



Louisville Metro Air Pollution Control District

Request for Temporary Exemption Form AP-101X

Process Definition

Deliver application to:
701 W. Ormsby Ave. Suite 303
Louisville, KY 40203

(502) 574-6000
FAX: (502) 574-5137
www.louisvilleky.gov/apcd
airpermits@louisvilleky.gov

General Information

Plant Name:	Plant ID:
Date of Submission:	
SIC code:	<input type="checkbox"/> Continuous <input type="checkbox"/> Batch

Operating Schedule

Date operation will start:	Date operation will cease:	Period must be less than 180 days
Hours of operation:		
Monday-Friday	Hours / day	Days / week
Saturday-Sunday	Hours / day	Days / week
Location of operation:		
Address:		
OR	Latitude:	Longitude:

Process Description

«CONTINUED ON SECOND PAGE»

Criteria Pollutants		
Pollutant	Expected Emissions (lb/hr)	Describe any pollution control device to be used
Particulates – PM		
Volatile Organic Compound – VOC (Ozone precursor)		
Carbon Monoxide – CO		
Nitrogen Oxides – NO _x		
Sulfur Dioxide – SO ₂		
Lead – Pb		
Fluorides (as HF)		

Regulated Non-Criteria Pollutant								
Pollutant/CAS	Expected Emissions (lb/hr)	VOC	TAC	112(b) HAP	112(r)	Title VI	GHG	Controlled?
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The filing fee specified in District Regulation 2.08, section 3.2.1 must be included with this application.

Instructions for Request for Temporary Exemption Form AP-101X

This application is to be used only by sources that wish to apply for a temporary exemption from construction or operation permit requirements under District Regulation 2.02, section 3.

General Information

Company Name Enter the company name exactly as it appears in Form AP-100A.

Company ID This is the identification number assigned to the source by the District. If this application is for a new source for which an ID has not been assigned, the applicant should leave this space blank.

Operating Schedule

Date of operation Enter the dates on which the temporary operation is planned to begin and end. **This application can only be approved for temporary operations that will last for less than 180 days.**

Days of operation Enter the hours per day and days per week for which the temporary operation is expected to occur.

Location of operation Enter the address at which the operation will occur, if known, or the latitude and longitude of the operation.

Process Description

Describe in detail the activities that will occur and the equipment to be used for the temporary operation. For manufacturing operations, include raw materials, final products, and any byproducts or waste that are part of the operation.

Criteria Pollutants:

Emissions (lbs/hr) Total all of the expected actual emissions, in lbs/hr, for each pollutant.

Control Devices If any pollution control devices are used during the temporary operation, describe the type of control and rated efficiency of control.

Regulated Non-Criteria Pollutants

Non-Criteria Pollutant List all regulated pollutants not listed as criteria pollutants.

CAS Number List the CAS number for each regulated air pollutant.

Emissions (lbs/hr) Total all of the expected actual emissions, in lbs/hr, for each pollutant.

VOC Place an 'x' in this column if the pollutant is a Volatile Organic Compound as defined in 40 CFR 51.100(s).

TAC Place an 'x' in this column if the pollutant is regulated as a Toxic Air Contaminant under District Regulation 5.20.

112(b) HAP Place an 'x' in this column if the pollutant is regulated as a Hazardous Air Pollutant under Section 112(b) of the Clean Air Act.

112(r) Place an 'x' in this column if the pollutant is regulated pursuant to Section 112(r) of the Clean Air Act and 40 CFR 68.130.

Title VI Place an 'x' in this column if the pollutant is regulated under Title VI of the Clean Air Act.

GHG Place an 'x' in this column if the pollutant is regulated as a greenhouse gas.

Control? Place an 'x' in this column if there is a control device included for this pollutant.

Fees

Check the box to indicate that you have included the appropriate filing fee for this application.