

INSTRUCTIONS FOR APC FORM V.24  
COMPLIANCE DEMONSTRATION BY STACK TESTING

SOURCES THAT ARE REQUIRED TO OBTAIN A PERMIT UNDER PARAGRAPH 1200-3-9-.02(11) OF TENNESSEE AIR POLLUTION CONTROL REGULATIONS, MUST COMPLETE AND RETURN THIS FORM, IF APPLICABLE. APPLICATIONS ARE INCOMPLETE UNLESS ALL APPLICABLE INFORMATION REQUESTED HEREIN IS SUPPLIED. FAILURE TO SUPPLY ANY ADDITIONAL INFORMATION REQUESTED BY THE TECHNICAL SECRETARY TO ENABLE HIM TO ACT ON THE APPLICATION MAY RESULT IN DENIAL OF THIS APPLICATION. IF THERE IS ADDITIONAL INFORMATION THAT WILL NOT FIT ON A FORM, PLEASE DECLARE THE INFORMATION ON ADDITIONAL SHEET(S) AND ATTACH IT TO THE BACK OF THE ORIGINAL.

ONE FORM SHOULD BE COMPLETED FOR EACH STACK OR PROCESS BEING MONITORED FOR COMPLIANCE.

IF YOU WISH TO PROVIDE ADDITIONAL INFORMATION TO DEFINE ALTERNATIVE OPERATING SCENARIOS OR DEFINE PERMIT TERMS AND CONDITIONS ALLOWING EMISSIONS TRADING UNDER A FEDERALLY ENFORCEABLE EMISSIONS CAP TO BE ESTABLISHED IN THE PERMIT, PLEASE DECLARE THE INFORMATION ON AN APC FORM(S) OR ON ADDITIONAL SHEET(S). UNLESS OTHERWISE REQUESTED AS A LIMITING CONDITION, PERMIT IS BASED ON 8,760 HRS/YR.

ITEM 2 PROVIDE THE STACK IDENTIFICATION NUMBER OR ID OF THE STACK WHICH EXHAUSTS THIS EQUIPMENT. THIS NUMBER SHOULD ALSO APPEAR ON THE APC FORM V.3.

ITEM 3 IDENTIFY EMISSION SOURCE.

ITEM 4 IDENTIFY POLLUTANTS.

ITEM 5 STACK TEST METHOD BEING USED TO ESTABLISH THE COMPLIANCE STATUS OF ITEM 4.

ITEM 6 THE FREQUENCY WITH WHICH THE STACK TEST PROCEDURE IS PERFORMED IS RELATED TO THE COMPLIANCE STATUS OF ITEM 4.

TESTING PROTOCOL: A COPY OF TESTING PROTOCOL (INCLUDING PROPOSED SOURCE OPERATION DURING TEST) SHALL BE SENT TO THE DIVISION FOR APPROVAL PRIOR TO TESTING(IF AN APPROVED PROTOCOL HAS NOT BEEN ESTABLISHED). TEN (10) DAYS PRIOR TO CONDUCTING THE SOURCE TEST, GIVE NOTICE OF SUCH TEST TO THE TECHNICAL SECRETARY TO AFFORD HIM THE OPPORTUNITY TO HAVE AN OBSERVER PRESENT.

ITEM 7 PAGE NUMBER MUST BE FILLED IN. REVISION NUMBER AND DATE OF REVISION ARE TO BE FILLED IN ONLY IF THE INFORMATION ON THIS FORM IS BEING REVISED.

IF ANY ITEM ON THIS APPLICATION IS NOT APPLICABLE TO THIS FACILITY, THE ITEM MUST BE FILLED IN WITH "NOT APPLICABLE" OR "N/A".