

**NEW JERSEY DEPARTMENT
NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
AIR QUALITY PERMITTING**

**GENERAL PERMIT REGISTRATION FORM
EMERGENCY GENERATOR(S)
FIRST REVISION - OPERATIVE FEBRUARY 5, 2007**

SECTION A: FACILITY PROFILE

Facility ID Number _____ Facility Name _____

Street Address
Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
City _____ State _____ Zip _____

Mailing Address Check if same as street address above
Address Line 1 _____
Address Line 2 _____
Address Line 3 _____
City _____ State _____ Zip _____

County
County Where Facility Is Located _____

Location Description

**Mailing Instructions
and Information:**

Mail Registration Form & Fee to:
NJDEP - Air Quality Permitting Program
401 E. State Street, PO Box 027
Trenton, New Jersey 08625-0027

For Assistance, Please call:
(609) 633-2829

Industry Information
NAICS_Code _____

Facility Contact
Contact person (check one or check both if owner is the operator) Owner Operator

Name _____	Organization _____
Title _____	Organization Type _____
Phone _____	NJ EIN _____
Fax _____	Mailing Address _____
Other _____	Address Line 2 _____
Type _____	Address Line 3 _____
E-mail _____	City _____ State _____ Zip _____

SECTION B: REASON FOR APPLYING (Check All That Apply)

<input type="checkbox"/> New Emergency Generator(s)	Previous Permit or Certificate Number _____
<input type="checkbox"/> Existing Unpermitted Emergency Generator(s)	
<input type="checkbox"/> Change In Permitting Option From EG-_____ To EG-_____	
<input type="checkbox"/> Other (Explain) _____	

SECTION C: EQUIPMENT INVENTORY

Emission Unit NJID #	Facility Designation of Emission Unit
U-	

Equipment NJID	E -	
Emission Point NJID	PT -	
	Facility Designation of Equipment	
	Equipment Type	<input type="checkbox"/> Emergency Generator <input type="checkbox"/> Fire Pump
	Equipment Make	
	Equipment Manufacturer and Year	
	Equipment Model and Year	
	Equipment Serial Number	
	Installation Date (MM/DD/YYYY)	
	Last Modified Date (MM/DD/YYYY)	
	Max. Rated Heat input (MMBTU/Hour)	

Equipment NJID	E -	
Emission Point NJID	PT -	
	Facility Designation of Equipment	
	Equipment Type	<input type="checkbox"/> Emergency Generator <input type="checkbox"/> Fire Pump
	Equipment Make	
	Equipment Manufacturer and Year	
	Equipment Model and Year	
	Equipment Serial Number	
	Installation Date (MM/DD/YYYY)	
	Last Modified Date (MM/DD/YYYY)	
	Max. Rated Heat input (MMBTU/Hour)	

ATTACH ADDITIONAL EQUIPMENT INVENTORY SHEETS IF NECESSARY

SECTION D: PERMITTING OPTIONS

This Registration Form is for a **single or multiple emergency generators**. Indicate how the single or multiple generators are being registered by selecting one General Permit Number from one of the options listed below. **Only ONE box** may be checked in the table below.

Print The General Permit Number Selected Below: EG-_____

OPTIONS TABLE								
POTENTIAL(S) TO EMIT (IN TPY) ARE ESTABLISHED BY SELECTING ANNUAL OPERATING HOURS (HOURS/YR) IN SELECTED CATEGORY DURING NORMAL TESTING AND MAINTENANCE OPERATION ONLY AND TOTAL CAPACITY OF ALL EQUIPMENT (MMBTU/HR)								
General Permit Number Option Select Option Box in Column Below	Annual Operating Hours for Normal Testing and Maintenance for each piece of equipment	Total Capacity of All Equipment (MMBTU/hr)		<u>Air Contaminant Category</u> (Tons/year)				
		Greater Than	Less Than	TSP	SOx	NOx	CO	VOC
<input type="checkbox"/> EG-A1	30	1	10	0.05	0.03	0.66	0.14	0.05
<input type="checkbox"/> EG-A2	60	1	10	0.09	0.06	1.32	0.29	0.11
<input type="checkbox"/> EG-A3	100	1	10	0.16	0.10	2.21	0.48	0.18
<input type="checkbox"/> EG-A4	30	10	24	0.04	0.07	1.47	0.42	0.29
<input type="checkbox"/> EG-A5	60	10	24	0.07	0.15	2.94	0.84	0.58
<input type="checkbox"/> EG-A6	100	10	24	0.12	0.24	4.90	1.39	0.96
<input type="checkbox"/> EG-A7	30	24	40	0.06	0.12	2.45	0.70	0.48
<input type="checkbox"/> EG-A8	60	24	40	0.12	0.24	4.90	1.39	0.96
<input type="checkbox"/> EG-A9	30	40	60	0.09	0.18	3.67	1.04	0.72
<input type="checkbox"/> EG-A10	30	60	80	0.12	0.24	4.90	1.39	0.96

SECTION E: CERTIFICATION

"I certify under penalty of law that I believe the information provided in this document is true, accurate, and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

Name of Individual
With Direct Knowledge

Title

Signature

Date

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attached documents and, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties, including the possibility of fine or imprisonment or both, for submitting false, inaccurate or incomplete information."

Name of Responsible Official

Title

Signature

Date

For Department Use Only	PER#	Fee
-------------------------	------	-----

INSTRUCTIONS FOR COMPLETING THE REGISTRATION FORM FOR EMERGENCY GENERATORS

SECTION A: FACILITY PROFILE

Facility (ID Number & Name) - Enter the New Jersey air pollution facility identification number (ID) followed by the facility name for which the General Permit is being registered. The ID is a five-digit number assigned by the New Jersey Department of Environmental Protection. Your facility name is the one registered with the New Jersey Secretary of State, under which your facility does business.

Street Address - Enter the address of the facility where the equipment to be permitted is physically located.

Mailing Address - Enter the facility's mailing address. If it is the same as the facility location, check the box provided.

Mailing Instructions & Information - Once the General Permit Registration Form has been completed, it should be mailed along with the appropriate fee to the New Jersey Department of Environmental Protection at the address listed on the front page of the Registration form.

County - Enter the county in which the facility is located (**not the mailing Address County**).

Location Description - Describe the facility's location if it is difficult to find using the street address. If you have to give a visitor directions to your facility, consider showing them here. (*Example: Two miles down the access road that leaves state highway 29 at mile marker 10.*)

Industry Information - Enter the facility's four-digit primary and secondary (if any) Standard Industrial Classification Codes (SIC) or equivalent. Use the codes registered with the US Department of Labor. You may also refer to the SIC manual from the U.S. Office of Management and Budget or equivalent industrial classification code.

Facility Contact - Check the box indicating the facility contact person for this General Permit Registration. If the owner and operator are the same, check both boxes. Enter the following information for the Facility Contact: Name, title, phone and fax numbers, other phone numbers and type (*Example: pager, toll free, cell phone*), e-mail address, the organization that the contact person works for; organization type (federal, local, public, private, state or utility); the New Jersey Employer Identification Number (EIN); and mailing address.

SECTION B: REASON FOR APPLYING

This section of the General Permit Registration Form provides the Department with the reason the General Permit Registration Form is being submitted.

New Emergency Generator - Check this box if the emergency generator(s) has not been installed as of the filing of this Registration Form.

Existing Unpermitted Emergency Generator - Check this box if this is a single or multiple emergency generators that are currently not registered with the Department.

Change In Permitting Option - Check this box if the General Permit Registration Form is being submitted to change a permitting option (listed in Section D of the Form) of a previously registered emergency generator. Provide the current permit number in the space provided.

Other -Check this box if the General Permit Registration Form is being submitted for a reason other than those described above and provide an explanation. Example: Modification as a result of an enforcement action.

Previous Permit or Certificate Number -If the facility is registering a single or multiple emergency generators that had a previous permit or certificate, list the previous permit or certificate numbers.

SECTION C: EQUIPMENT INVENTORY

Emission Unit NJID - A facility may do either one of the two following:

1- Enter a unique 6 digit identification number (*example*: U-000010) that identifies the external combustion operation covered by this General Permit. Once a number is used to identify the external combustion operation or any another piece of equipment group at the facility, the same number cannot be used to identify any other piece of equipment or operation at the facility. (**Note**: If the 6 digit identification number the facility enters is incorrect or conflicts with any number registered with the Department, then the Department will assign an appropriate number for the equipment);

2- Leave this line blank and the Department will assign an appropriate 6-digit identification number for he the external combustion operation covered by this General Permit. The Department will not assign the same two numbers for any piece of equipment registered for the facility.

Facility Designation of Emission Unit - Enter the name by which the facility identifies the emergency generator operation. (*Example*: Emergency generator R3A at Terminal A).

Equipment NJID - see **Emission Unit NJID**

Emission Point NJID - see **Emission Unit NJID**

Facility Designation of Equipment - Enter the type and a given name of the equipment (you may want to check with your Maintenance Department for consistency) at the facility. If the equipment was previously permitted the same designation should be used as before.

Equipment Type - Check the box that corresponds to the type of equipment. Only ONE box may be checked for each piece of equipment.

Equipment Make - Enter the make of the equipment.

Equipment Manufacturer - Enter the manufacturer of the equipment and the year manufactured.

Equipment Model - Enter the model of the equipment and the model year.

Equipment Serial Number – Enter the unique serial number from the emergency generator.

Installation Date - Enter the date on which the equipment was installed

Last modification Date - Enter the date on which the equipment was most recently modified (if any).

Max. Rated Heat input (MMBTU/Hour) - Enter the maximum gross heat input capacity of the emergency generator in MMBTU/hour based.

SECTION D: PERMITTING SCENARIOS

The table in this section lists the ten general permit options. A facility registering their emergency generator(s) under this General Permit must select a General Permit Number from the options by checking **only ONE** box. The General Permit Number chosen corresponds to a hour restriction for normal testing and maintenance (which includes a potential-to-emit for each criteria pollutant) the facility is willing to accept as a permit limit. In the space provided, print the General Permit Number selected from the options table. See the General Permit for option restrictions and limitations. (NOTE: The maximum heat input rate to each emergency generator can be obtained from the generator manufacturer. If permitting multiple emergency generators add the individual heat input rates and select the option corresponding to the category for the total capacity of all equipment. The following conversions are provided to assist applicants.)

Natural Gas Flow (MMCF/Hr) x 1020 = MMBTU/Hr

Diesel Fuel Flow (MMGal/Hr) x 142,000 = MMBTU/Hr

Typical natural gas or diesel engine: 7000 BTU/BHP-hr where BHP is shaft horsepower. Better efficiencies based on site conditions may be obtained from the engine manufacturer specification sheets.

Examples of selecting options:

- i. An emergency generator with a maximum rated heat input to the burning chambers less than 10 MMBTU/hr. The manufacturer's specifications shows the duration of maintenance and testing is recommended at 1 hour per month for the emergency generator. Select option EG-A1 for maximum 30 operating hours per year, and a capacity less than 10 MMBTU/hr.
- ii. Three emergency generators with a maximum rated heat input to the burning chambers of 10, 25 and 35 MMBTU/hr. The manufacturer's specifications for the 25 MMBTU/hr unit shows required maintenance at one half hour per week; the 10 and 35 MMBTU/hr units show recommended maintenance and testing at one hour per month. Select option EG-A10 for size category 60-80 MMBTU/hr, with 30 hours per year testing and maintenance allowed for each unit.
- iii. Twenty five emergency generators with a maximum rated heat input to the burning chambers of 1 MMBTU/hr. The operating hours recommended are 30 hours per year for each unit. Select option EG-A7 for size category 20-40 MMBTU/hr with 30 hours per year testing and maintenance allowed for each unit.
- iv. Two emergency generators with a maximum rated heat input to the burning chambers of 55 MMBTU/hr each. The total capacity of all equipment exceeds 80 MMBTU/hr. The Permittee may not use this General Permit or may use this GP for one emergency generator and file a RADIUS application for the other emergency generator.
- v. Five generators are each rated at 15 MMBTU/hr. The total recommended annual operating hours for testing and maintenance is 200 hours per year each. Since this exceeds the maximum hours per year for testing and maintenance, this general permit cannot be used.

SECTION E: CERTIFICATION

Print or type the name and title of person submit with original signature and date the application in the spaces provided.

Individual with Direct Knowledge - Individual listed as the contact person or any person with direct knowledge of and responsibility for the information contained in the General Permit Registration Form. This may or may not be the same person who signs as the Responsible Official defined below.

Responsible Official - Any company executive charged with environmental responsibilities. A Responsible Official as defined in N.J.A.C. 7:27-1.4 is as follows:

- For a corporation: a president, secretary, treasurer, or vice-president of the corporation; any other person who performs similar policy or decision making functions for the corporation; or a duly authorized representative responsible for the overall operation of a facility (plant manager, etc.).
- For a partnership: a general partner.
- For a sole proprietorship: the proprietor
- For a government agency: either a principal executive officer or ranking elected official.