
AQ01 - Limited Plan Approval for Process Emission Unit(s) Application

MassDEP, Bureau of Air & Waste





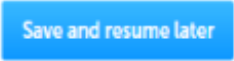

EEA ePlace Portal

Overview

- ❑ This presentation is to assist in completing a new **AQ01 - Limited Plan Approval for Process Emission Unit(s) Application**
- ❑ Purpose of this application is to obtain an approval before beginning work on process equipment that emits between 1 and 10 tons per year of an air contaminant
- ❑ MassDEP issues an approval of a Limited Plan Application (LPA) to limit increases in air contaminant emissions and protect public health, welfare and the environment. A plan application is required if you are proposing construction, substantial reconstruction, or alteration of a facility that has the potential to cause or contribute to a condition of air pollution
- ❑ This presentation will take you screen by screen through the EEA ePLACE online permitting application process



General Navigation

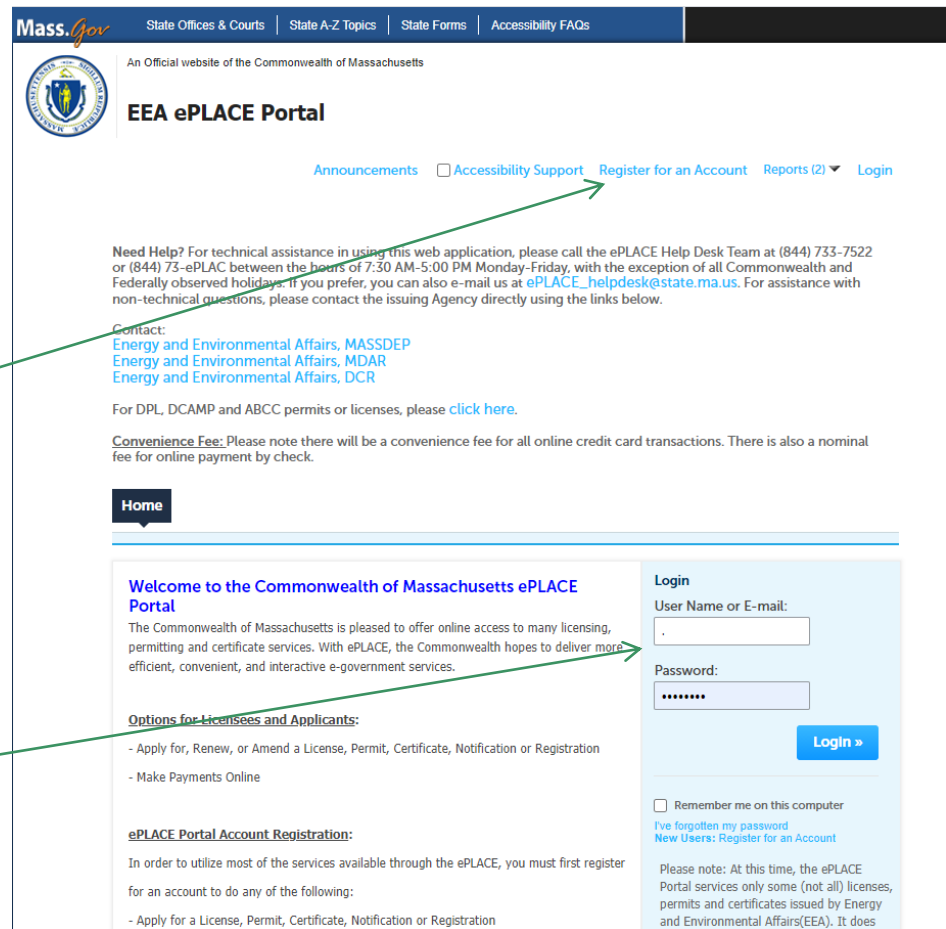
- ❑ Always Click  to move to the next page.
- ❑ Do NOT use the Browser Back Button  as this will take you out of the system
- ❑ Any field with a red asterisk (*) is required before you can move off the page.
- ❑ Click  to save your work and resume at a later time.
- ❑ Click on the tool tips where applicable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



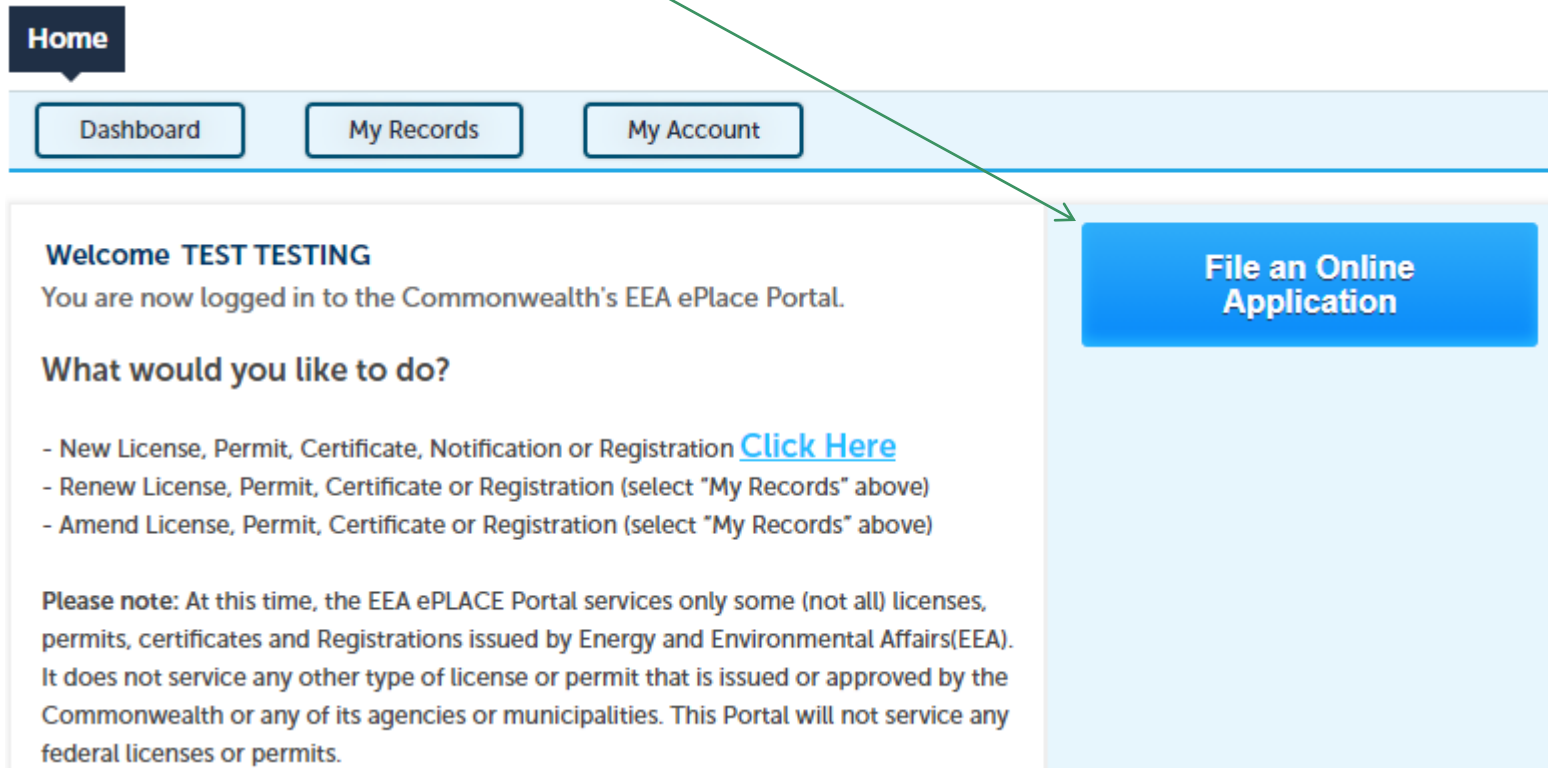
The screenshot shows the EEA ePLACE Portal homepage. At the top is a navigation bar with links for State Offices & Courts, State A-Z Topics, State Forms, and Accessibility FAQs. Below this is the EEA ePLACE Portal header. A green arrow points from the 'Register for an Account' link in the top navigation bar to the 'Welcome to the Commonwealth of Massachusetts ePLACE Portal' section. Another green arrow points from the 'Log into your account' instruction to the 'Login' section on the right. The 'Welcome' section includes a 'Home' button and a 'Need Help?' section with contact information. The 'Login' section has fields for 'User Name or E-mail' and 'Password', a 'Login' button, and a 'Remember me' checkbox. Below the login section is a 'New Users: Register for an Account' link. The 'Options for Licensees and Applicants' section lists links for applying for, renewing, or amending licenses, permits, certificates, notifications, or registrations, and for making payments online. The 'ePLACE Portal Account Registration' section explains that users must first register for an account to utilize most services and lists the option to apply for a license, permit, certificate, notification, or registration.



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.

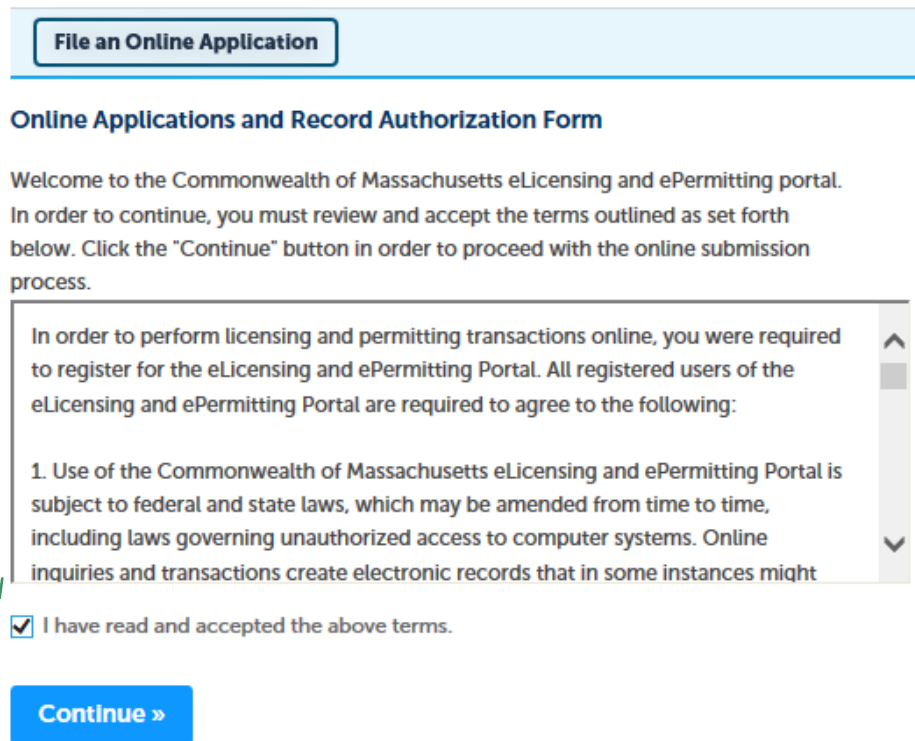
File an Online Application



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 AQ01 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 AQ01 Application

- ❑ Select “AQ01 - Limited Plan Approval for Process Emission Unit(s) 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
- ☐ AQ 50% or 25% Facility Emission Cap Application
- ☐ 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 Application
- ☐ AQ08B - Emission Control Plan Application
- ☐ AQ22 - Emission Control Plan 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 filling 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: MA * 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

- ❑ Enter either the SIC Code or NAICS code for that best describes the facility. Use the links provided if you need assistance in finding the correct code

- ❑ Click “Continue Application” to proceed

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) Application

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents	6	7	8
-----------------------	------------------------	---------------------------	-------------------------	-------------	---	---	---

Step 3: Application Information > Page 1 of 9

* indicates a required field.

Facility Related Information

For more information about:

1. Standard Industrial Classification (SIC) Code, please visit <https://www.osha.gov/pls/imis/sicsearch.html>

2. North American Industry Classification System (NAICS) Code, please visit <https://www.census.gov/eos/www/naics/index.html>

*Note: Please enter either SIC or NAICS for this facility, at least one is required.

Standard Industrial Classification (SIC) Code: ?

North American Industry Classification System (NAICS) Code: ?

Continue Application »

Save and resume later



Step 3: Application Information

- ❑ **List of Existing Approvals:** Provide a list of existing plan approvals for this facility
 - ❑ Click “Add a Row”
 - ❑ Enter information accordingly and click “Submit”
 - ❑ Repeat the steps above to add multiple rows
- ❑ **Equipment Description:** Provide a description of the project. If more space is needed, attach a more detailed project description to the application and answer “Yes” to the question. Otherwise, answer “No”

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) Application

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents	6	7	8
-----------------------	------------------------	---------------------------	-------------------------	-------------	---	---	---

* indicates a required field.

Step 3: Application Information > Page 2 of 9

List of Existing Approvals

LIST OF EXISTING APPROVALS
 List ALL existing Air Quality Plan Approvals, Emission Cap Notifications, and 310 CMR 7.26 Compliance Certifications and associated facility-wide emission caps, if any, for this facility in the table below. If you hold a Final Operating Permit for this facility, you may leave this table blank.

Showing 0-0 of 0

Approval type	Other Approval type	Is this proposed project modifying or replacing previously approved equipment?	Approval Number(s)	Transmittal Number(s) (If Applicable)	Air Contaminant	Specify	Existing Facility-Wide Emission Cap(s) Per Consecutive 12 month Time Period (Tons)
No records found.							

Add a Row
Edit Selected
Delete Selected

Equipment Description

Note that per 310 CMR 7.02, MassDEP can issue a Plan Approval only for emissions that are representative of Best Available Control Technology (BACT) section: Best Available Control Technology (BACT) Emissions. <http://www.mass.gov/eea/agencies/massdep/air/regulations/air-quality>

*** Provide a Brief description of the proposed project, including relevant details:**

Are you going to attach a more detailed project description?:
☐ Yes ☐ No

*** Does any new fuel burning equipment associated with the process have a maximum heat input of greater than 10 MMBtu?:**
☐ Yes ☐ No

LIST OF EXISTING APPROVALS
 List ALL existing Air Quality Plan Approvals, Emission Cap Notifications, and 310 CMR 7.26 Compliance Certifications and associated facility-wide emission caps, if any, for this facility in the table below. If you hold a Final Operating Permit for this facility, you may leave this table blank.

*Approval type: --Select--

Approval Number(s):

Specify:

Other Approval type:

Transmittal Number(s) (If Applicable):

Existing Facility-Wide Emission Cap(s) Per Consecutive 12 month Time Period (Tons):

Is this proposed project modifying or replacing previously approved equipment?:
☐ Yes ☐ No

Air Contaminant: --Select--

Submit
Cancel



Step 3: Application Information

- ❑ **Detail of Proposed Project:** Provide a list of equipment proposed in this application

Details of Proposed Project

DETAIL OF PROPOSED PROJECT

Complete the table(s) below to summarize the details of each Emission Unit being proposed.

Showing 0-0 of 0

Emission Unit No	Process Type	Specify If Other	Description of Proposed Equipment Including Manufacturer and Model Number or Equivalent	Maximum Design Capacity	Associated Fuel Burning Equipment	Air Contaminants	Specify	Uncontrolled PTE per 12 month period (tons per yr)
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No records found.

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

- ❑ Click "Add a Row"
- ❑ Enter information accordingly and click "Submit"

- ❑ Repeat the steps above to add multiple rows

Pollution Control Device (PCD) Information

* Are you going to connect the new/modified equipment to an existing o
☐ Yes ☐ No

[Continue Application »](#)

DETAIL OF PROPOSED PROJECT

Complete the table(s) below to summarize the details of each Emission Unit being proposed.

*Emission Unit No: <input type="text"/>	*Process Type: <input type="text"/>	Specify If Other: <input type="text"/>
*Description of Proposed Equipment Including Manufacturer and Model Number or Equivalent: <input type="text"/>	*Maximum Design Capacity: <input type="text"/>	*Associated Fuel Burning Equipment: <input type="text"/>
*Air Contaminants: <input type="text"/>	Specify: <input type="text"/>	*Uncontrolled PTE per 12 month period (tons per yr): <input type="text"/>

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

[Save and resume later](#)

- ❑ Pollution Control Device (PCD) Information

- ❑ Click "Continue Application" to proceed



Step 3: Application Information

- ❑ **Proposed Pollution Controls:** Provide a summary of the details of each PCD being proposed in this application

- ❑ Click "Add a Row"

- ❑ Enter information accordingly and click "Submit"

- ❑ Repeat the steps above to add multiple rows

- ❑ Click "Continue Application" to proceed

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) 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 9

* indicates a required field.

Air Pollution Control Device (PCD)

PROPOSED POLLUTION CONTROL

Complete the table(s) below to summarize the details of each PCD being proposed. Note: If you are proposing one or more Air Pollution Control Devices (PCDs), you must also submit the applicable Supplemental Form(s).

Showing 0-0 of 0

Pollution Control Device #	New or Existing?	Pollution Control Device Type	Pollution Control Device Type - Other	Description of PCD	Air Contaminant(s) Controlled	Specify if Other	CE % by Weight	DE % by weight	OCE % Weight
No records found.									

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

[Continue Application »](#)

PROPOSED POLLUTION CONTROL

Complete the table(s) below to summarize the details of each PCD being proposed. Note: If you are proposing one or more Air Pollution Control Devices (PCDs), you must also submit the applicable Supplemental Form(s).

Pollution Control Device #: New or Existing?: Pollution Control Device Type:

Pollution Control Device Type - Other: Description of PCD: Air Contaminant(s) Controlled:

Specify if Other: CE % by Weight: DE % by weight:

OCE % Weight:

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

[Resume later](#)



Step 3: Application Information

❑ Project Configuration

- ❑ Click "Add a Row"
- ❑ Enter information accordingly and click "Submit"
- ❑ Repeat the steps above to add multiple rows
- ❑ Click "Continue Application" to proceed

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) Application

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents	6	7	8
-----------------------	------------------------	---------------------------	-------------------------	-------------	---	---	---

Step 3: Application Information > Page 4 of 9

* indicates a required field.

Project Configuration

PROJECT CONFIGURATION

Showing 0-0 of 0

Emission Unit No	PCD #	Stack #
No records found.		

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

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

PROJECT CONFIGURATION

*Emission Unit No: PCD #: Stack #:

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



Step 3: Application Information

- Stack Information:
Provide a list and description of the stacks proposed in this application

- Click "Add a Row"
- Enter information accordingly and click "Submit"
- Repeat the steps above to add multiple rows

- Click "Continue Application" to proceed

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) Application

1 Contact Information2 Facility Information3 Application Information4 Special Fee Provision5 Documents678

Step 3: Application Information > Page 5 of 9

* indicates a required field.

Stack Information

STACK DESCRIPTION
If the proposed process has no stack (emissions vented through general room ventilation), then no stack information is required. Complete the table below to summarize the details of the proposed project's stack configuration. Note: Discharge must meet Good Air Pollution Control Engineering Practice. When designing stacks, special consideration must be given to nearby structures and terrain to prevent emissions downwash and adverse impacts upon sensitive receptors. Stack must be vertical, must not impede vertical gas flow, and must be a minimum of 10 feet above rooftop or fresh air intake, whichever is higher. Complete the table below to summarize the details of the proposed project's stack configuration. Note: Discharge must meet Good Air Pollution Control Engineering Practice. When designing stacks, special consideration must be given to nearby structures and terrain to prevent emissions downwash and adverse impacts upon sensitive receptors. Stack must be vertical, must not impede vertical gas flow, and must be a minimum of 10 feet above rooftop or fresh air intake, whichever is higher.

Showing 0-0 of 0

Stack #	Stack Height Above Ground (feet)	Stack Height Above Roof (feet)	Stack Exit Diameter or Dimensions (inches)	Exhaust Gas Exit Temperature Range(Degrees Fahrenheit)	Exhaust Gas Exit Velocity Range (feet per second)	Stack Liner Material
No records found.						

Add a Row Edit Selected Delete Selected

Continue Application »

STACK DESCRIPTION
If the proposed process has no stack (emissions vented through general room ventilation), then no stack information is required. Complete the table below to summarize the details of the proposed project's stack configuration. Note: Discharge must meet Good Air Pollution Control Engineering Practice. When designing stacks, special consideration must be given to nearby structures and terrain to prevent emissions downwash and adverse impacts upon sensitive receptors. Stack must be vertical, must not impede vertical gas flow, and must be a minimum of 10 feet above rooftop or fresh air intake, whichever is higher. Complete the table below to summarize the details of the proposed project's stack configuration. Note: Discharge must meet Good Air Pollution Control Engineering Practice. When designing stacks, special consideration must be given to nearby structures and terrain to prevent emissions downwash and adverse impacts upon sensitive receptors. Stack must be vertical, must not impede vertical gas flow, and must be a minimum of 10 feet above rooftop or fresh air intake, whichever is higher.

*Stack #: *Stack Height Above Ground (feet): *Stack Height Above Roof (feet):

*Stack Exit Diameter or Dimensions (inches): *Exhaust Gas Exit Temperature Range(Degrees Fahrenheit): *Exhaust Gas Exit Velocity Range (feet per second):

*Stack Liner Material:

and resume later



Step 3: Application Information

- ❑ Add a description of the proposed monitoring and recordkeeping for each proposed emission unit and each fuel use
- ❑ Click "Add a Row"
- ❑ Enter information accordingly and click "Submit"
- ❑ Repeat the steps above to add multiple rows
- ❑ Click "Continue Application" to proceed

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) Application

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents	6	7	8
-----------------------	------------------------	---------------------------	-------------------------	-------------	---	---	---

Step 3: Application Information > Page 6 of 9

* indicates a required field.

Monitoring and Recordkeeping Procedures

MONITORING AND RECORDKEEPING

Complete the table below to summarize the details of the proposed project's monitoring and record keeping procedures. Proposed record keeping procedures need to be able to demonstrate your compliance status with regard to all limitations/restrictions proposed herein. Record keeping may include, but is not limited to, hourly or daily logs, meter charts, time logs, purchase records, raw material records, etc

Showing 0-0 of 0

Emission Unit/PCD #	Method of Monitoring	Parameter Monitored	Other	Frequency of Monitoring	Frequency of Monitoring Hours	Record Keeping Procedures	Frequency of Data Record	Frequency of Data Record Hours
No records found.								

Add a Row **Edit Selected** **Delete Selected**

Continue Application »

MONITORING AND RECORDKEEPING

Complete the table below to summarize the details of the proposed project's monitoring and record keeping procedures. Proposed record keeping procedures need to be able to demonstrate your compliance status with regard to all limitations/restrictions proposed herein. Record keeping may include, but is not limited to, hourly or daily logs, meter charts, time logs, purchase records, raw material records, etc

*Emission Unit/PCD #:

*Method of Monitoring:

*Parameter Monitored:

Other:

*Frequency of Monitoring:

*Frequency of Monitoring Hours:

*Record Keeping Procedures:

*Frequency of Data Record:

*Frequency of Data Record Hours:

Submit **Cancel**

resume later



Step 3: Application Information

☐ Indicate if you are/are not proposing top-case BACT

☐ Click "Add a Row"

☐ Enter information accordingly and click "Submit"

☐ Repeat the steps above to add multiple rows

☐ Click "Continue Application" to proceed

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) Application

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents	6	7	8
-----------------------	------------------------	---------------------------	-------------------------	-------------	---	---	---

Step 3: Application Information > Page 7 of 9

* indicates a required field.

Best Available Control Technology (BACT) Emissions

If you are NOT proposing Top-case BACT, you must attach a BACT analysis in addition to completing the BACT Table below. If proposing Top-case BACT, please complete the table.

* Are proposed BACT emission limits Top-Case BACT as referenced in 310 CMR 7.02(8)(a)2.a.?: [?](#)

☐ Yes ☐ No

Best Available Control Technology (BACT) Emissions

BACT EMISSION
Complete the table(s) below to summarize the proposed project's BACT emissions.

Showing 0-0 of 0

Emission Unit #	Air Contaminant	Other	BACT Emission Limit	Unit of measure	Emission Restriction (Month) in tons	Emission Restriction (12-month) in tons	Production or Operating limit (Month)	Production or operating Limit (12-month)
No records found.								

Add a Row

Edit Selected

Delete Selected

Continue Application >

x

BACT EMISSION
Complete the table(s) below to summarize the proposed project's BACT emissions.

* Emission Unit #:

* BACT Emission Limit:

* Emission Restriction (12-month) in tons:

Air Contaminant:

* Unit of measure:

Production or Operating limit (Month):

Other:

* Emission Restriction (Month) in tons:

Production or operating Limit (12-month):

Submit

Cancel

Go later



Step 3: Application Information

☐ Regulatory Considerations:

- ☐ Identify any Federal Applicable requirements for the proposed project

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) 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 9

* indicates a required field.

Regulatory Considerations

Indicate below whether the proposed project is subject to any additional regulatory requirements.

* 310 CMR 7.00: Appendix A Nonattainment Review, or is netting used to avoid review under 310 CMR 7.00 Appendix A or 40 CFR 52.21?:
☐ Yes ☐ No

* 40 CFR 60: New Source Performance Standards (NSPS)?:
☐ Yes ☐ No

* 40 CFR 63: NESHAPS for Source Categories – Maximum Achievable (MACT) or Generally Available (GACT) Control Technology?:
☐ Yes ☐ No



Step 3: Application Information

- ❑ **Federal Applicability:** Provide the reference to the Federal standard

- ❑ Click "Add a Row"

- ❑ Enter information accordingly and click "Submit"

- ❑ Repeat the steps above to add multiple rows

- ❑ Identify any other (state) applicable requirements for the proposed project. The text box allows for a description of up to 4000 characters. Indicate Facility-wide Potential for HAP and if the project is applicable to MEPA.

- ❑ **Project Coordination:** Is this project subject to MEPA Review? Answer "Yes" or "No"

- ❑ Click "Continue Application" to proceed



EEA ePlace Portal

Federal Applicability

FEDERAL APPLICABILITY

If any federal requirement is applicable, please provide the reference to the federal standard (Part and subpart) such as 40 CFR 63 Subpart.

Showing 0-0 of 0

Emission Unit #	Part	Sub Part
No records found.		
<div><div>Add a Row</div><div>Edit Selected</div><div>Delete Selected</div></div>		

Other Regulatory Considerations

Other Applicable Requirements?: ?

☐ Yes ☐ No

Facility-Wide Potential-to-Emit Single Hazardous Air Pollutants (HAPS): ?

--Select--

Facility-Wide Potential-to-Emit Combine Hazardous Air Pollutants (HAPS): ?

--Select--

Project Coordination

Is this project subject to MEPA Review?:

☐ Yes ☐ No

If yes, enter the project's EEA file number: ?

Continue Application »

Save and resume later

Step 3: Application Information

- ❑ **Energy Efficiency Evaluation Survey:**
Answer "Yes" or "No" as applicable

- ❑ Click "Continue Application" to proceed

DEP Applications

AQ01 - Limited Plan Approval for Process Emission Unit(s) Application

1 Contact Information	2 Facility Information	3 Application Information	4 Special Fee Provision	5 Documents	6	7	8
-----------------------	------------------------	---------------------------	-------------------------	-------------	---	---	---

Step 3: Application Information > Page 9 of 9

* indicates a required field.

Energy Efficiency Evaluation Survey

Do you know where your electricity and/or fuel and/or water and/or heat and/or compressed air is being used/consumed?:
☐ Yes ☐ No

Has your facility had an energy audit performed by your utility supplier (or other) in the past two years?: [?](#)
☐ Yes ☐ No

Does your facility have an energy management plan?:
☐ Yes ☐ No

Have you identified and prioritized energy conservation opportunities?:
☐ Yes ☐ No

Have you identified opportunities to improve operating and maintenance procedures by employing an energy management plan?:
☐ Yes ☐ No

* Has each emission unit proposed herein been evaluated for energy consumption including average and peak electrical use; efficiency of electric motors and suitability of alternative motors such as variable speed; added heat load and/or added cooling load as a result of the operation of the proposed process; added energy load due to building air exchange requirements as a result of exhausting heat or emissions to the ambient air; and/or use of compressors?:
☐ Yes ☐ No

Has your facility considered alternative energy methods such as solar, geothermal or wind power as a means of supplementing all or some of the facility's energy demand?:
☐ Yes ☐ No

Does your facility comply with Leadership in Energy & Environmental Design (LEED) Green Building Rating System design recommendations?: [?](#)
☐ Yes ☐ No

Continue Application »

Save and resume later



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

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

AQ01 - Limited Plan Approval for Process Emission Unit(s) 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 2 Required Document(s) which are mandatory to submit this Application:

1. LPA Fuel Form

2. Process Equipment Manufacturer Specifications and supporting Safety Data Sheets for materials used

Attachment

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

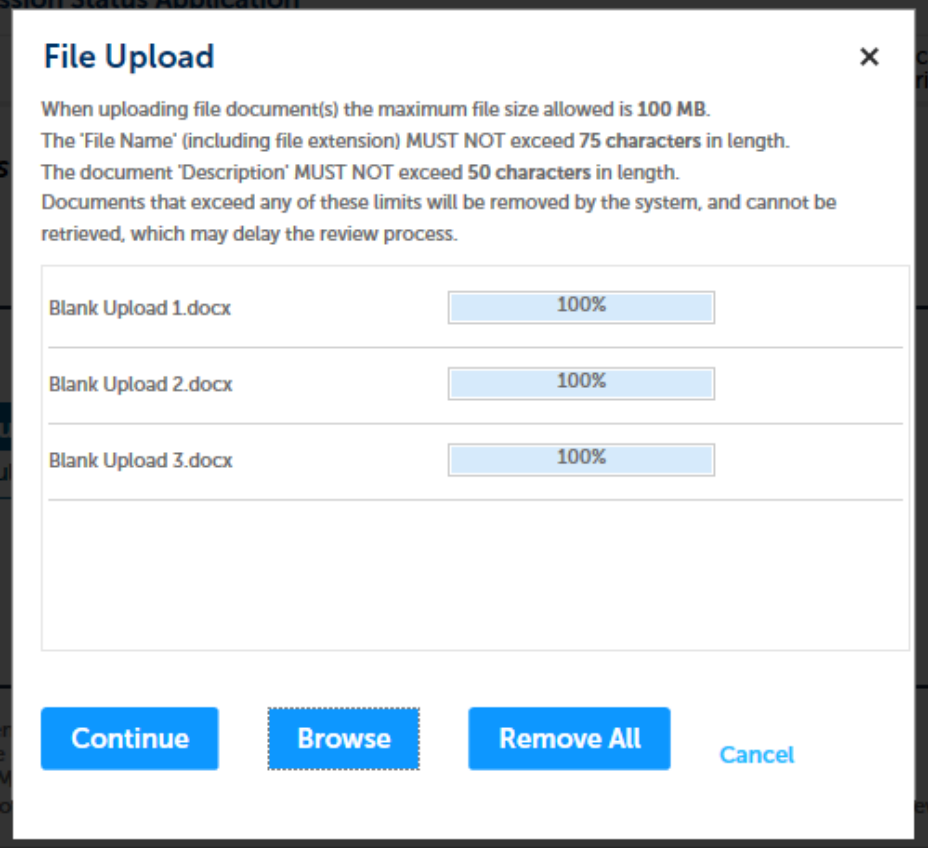
Continue Application »

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



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

AQ01 - Limited Plan Approval for Process Emission Unit(s) 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 2 Required Document(s) which are mandatory to submit this Application:

1. LPA Fuel Form
2. Process Equipment Manufacturer Specifications and supporting Safety Data Sheets for materials used

Attachment

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	Process Equipment Manufacturer Specifications and supporting Safety Data Sheets for materials used	10.24 KB	03/04/2023	Test	Actions ▾
Document12.docx	LPA Fuel Form	10.24 KB	03/04/2023	Test	Actions ▾

Browse

Continue Application »

Save and resume later



EEA ePlace Portal

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:

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

Attachment



Step 7: Review

- ☐ Read the Certification Statement
- ☐ Click the check 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

If you are an Application Submitter (different from Permittee), you are agreeing to below language:
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.

If you are the Permittee, you are agreeing to below language:
When submitting a modeling protocol, the modeler/preparer is the “applicant” and should check the “I am the applicant” certification below in order to finalize and submit this application. When submitting a modeling report (separate from the associated AQ02/03 Plan Application), the applicant is the entity that owns or operates (or will own/operate) the facility. This applicant should log in and check “I am the applicant” in order to finalize and submit the application.

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

Date: 03/16/2023

[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

AQ01 - Limited Plan Approval for Process Emission Unit(s) 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
LPA Process Emission Application Fees	\$645.00
Total Fees	\$645.00

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

AQ01 - Limited Plan Approval for Process Emission Unit(s) 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-AQ01P-0002-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.

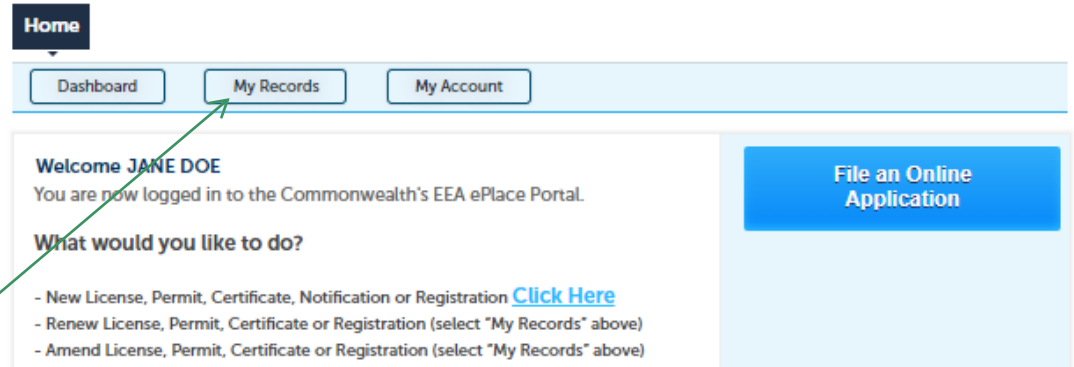


Permittee Certification

- ❑ 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

A screenshot of the "My Records" page in the EEA ePlace Portal. It shows a table of records with columns: Date, Record Number, Record Type, Facility/Location Address, Status, Action, Expiration Date, and Legacy ID. The first record is highlighted with a red box. A green arrow points from the "Resume Application" link in the "Action" column of the first record to the "Resume Application" link in the "Action" column of the second record.

Date	Record Number	Record Type	Facility/Location Address	Status	Action	Expiration Date	Legacy ID
02/07/2023	23-AQ33-0005-APP	AQ33 - LPA/CPA Consolidation Application	AL & SONS SERVICE STATION 638 HIGH ST MEDFORD MA 02155	Acceptance Pending			
02/07/2023	23TMP-000209	Permittee Certification	AL & SONS SERVICE STATION 638 HIGH ST MEDFORD MA 02155		Resume Application		23-AQ33-0005-APP

Permittee Certification

❑ The facility information and Application details are populated

❑ Please verify the information

Permittee Certification

1 Application Information	2 Review	3 Application Submitted
---------------------------	----------	-------------------------

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: test

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 West 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

Home

DEP Applications

Permittee Certification

1 Application Information 2 Review 3 Application Submitted

Step 3: Application Submitted

Successfully Completed.

Thank you for using our online services.
Your Record Number is 23-CERT-000017.

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

Application Submission Successful 23-AQ33-0005-APP

EIPAS <eipas@mass.gov>
To: sneha9717@gmail.com, Kalagarla, Sneha (EEA); tevst@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

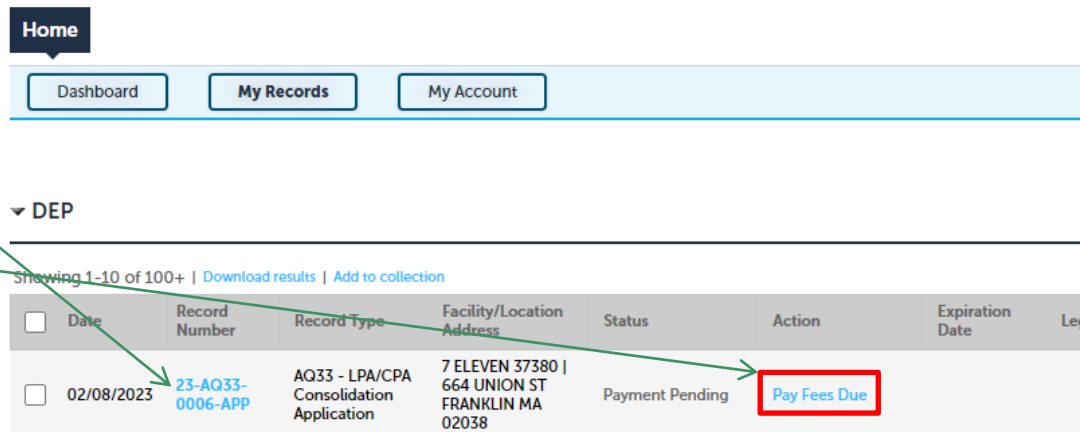
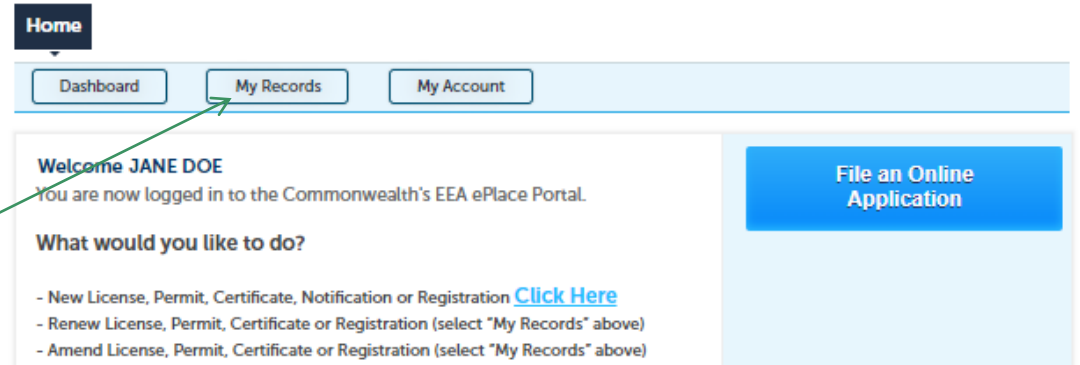
To Pay Fees Online

- ❑ **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

AQ01 - Limited Plan Approval for Process Emission Unit(s) 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
LPA Process Emission Application Fees	\$645.00
Total Fees	\$645.00

[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

AQ01 - Limited Plan Approval for Process Emission Unit(s) 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-AQ01P-0002-APP.

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

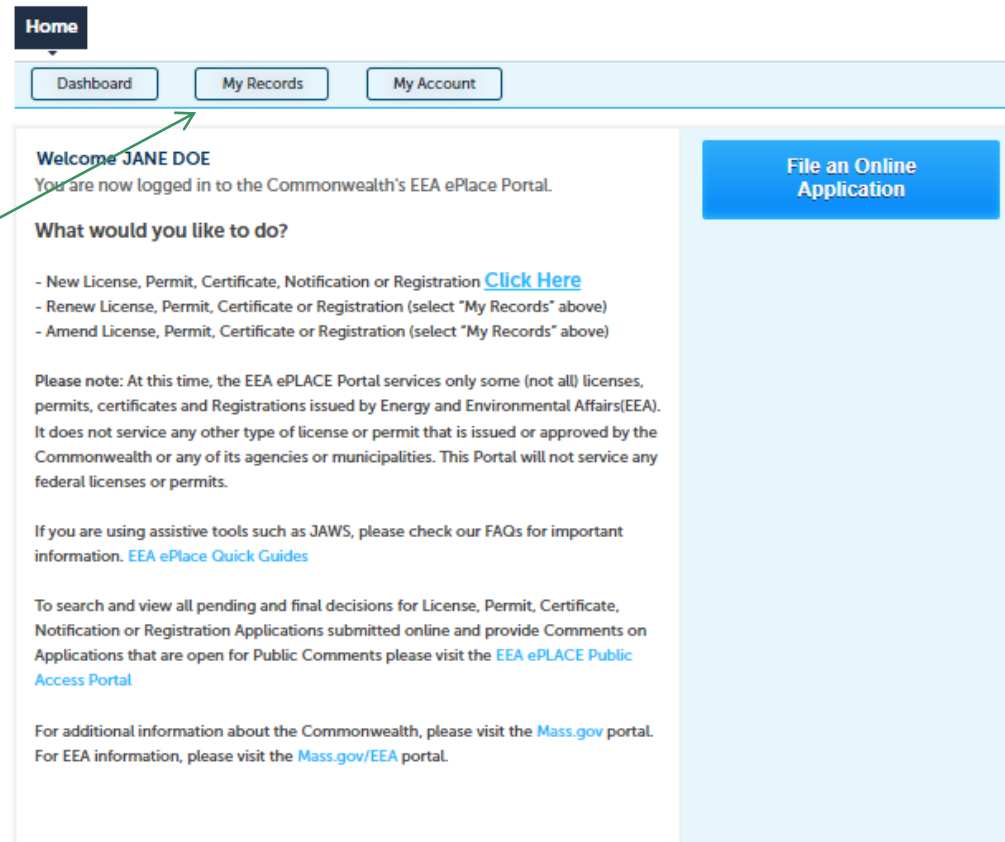


To check the status of an application

- ❑ 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:

[LPA-PROCESS: Limited Plan Application for a Process Emissions Unit \(AQ 01\) | Mass.gov](#)



EEA ePlace Portal