Name: Last Name:

* Country: United States

* E-mail: Telephone #: Ext #:

* P.O. Box / Address Line:

* City: State: Zip:

[Continue](#) [Clear](#) [Cancel](#)

Please fill the below Information:

* Individual/Organization: Organization

* Name Of Organization: Contact Person:

* Country: United States

* E-mail: Telephone #: Ext #:

* Address Line 1:

* City: State: Zip:

[Continue](#) [Clear](#) [Cancel](#)

Search for Contact

To search for individual contact, please enter First Name, Last Name, or Middle Name

First Name: Middle Name: Last Name:

[Look Up](#) [Clear](#) [Cancel](#)



Step 2: Facility Information

- ❑ Add your Facility information
- ❑ Please read the instructions on how to find and add your facility
- ❑ Click "Continue Application" to proceed

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents & Signatory	6	7
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Step 2: Facility Information > Page 1 of 1

* indicates a required field.

Facility Information

Please identify the facility for this application. In the "Name" box enter the facility name or a part of it and then click the "Search" button to see a list of results. Click the button to the left of your facility and then click the "Select" button. If your facility is not on the list, click "Cancel" and try searching by address instead of Name. If you cannot find your facility, type in the data for the boxes with an asterisk and go on to the next section without clicking "Search". CAUTION some applications are restricted to existing Facilities and do not allow creating new ones. If you cannot find your Facility or add a new one, please contact the appropriate DEP Regional Office.

* Facility Name:

* Street #: * Street Name: Street Name 2:

* City: * State: * Zip:

Latitude: Longitude:

DEP Facility ID: AQ ID: HW ID:

TRI ID: LES ID: PWS ID:

Facility(s)

Showing 1-12 of 120+

Facility Name Address
<input checked="" type="radio"/> 7 ELEVEN 37580 664 UNION ST FRANKLIN MA 02038
<input type="radio"/> ADVANCE AUTO PARTS 4972 250 ELM ST PITTSFIELD MA 01201
<input type="radio"/> AL O SONS SERVICE STATION 638 HIGH ST MEDFORD MA 02155
<input type="radio"/> ALL STEEL FABRICATING INC 84 CREEPER HILL RD GRAFTON MA 01536
<input type="radio"/> ALLIED WASTE SERVICES OF MA LLC 22 NIGHTINGALE AVE QUINCY MA 02169
<input type="radio"/> ALMEIDA AUTO BODY 20 OAK ST PITTSFIELD MA 01201
<input type="radio"/> ALPHA GRAINGER MANUFACTURING INC 20 DISCOVERY WAY FRANKLIN MA 02038
<input type="radio"/> ATTLEBORO WEST ST WTP 1296 WEST ST ATTLEBORO MA 02703
<input type="radio"/> BAY STATE SPRING CORP 1864 MAIN ST HOLDEN MA 01520
<input type="radio"/> BETH ISRAEL DEACONESS HOSPITAL NEEDHAM 148 CHESTNUT ST NEEDHAM MA 02192
<input type="radio"/> BIRD PRECISION 1 SPRUCE ST WALTHAM MA 02454
<input type="radio"/> BLANDFORD 0 MAIN ST BLANDFORD MA 01006

< Prev 1 2 3 4 5 6 7 8 9 10 ... Next >



Step 3: Application Information

- ❑ Indicate which Emission Control Plan Application is required
- ❑ Click “Continue Application” to proceed

DEP Applications

AQ08A - Emission Control Plan Application

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents	6	7	8
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Step 3: Application Information > Page 1 of 8

* indicates a required field.

Select the appropriate Emission Control Plan Applications:

Select the appropriate Emission Control Plan Applications: *

--Select--

--Select--

NOx RACT

VOC RACT

Continue Application »

Save and resume later



Step 3: Application Information

- ❑ Describe your emissions units or activity subject to this plan
- ❑ “Add a row” for each emission unit and provide requested information
- ❑ Click “Add a row”
- ❑ Provide information in the window that opens
- ❑ Click submit
- ❑ Click “Continue Application” to proceed

DEP Applications

AQ08A - Emission Control Plan Application

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents	6	7	8
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Step 3: Application Information > Page 2 of 8

* indicates a required field.

General

Describe the Emission Units or, Activity that is subject to this ECP:

Emission Unit Description

EMISSION UNIT DESCRIPTION

Showing 0-0 of 0

Emission Unit # or Group of Emission Units	Description of Emission Unit	Emission Unit Make/ Model	Emission Unit Design capacity	Description of Pollution Control Device(s) if any	Is the Pollution Control Device Existing or Proposed?
No records found.					

[Add a Row](#) [Edit Selected](#) [Delete Selected](#)

[Continue Application »](#)

EMISSION UNIT DESCRIPTION

*Emission Unit # or Group of Emission Units:

Emission Unit Design capacity:

*Description of Emission Unit:

Description of Pollution Control Device(s) if any:

Is the Pollution Control Device Existing or Proposed?:

[Submit](#) [Cancel](#)

[Save and resume later](#)



Step 3: Application Information

- ❑ “Add a row” for each Material Use Description and provide requested information
- ❑ Click “Add a row”
- ❑ Provide information in the window that opens
- ❑ Click submit
- ❑ For each of the indicated rows with an exclamation point, “edit” each row of the table to provide information
- ❑ Click “Continue Application” to proceed

DEP Applications

AQ08A - Emission Control Plan Application

1 Contact Information

2 Facility Information

3 Application Information

4 Special Fee Provision

5 Documents

6

7

8

Step 3: Application Information > Page 3 of 8

* indicates a required field.

Material Use Description

For each of the indicated rows, please click Edit from the Actions drop-down menu, or check the box next to an indicated row, and click "Edit Selected", to enter the required information.

Showing 1-1 of 1

	Emission Unit # or Group of Emission Units	Description of Fuel, Raw Material or Finished Material	Sulfur Content of Fuel (%)	Nitrogen Content of Fuel (%)	VOC Content of raw material (pounds per gallon solids)	Finished Material VOC content	Finished Material VOC content applicable unit of product	
<input type="checkbox"/>	99995							<div style="border: 1px solid black; padding: 2px; display: inline-block;"> Edit Delete </div>

Add a Row

Edit Selected

Delete Selected

Material Use Description

* Emission Unit # or Group of Emission Units:

Nitrogen Content of Fuel (%):

Finished Material VOC content applicable unit of product:

* Description of Fuel, Raw Material or Finished Material:

VOC Content of raw material (pounds per gallon solids):

Sulfur Content of Fuel (%):

Finished Material VOC content:

Submit

Cancel

Save and resume later



Step 3: Application Information

- Pages of the application will be hidden/ shown based on the type of application you selected.
- Enter a description for the Emission Reduction Strategy for VOC
- Answer “Yes” or “No”
- For each of the indicated rows with an exclamation point, “edit” each row of the table to provide information
- “Add a row” if needed for each ECP Emission Limits - VOC and provide requested information

DEP Applications

AQ08A - Emission Control Plan Application

1 Contact Information2 Facility Information3 Application Information4 Special Fee Provision5 Documents678

Step 3: Application Information > Page 4 of 8

* indicates a required field.

VOC Additional Information

Describe your Emission Reduction Strategy for VOC: *

Are you going to attach a more detailed description for VOC?: *
☐ Yes ☐ No

ECP Emission Limits - VOC

ECP EMISSION LIMITS - VOC

For each of the indicated rows, please click Edit from the Actions drop-down menu, or check the box next to an indicated row, and click "Edit Selected", to enter the required information.

Showing 1-1 of 1

	Emission Unit #/ Group of EU#s	Raw Material or Finished Material Used	Air Contaminant	Emission Limit or Standard	Related Unit(s) of Measure	Applicable Regulation (310 CMR 7.18)	Specify if Other	Approval Number being Modified	Applied ECP Strategy	Specify Other Strategy	Actions
<input type="checkbox"/>	<input type="checkbox"/> 99995										Edit Delete

Add a RowEdit SelectedDelete Selected

ECP EMISSION LIMITS - VOC

* Emission Unit #/ Group of EU#s:

* Raw Material or Finished Material Used:

* Air Contaminant:

* Emission Limit or Standard:

* Related Unit(s) of Measure:

* Applicable Regulation (310 CMR 7.18):

Specify if Other:

Approval Number being Modified:

* Applied ECP Strategy:

Specify Other Strategy:

SubmitCancel



Step 3: Application Information

- ☐ Enter VOC Restricted information
- ☐ For each of the indicated rows with an exclamation point, “edit” each row of the table to provide information
- ☐ “Add a row” if needed for each Emissions - VOC and provide requested information

VOC Restriction Information

Describe any other physical or operational Restriction on the capacity of the equipment to emit VOC:

Emissions - VOC

EMISSIONS - VOC



For each of the indicated rows, please click Edit from the Actions drop-down menu, or check the box next to an indicated row, and click “Edit Selected”, to enter the required information.

Showing 1-1 of 1

<input type="checkbox"/>	Emission Unit #/ Group of EU#s	Air Contaminant	Uncontrolled Potential Emissions (tpy)	Past Actual Emissions (tpy) for previous calendar year	Past Actual Maximum Daily Emissions (pounds) for previous calendar year	Estimated Allowable Emissions once RACT Implemented (tpy)	Does the estimated allowable reflect a proposed restriction in operations (previously described)?
--------------------------	-----------------------------------	-----------------	--	--	---	---	---

☐ 99995

[Add a Row](#) [Edit Selected](#) [Delete Selected](#)

Actions ▾

Edit
Delete

EMISSIONS - VOC

*Emission Unit #/ Group of EU#s: *Air Contaminant: Uncontrolled Potential Emissions (tpy):

*Past Actual Emissions (tpy) for previous calendar year: *Past Actual Maximum Daily Emissions (pounds) for previous calendar year: *Estimated Allowable Emissions once RACT Implemented (tpy):

*Does the estimated allowable reflect a proposed restriction in operations (previously described)?
☐ Yes ☐ No

[Submit](#) [Cancel](#)



Step 3: Application Information

- ❑ “Add a row” if needed for Equipment Details - VOC and provide requested information

If a new air Pollution Control Device(s) (PCD) is being added as part of this application, please add a row(s) for the appropriate equipment type, and complete the supplemental form(s) that will appear after completion of the main application.

EQUIPMENT DETAILS - VOC

Please click “Add a Row” and select the supplemental form(s) associated with your application. Supplemental forms are required for each air pollution control device proposed. Each application will include at least one supplemental form, the Certification form, to be used by the Massachusetts Licensed Professional Engineer (PE) and the Responsible Party for the applicant, to certify the application prior to submission.

- ❑ Enter a description for any proposed equipment not listed in the Equipment Type list

Showing 0-0 of 0

Equipment Type	PCD ID #
No records found.	
Add a Row	Edit Selected Delete Selected

EQUIPMENT DETAILS - VOC

Please click “Add a Row” and select the supplemental form(s) associated with your application. Supplemental forms are required for each air pollution control device proposed. Each application will include at least one supplemental form, the Certification form, to be used by the Massachusetts Licensed Professional Engineer (PE) and the Responsible Party for the applicant, to certify the application prior to submission.

* Equipment Type:
--Select--

* PCD ID #:

[Submit](#) [Cancel](#)

Please describe if your proposed equipment is not listed in Equipment Type List

- ❑ Answer “Yes” or “No”

Are you proposing to install an Air Pollution Control Device that is not on the list provided?:
☐ Yes ☐ No

- ❑ If “Yes” enter an explanation

If YES, please explain in brief:

- ❑ Click "Continue Application" to proceed

[Continue Application »](#)

[Save and resume later](#)



Step 3: Application Information

- ❑ “Add a row” if needed for each Testing Frequency proposed and provide requested information

- ❑ Click “Add a row”

- ❑ Provide information in the window that opens

- ❑ Click submit

- ❑ For each of the indicated rows with an exclamation point, “edit” each row of the table to provide information

- ❑ Click "Continue Application" to proceed

DEP Applications

AQ08A - Emission Control Plan Application

1 Contact Information

2 Facility Information

3 Application Information

4 Special Fee Provision

5 Documents

6

7

8

Step 3: Application Information > Page 8 of 8

* indicates a required field.

Monitoring and Testing

MONITORING AND TESTING

To indicate a plan with multiple test frequencies, please add a row for each testing frequency proposed. For example, one row may list "annual" testing, and the next row may list "other time period" with a specified frequency of "within 30 days of start up".

For each of the indicated rows, please click Edit from the Actions drop-down menu, or check the box next to an indicated row, and click "Edit Selected", to enter the required information.

Showing 1-1 of 1

	Emission Unit #/ Group of EU	Parameter measured or monitored	Method of monitoring	Record Keeping Procedure	Frequency of Data Record	Specify Other Frequency of Data Record	Parameter to be tested	Specify Other Parameter	Frequency of Testing	Specify if other Frequency of testing selected	
<input type="checkbox"/>	<input type="checkbox"/> 99995										Action

Add a Row

Edit Selected

Delete Selected

Continue Application >

WARNING: Add a Row

To indicate a plan with multiple test frequencies, please add a row for each testing frequency proposed. For example, one row may list "annual" testing, and the next row may list "other time period" with a specified frequency of "within 30 days of start up".

*Emission Unit #/ Group of EU:

*Parameter measured or monitored:

*Method of monitoring:

*Record Keeping Procedure:

*Frequency of Data Record:

Specify Other Frequency of Data Record:

*Parameter to be tested:

Specify Other Parameter:

*Frequency of Testing:

Specify if other Frequency of testing selected:

Submit

Cancel

Edit

Delete

Save and resume later

EEA ePlace Portal

18

Step 4: Special Fee Provision

- ☐ If Special Fee Provision is applicable, check the appropriate box and provide requested information

- ☐ Click “Continue Application” to proceed

1	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents & Signatory	6 Review	7
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Step 4: Special Fee Provision > Page 1 of 1

* indicates a required field.

Special Fee Provision

Check if applicable:

Exemption: ?

☐

Exclusion (special agreement or policy): ?

☐

Substitution (ASP/IRP): ?

☐

Double Fee for Enforcement: ?

☐

Hardship payment extension request: ?

☐

[Continue Application »](#)

[Save and resume later](#)



Step 5: Documents

- ❑ Upload all required documents for your application
- ❑ The required documents will be listed on the table
- ❑ To begin attaching documents, click “Browse”

DEP Applications

AQ08A - Emission Control Plan Application

1	2	3 Application Information	4 Special Fee Provision	5 Documents	6 Signatory Authority	7 Review	8
---	---	---------------------------	-------------------------	-------------	-----------------------	----------	---

Step 5: Documents > Page 1 of 1

* indicates a required field.

List of Documents

Documents:

Please upload Required Document(s) which are mandatory to submit this Application:

1. Detailed compliance plan/ schedule

2. Details of a proposed restriction on operations that are part of the RACT Proposed

3. Supplemental - Adsorption Equipment

Attach Documents

When uploading file document(s) the maximum file size allowed is 50 MB.
The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.
.bat;.bin;.dll;.exe;.js;.msi;.sql;.vbs;.ade;.adp;.chm;.cmd;.com;.cpl;.hta;.ins;.isp;.jar;.jse;.lib;.lnk;.mde;.msc;.msp;.mst;.php;.pif;.scr;.sct;.shb;.sys;.vb;.vbe;.vxd;.wsc;.wsf;.wsh are disallowed file types to upload.

Name	Type	Size	Latest Update	Description	Action
No records found.					

Browse

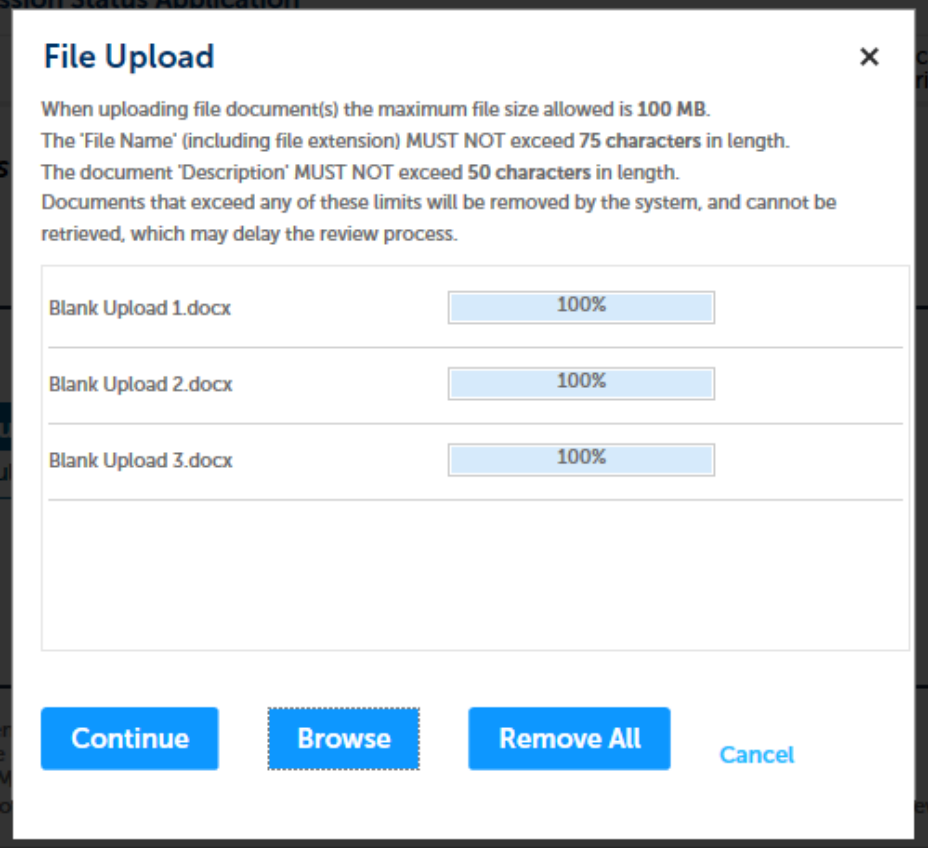
Continue Application »

Save and resume later



Step 5: Documents (Attaching)

- ❑ A “File Upload” window opens
- ❑ Click “Browse”
- ❑ Choose the file(s) you want to attach.
- ❑ When all files reach 100%, click “Continue”



File Upload [X]

When uploading file document(s) the maximum file size allowed is **100 MB**.
The 'File Name' (including file extension) **MUST NOT** exceed **75 characters** in length.
The document 'Description' **MUST NOT** exceed **50 characters** in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.

Blank Upload 1.docx	100%
Blank Upload 2.docx	100%
Blank Upload 3.docx	100%

[Continue] [Browse] [Remove All] [Cancel]



Step 5: Documents (Attaching)

- ☐ Select the document type
- ☐ Provide a description of each document that you uploaded
- ☐ Click “Browse” to add more documents
- ☐ When all documents are uploaded and described, click “Save”

*Type:

File:
invite_1 - Copy - Copy - Copy.png
100%

*Description (Maximum 50 characters):

*Type:

File:
invite_1 - Copy - Copy (2).png
100%

*Description (Maximum 50 characters):

*Type:

File:
invite_1 - Copy - Copy.png
100%

*Description (Maximum 50 characters):




Step 5: Documents (Attaching)

❑ You should see a message that you have successfully attached documents

❑ Review the list of attached documents

❑ When ready, click on “Continue Application” to proceed

DEP Applications



The attachment(s) has/have been successfully uploaded.
It may take a few minutes before changes are reflected.

AQ08A - Emission Control Plan Application

1	2	3 Application Information	4 Special Fee Provision	5 Documents	6 Signatory Authority	7 Review	8
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Step 5: Documents > Page 1 of 1

* indicates a required field.

List of Documents

Documents:

Please upload Required Document(s) which are mandatory to submit this Application:

1. Detailed compliance plan/ schedule

2. Details of a proposed restriction on operations that are part of the RACT Proposed

3. Emission Reduction Strategy Detail

4. Supplemental - Adsorption Equipment

Attach Documents

When uploading file document(s) the maximum file size allowed is 50 MB.
The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.
.bat;.bin;.dll;.exe;.js;.msi;.sql;.vbs;.ade;.adp;.chm;.cmd;.com;.cpl;.hta;.ins;.isp;.jar;.jse;.lib;.lnk;.mde;.msc;.msp;.mst;.php;.pif;.scr;.sct;.shb;.sys;.vb;.vbe;.vxd;.wsc;.wsf;.wsh are disallowed file types to upload.

Name	Type	Size	Latest Update	Description	Action
Document12.docx	Detailed compliance plan/ schedule	10.24 KB	03/19/2023	Test	Actions ▼
Document12.docx	Emission Reduction Strategy Detail	10.24 KB	03/19/2023	Test	Actions ▼

Browse

Continue Application »

Save and resume later



Step 6: Permittee Signature

- ❑ If you indicated yourself as the “Permittee” for this application (refer to contact information slide) then complete the Signatory Authority section

Permittee Signatory Authority

If you are the Permittee for this application, please fill the below section.

* Organization Name:

* Source of Signatory Authority:

* Title:

- ❑ If you are not the Permittee, then please click on “Continue Application” to proceed

Continue Application »

Save and resume later



Step 7: Review

- ❑ The entire application is shown on a single page for your review
- ❑ If you note something you want to change, click “Edit Application”
- ❑ Otherwise, continue to the bottom of the page

Home

DEP Applications

1 2 3 Application Information 4 Documents 5 Special Fee Provision 6 Review 7 Application Submitted

Step 6: Review

[Continue Application »](#) [Save and resume later](#)

Please review all the information before submitting. Once this application has been submitted, you will not be able to make changes. To make changes you will need to contact the agency directly.

Review and Certification

[Edit Application](#)

Permittee

Individual
JONA KUCI
1 Winter St.
Boston, MA, 01208
United States
Use Login Information: Yes

Telephone #: 111-111-1111
E-mail: jona.kuci@mass.gov

Permittee Company

Application Contributors

Showing 0-0 of 0

Contact Type	Name	Organization Name	Contact Person	Action
No records found.				

Facility Information

TEST | 1 Winter Street Boston MA 11111
DEP Facility ID: mjh
DEP Region: NE
Message: null
Facility Record ID: 21-FAC-017276

Additional Information

Additional Information:

Documents

Documents:

Attachment

Please upload 3 Required Document(s) which are mandatory to submit this Application: 1. Local Authority Approval 2. MassDEP Application Form 3. Site Plan



Step 7: Review

- ☐ Read the Certification Statement
- ☐ Click the check the box to complete your certification
- ☐ Click on “Continue Application” to proceed with the submittal of your application

Application Submitter

Individual
Testing Eipas
Melrose, MA, 01928

Telephone #:123-123-2323
E-mail:testing@eipas.com

I certify that I am familiar with the work proposed and that to the best of my knowledge and belief the information contained in this application is true, complete, and accurate.

☐ By checking this box, I agree to the above certification.

Date:

[Continue Application »](#)

[Save and resume later](#)



ATTENTION!!!

- ❑ If you are the Permittee for this Application, next the system will take you to the [Payment Step](#)
 - ❑ Once the payment is completed then the Agency will start review of your application
-
- ❑ If you are not the Permittee for this Application, next the system will submit the initial application.
 - ❑ A notification will be sent to the Application Submitter and to the individual who is identified as the Permittee for this application.
 - ❑ Permittee must complete the [Permittee Certification Step](#)
 - ❑ Next the payment can be made either by the Permittee or Application Submitter
 - ❑ **NOTE** – The review of the application by Agency will start once the Permittee Certification and payment of the application are completed.



Step 8: Pay Fees

- ❑ Both online payment and pay by mail are available
- ❑ Online payment will require a service charge
- ❑ Click the appropriate box to continue

DEP Applications

AQ08A - Emission Control Plan Application

1

2

3

4

5 Documents

6 Signatory Authority

7 Review

8 Pay Fees

9 Application Submitted

Step 8: Pay Fees

Listed below is the fee for the authorization that you are applying for. The following screen will display your total fees.

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 permit 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.

Application Fees

Fees	Amount
Emission Control Plan NOx/VOC State Only Review	\$1,880.00
Total Fees	\$1,880.00

Pay Online »

Pay by Mail »



Pay Online

- ❑ If you choose “Pay Online”, you will be brought to this screen
- ❑ Provide all payment and billing information
- ❑ Accept the terms and conditions and click submit
- ❑ You will be e-mailed a receipt

Billing Information

First Name
Enter First Name

Last Name
Enter Last Name

Street
Enter Street

City
Enter City

State/Territory
Select State

Zip
Enter Zip

Phone Number
() - -

Email
Enter Email Address

Confirm Email
Enter Email Address

Payment Information

Credit/Debit Card Electronic Check/ACH

Card Type
Select Card Type

Card Number
TEST MODE

CVV Code
123

Expiration
01 2011

Check to accept both the Commonwealth of Massachusetts and nCourt Terms Agreements.
☐ I Accept

Commonwealth of Massachusetts Terms Agreement

I authorize the charge to my credit card for the amount shown above. I agree to pay the total amount above according to the card issuer agreement. By checking the box below, I certify that I am an authorized user for the above referenced credit card account.

[nCourt Terms Agreement](#)

Back

Please Verify above information before the Submit Payment Button is pressed. Do not click Submit Payment button more than one time.



Pay by Mail

- ❑ If you choose “Pay by mail”
- ❑ Check your email for instructions
- ❑ Your application will not be reviewed until payment is received

Payment online: If you have paid online by credit or ACH you will receive an additional notification from the epayment vendor that your payment is complete. Review of your application will begin. That notification will include a Reference ID # for your records.

Pay by Mail: If you chose the "Pay by Mail" option, please make your payment in the form of a check or money order made payable to the Commonwealth of Massachusetts. Do not send cash. You must include your Application Number 20-WM05-0047-APP on the check or money order that must be sent to the address below.

Department of Environmental Protection
PO Box 4062
Boston, MA 02211

Review of your application will not begin until after your payment has been received and processed.



Step 9: Submission Successful!


- ❑ When you submit your application, you will receive a Record ID so you can track the status of your application online
- ❑ Upon submission of your application please make sure to check your email for system notifications

DEP Applications

AQ08A - Emission Control Plan Application

1	2	3	4	5 Documents	6 Signatory Authority	7 Review	8 Pay Fees	9 Application Submitted
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Step 9: Application Submitted

 Successfully Completed.

Thank you for using our online services.
Your Record Number is 23-AQ08A-0004-APP.


You will need this number to check the status of your application.




Permittee Certification

- ❑ If you are not the Permittee for this Application, system will send a notification from eipas@mass.gov
- ❑ Review the email and follow all steps accordingly

Application Submission Notification 23-AQ33-0005-APP

 EIPAS <eipas@mass.gov>
To: Kalagarla, Sneha (EEA)

 AQ33-POR_20230207_165727.pdf
48 KB

NOTICE DATE: 2/7/2023

Thank you for submitting your online application form for record type: AQ33 - LPA/CPA Consolidation Application. Your Record Number is: 23-AQ33-0005-APP.

Based on provided application's contact information, this application is required to be accepted by all parties below before the review process will begin. As the application submitter, SNEHA DEEPU L, please work with all parties to sign off certification applications which have been initiated. Also please refer to below instructions to continue:

Please note: Before accepting, review the attached Proof of Record, also to review the supporting attachments and the additional proof of records for the supplemental forms (if applicable), log in to EEA ePlace Portal and click on My Record tab. Click the Record Number provide above and click on Record Info and select Attachments to view all the additional documents.

When all certification applications are submitted, an updated notification will be sent out with further instructions.

1. Permittee Certification:

As the application's Permittee, **STEVE KENYON**, please review and submit the certification application **23TMP-000209**

NOTE: All certification applications can be found by login to EEA ePLACE Portal and under My Records tab.

You can track the progress of your submission through the review process at the following link: <https://testaca.eea.mass.gov/citizenaccess/>.

Need Help using the Web Portal? For technical assistance in using the portal <https://testaca.eea.mass.gov/citizenaccess/> to submit or access your application, please call the ePLACE Help Desk Team at (844) 733-7522 or (844) 73-ePLAC between the hours of 7:30 AM-5:00 PM Monday-Friday, with the exception of all Commonwealth and Federal observed holidays. If you prefer, you can also e-mail us at ePLACE_helpdesk@state.ma.us.

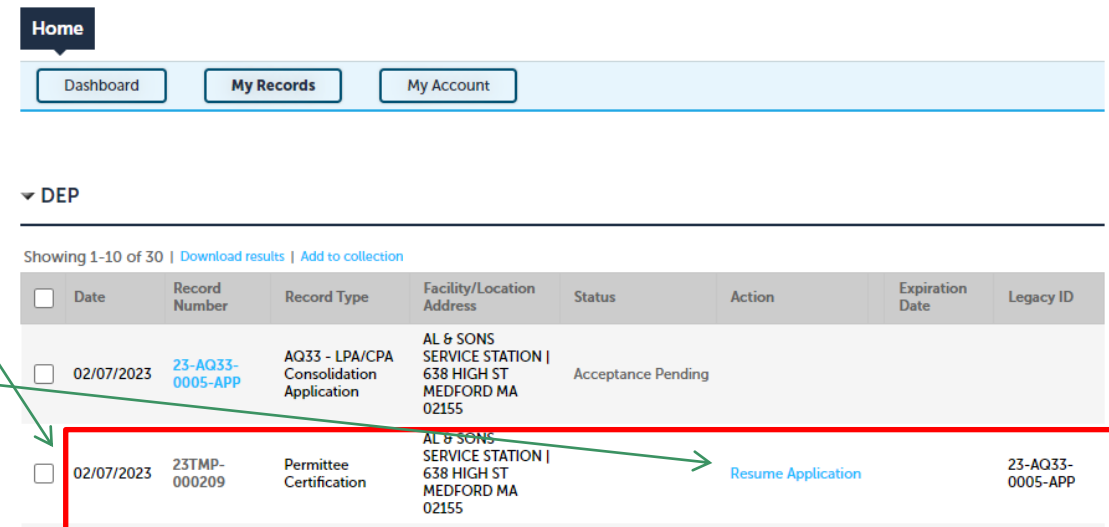
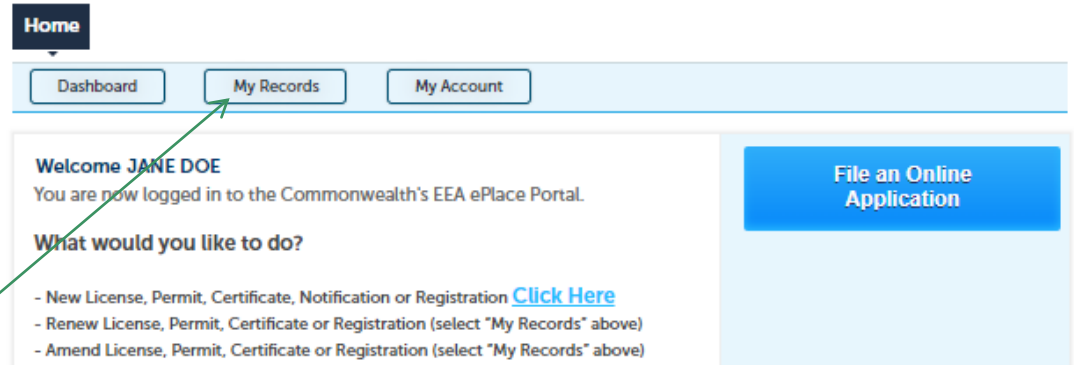


Permittee Certification

- ❑ Log on to EEA ePlace portal
 - <https://eplace.eea.mass.gov/citizenaccess>
- ❑ Go to “My Records” page to the Permittee Certification Record
- ❑ The Permittee Certification Record will be listed along with its associated Application Number
- ❑ Select “Resume Application”



EEA ePlace Portal



Permittee Certification

- ❑ The facility information and Application details are populated
- ❑ Please verify the information

Permittee Certification

1 Application Information	2 Review	3 Application Submitted
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Step 1: Application Information > Page 1 of 1 * indicates a required field.

Facility Information

Please identify the facility for this application. In the "Name" box enter the facility name or a part of it and then click the "Search" button to see a list of results. Click the button to the left of your facility and then click the "Select" button. If your facility is not on the list, click "Cancel" and try searching by address instead of Name. If you cannot find your facility, type in the data for the boxes with an asterisk and go on to the next section without clicking "Search". CAUTION some applications are restricted to existing Facilities and do not allow creating new ones. If you cannot find your Facility or add a new one, please contact the appropriate DEP Regional Office.

* Facility Name:
AL & SONS SERVICE STATION

* Street #
638

* Street Name:
HIGH ST

Street Name 2

* City:
MEDFORD

* State:
MA

* Zip:
02155

Latitude
42.42032281

Longitude
-71.14176082

DEP Facility ID:
136363

AQ ID:

HW ID:
MAD982199739

TRI ID:

LES ID:

PWS ID:

Search Clear

Application Summary

Application Number:
23-AQ33-0005-APP

Application Name:
AQ33 - LPA/CPA Consolidation Application

Application Submitted Date:
02/07/2023



Permittee Certification

- ❑ Review the Proof of Record i.e., copy of the submitted Application
- ❑ Please read the instructions and proceed accordingly
- ❑ Click “Continue Application” to proceed

Application Detail Report

When uploading file document(s) the maximum file size allowed is 50 MB.
The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.
The document 'Description' MUST NOT exceed 50 characters in length.
Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process.
.bat;.bin;.dll;.exe;.js;.msi;.sql;.vbs;.ade;.adp;.chm;.cmd;.com;.cpl;.hta;.ins;.isp;.jar;.jse;.lib;.lnk;.mde;.msc;.msp;.mst;.php;.pif;.scr;.sct;.shb;.sys;.vb;.vbe;.vxd;.wsc;.wsf;.wsh are disallowed file types to upload.

Name	Type	Size	Latest Update	Description	Action
AQ33-POR_20230207_165715.pdf	Proof of Record	48.07 KB	02/07/2023	Application - 23-AQ33-0005-AP.. read more	Actions ▾

Permittee Acceptance

By accepting this application, you are certifying that you have reviewed the application (copy of application is attached in the above section). To review the additional supporting attachments and any additional proof of records for the supplemental forms (if applicable), please click save and resume button at the end of the page. When in the "My Records" page, click on the Record number for this application and click on "Record Info", select attachments to review the documents.

If you do not accept this application, please provide reason and work with the application submitter to make the necessary changes/updates.

• As the Permittee do you accept this application?:
☒ Yes ☐ No

Permittee Signatory Authority

If you are the Permittee for this application, please fill the below section.

Organization Name: *

Source of Signatory Authority: *

Title: *

Permittee Certification

Certification Statement:

I certify that I have personally examined the foregoing and am familiar with the information contained in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment.

By checking this box, I agree to the above certification: *
☐

Printed Name: *

Date: *

Continue Application »

Save and resume later



Permittee Certification

- ❑ The entire application is shown on a single page for your review
- ❑ If you note something you want to change, click “Edit Application”
- ❑ Otherwise, click on “Continue Application” to proceed with the submittal of your application

Permittee Certification

1 Application Information 2 Review 3 Application Submitted

Step 2: Review

[Continue Application »](#) [Save and resume later](#)

Please review the information below prior to submission. After the application has been submitted, you will not be able to make changes. To make changes after submittal you must contact the Department directly.

Review and Certification

[Edit Application](#)

Facility Information

AL & SONS SERVICE STATION | 636 HIGH ST MEDFORD MA 02155
DOP Facility ID: 136363
DOP Region: NE
HW ID: 66098709059
Facility Record ID: 25-0AC-006581

Application Summary

Application Number: 25-AQ33-0005-APP
Application Name: AQ33 - LPA/CFA Consolidation Application
Application Submitted Date: 02/07/2025

Permittee Acceptance

As the Permittee do you accept this application? No
Comment: text

Permittee Signatory Authority

Organization Name:
Source of Signatory Authority:
Title:

Permittee Certification

Certification Statement: I certify that I have personally examined the foregoing and am familiar with the information contained in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment.

By checking this box, I agree to the above certification: No

Printed Name:
Date:

Permittee

Individual:
JANE DOE
1 Wester St
Boston, MA, 02118
United States

Telephone #: 123-123-1234
E-mail: jane.doe@gmail.com

[Continue Application »](#) [Save and resume later](#)



Permittee Certification - Submission Successful!


- ❑ When you submit your certification, you will receive a Record ID as confirmation
- ❑ Upon submission of your certification the system will send a notification with the complete application which include the Proof of Record of submitted Application and Permittee Certification
- ❑ Read Instructions on this notification for payment options and steps

DEP Applications

AQ08A - Emission Control Plan Application

1	2	3	4	5 Documents	6 Signatory Authority	7 Review	8 Pay Fees	9 Application Submitted
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Step 9: Application Submitted



 Successfully Completed.

Thank you for using our online services.
Your Record Number is 23-AQ08A-0004-APP.

You will need this number to check the status of your application.

Application Submission Successful 23-AQ33-0005-APP

 EIPAS <ejpas@mass.gov>
To: sneha9717@gmail.com, Kalagarla, Sneha (EEA); tewst@test.com

 23-CERT-000018_POR.pdf 60 KB  23-AQ33-0005-APP_POR.pdf 49 KB

NOTICE DATE: 2/8/2023

Thank you for submitting all certification applications for record type: **AQ33 - LPA/CPA Consolidation Application**. Your Record Number is: **23-AQ33-0005-APP**.

The application is now ready for Payment Processing. Please log back into the EEA ePLACE Portal. You will find your application number under My Records tab and can proceed to pay the permit fee by clicking on the Pay Fee Due link. More details on payment methods are below:

Payment Online: If you choose to pay online by credit or ACH you will receive an additional notification from the epayment vendor that your payment is complete. Review of your application will begin. That notification will include a Reference ID # for your records.

Pay by Mail: If you choose the "Pay by Mail" option, please make your payment in the form of a check or money order made payable to the Commonwealth of Massachusetts. Do not send cash. You must include your Record Number 23-AQ33-0005-APP on the check or money order that must be sent to the address below.

Department of Environmental Protection
PO Box 4062
Boston, MA 02211

Review of your application will not begin until after your payment has been received and processed.

Fee Exempt Status or Hardship Status Requested: If your application indicated a Fee Exempt Status, MassDEP will review your request. If your fee exempt status is not approved you will be contacted with instructions for paying the fee. If your application indicated a request for hardship status, your request will be reviewed and you will be contacted with the final determination.

To meet Federal Reporting requirements for EPA's Cross-Media Electronic Reporting Rule (CROMERR), you are required to print this entire email, and to sign the below certifying that you have submitted the Application identified in this email.

This form must be signed and mailed to the address below. Failure to complete this step may result in delay of review of your application.

I certify that I have submitted application # 23-AQ33-0005-APP

Printed Name _____ Signature _____ Date _____

Please return signed document to:
MassDEP
ePLACE Confirmations
100 Cambridge St, Suite 900
Boston, MA 02114



EEA ePlace Portal

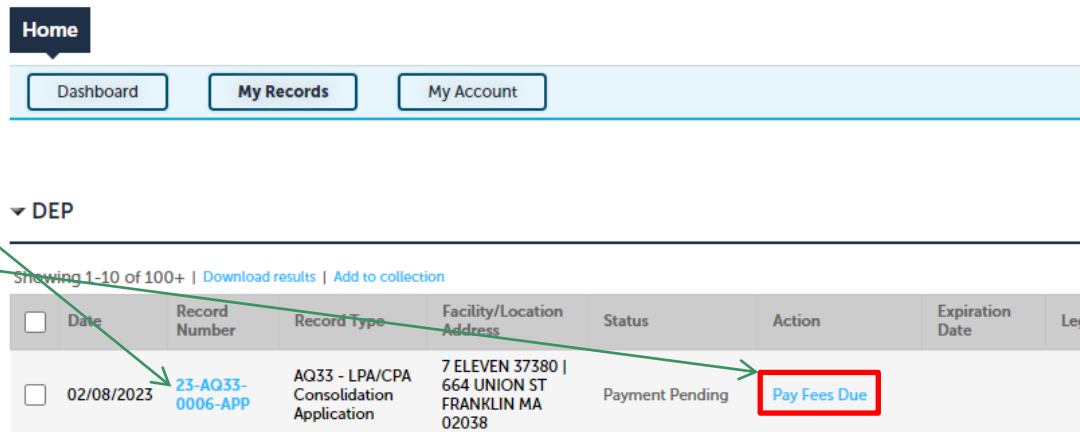
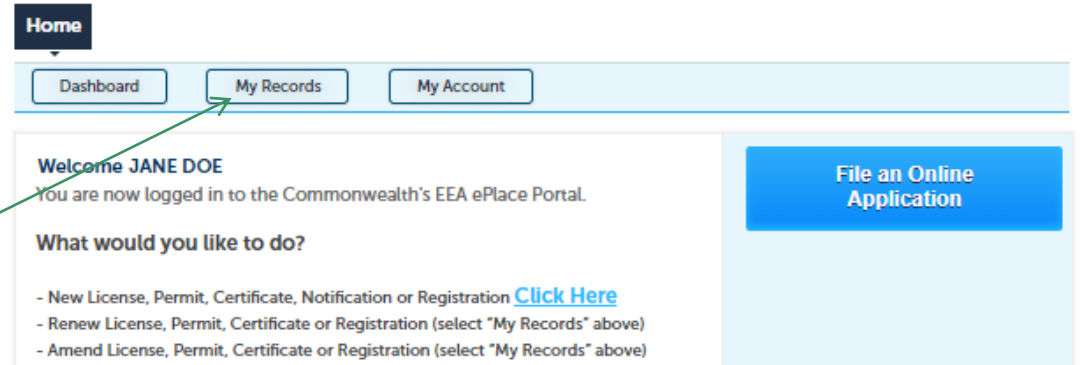
To Pay Fees Online

- ❑ **Note** - The payment can be made either by the Permittee or Application Submitter

- ❑ Go to “My Records”

- ❑ The Application Record will be listed

- ❑ Select “Pay Fees Due”



Pay Fees Online

- ❑ Select Pay Online option to proceed

DEP Applications

AQ08A - Emission Control Plan Application

1	2	3	4	5 Documents	6 Signatory Authority	7 Review	8 Pay Fees	9 Application Submitted
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Step 8: Pay Fees

Listed below is the fee for the authorization that you are applying for. The following screen will display your total fees.

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 permit 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.

Application Fees

Fees	Amount
Emission Control Plan NOx/VOC State Only Review	\$1,880.00
Total Fees	\$1,880.00

Pay Online »

Pay by Mail »



Pay Online

- ❑ If you choose “Pay Online”, you will be brought to this screen
- ❑ Provide all payment and billing information
- ❑ Accept the terms and conditions and click submit
- ❑ You will be e-mailed a receipt

Billing Information

First Name
Enter First Name

Last Name
Enter Last Name

Street
Enter Street

City
Enter City

State/Territory
Select State

Zip
Enter Zip

Phone Number
() - -

Email
Enter Email Address

Confirm Email
Enter Email Address

Payment Information

Credit/Debit Card Electronic Check/ACH

Card Type
Select Card Type

Card Number
TEST MODE

CVV Code
123

Expiration
01 2011

Check to accept both the Commonwealth of Massachusetts and nCourt Terms Agreements.
☐ I Accept

Commonwealth of Massachusetts Terms Agreement

I authorize the charge to my credit card for the amount shown above. I agree to pay the total amount above according to the card issuer agreement. By checking the box below, I certify that I am an authorized user for the above referenced credit card account.

[nCourt Terms Agreement](#)

Back

Please Verify above information before the Submit Payment Button is pressed. Do not click Submit Payment button more than one time.



Payment Submission Successful!


- Once Payment is completed, system will display the successfully completed message along with your Record ID

DEP Applications

AQ08A - Emission Control Plan Application

1	2	3	4	5 Documents	6 Signatory Authority	7 Review	8 Pay Fees	9 Application Submitted
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Step 9: Application Submitted

 Successfully Completed.

Thank you for using our online services.
Your Record Number is 23-AQ08A-0004-APP.

You will need this number to check the status of your application.

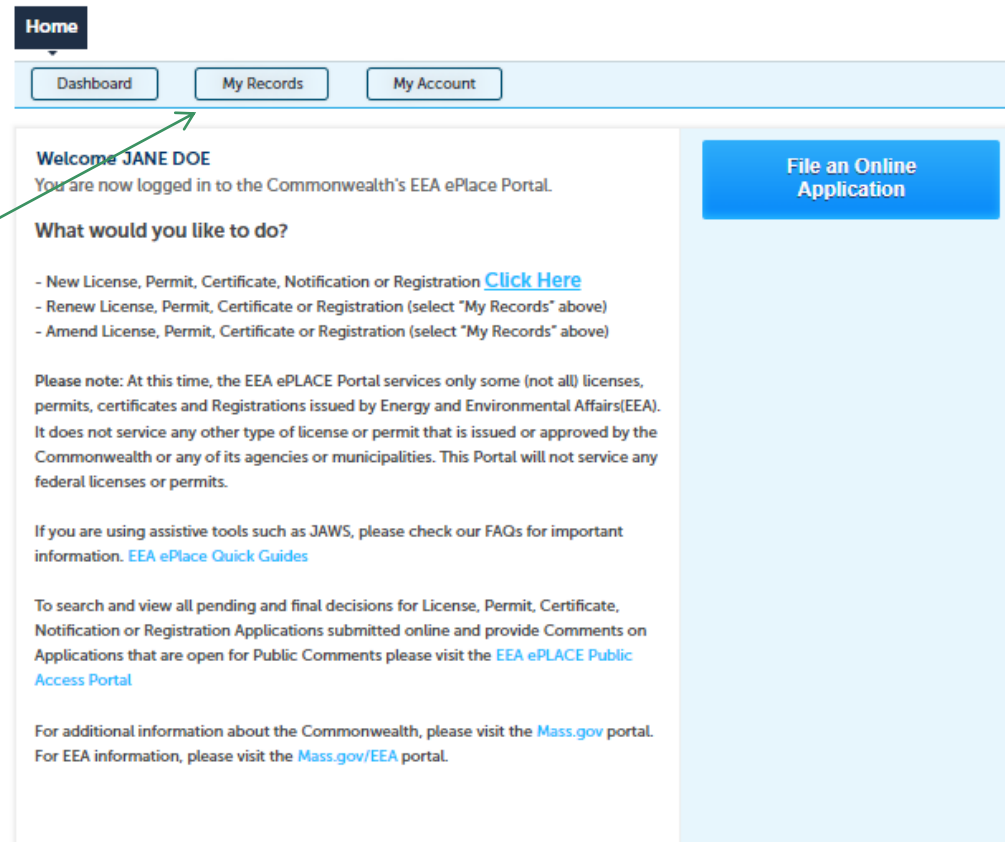


To check the status of an application

- ❑ Log on to EEA ePlace portal

➤ <https://eplace.eea.mass.gov/citizenaccess>

- ❑ Go to your “My Records” page to see and/or track the status of an application



Questions?

For technical assistance:

- ▶ Contact the ePlace Help Desk Team at (844) 733-7522
- ▶ Or send an email to: ePLACE_helpdesk@state.ma.us

For business related questions, please visit the link below:
[AQ 08: Emission Control Plan \(VOC or NOx RACT\) | Mass.gov](#)



EEA ePlace Portal