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**State of Wisconsin**
**Department of Natural Resources**
Bureau of Air Management
P.O. Box 7921, Madison WI 53707-7921
dnr.wi.gov

# General Permit Petition



**Notice:** This form is authorized under s. 285.60(9), Wis. Stats., and is required by ss. NR 406.18 and NR 407.107, Wis. Adm. Code. Failure to submit complete information as required on this form shall be grounds for denial of the Petition. Personally identifiable information collected on this form is not intended to be used for any other purpose, but may be made available to requesters under Wisconsin's Open Records law (ss. 19.31-19.39, Wis. Stats.). Questions regarding this form or other air management program related issues can be directed to the Bureau of Air Management at (608) 266-7718.

## Petitioner Information

| Last Name | First | MI | Date |
|---|---|---|---|
| | | | |

| Street Address | City | State | ZIP Code |
|---|---|---|---|
| | | | |

| Phone Number | Fax Number | E-Mail Address |
|---|---|---|
| | | |

Job Title

## Business Information

Business / Company Name

| Street Address | City | State | ZIP Code |
|---|---|---|---|
| | | | |

| Mailing Address | City | State | ZIP Code |
|---|---|---|---|
| | | | |

## General Permit Category-Specific Information

1. Permit Type: (select all that apply)
   - ☐ General Construction Permit Non-part 70
   - ☐ General Operation Permit Non-part 70
   - ☐ General Construction Permit Part 70
   - ☐ General Operation Permit Part 70
2. Permit Scope: (select one) ☐ Entire Facility ☐ Emission Unit
3. Source Category Information – If permit covers more than one source category, fill out an additional form for each source category.
   a. Describe the stationary source category proposed to be covered by the general permit in a narrative description and NAICS (North American Industry Classification System) and/or SIC (Standard Industrial Classification) code categories.

| Narrative Description of Source Category | NAICS (North American Industry Classification System) Code | SIC (Standard Industrial Classification) Code |
|---|---|---|
| | | |

   b. Describe the stationary source operations and activities used by this category of stationary source:

   c. Expected air contaminants emitted from this stationary source category:

   d. Capture and control systems employed by this stationary source category, if applicable:

   e. Emission limitations and other federal or state air regulations that apply to this stationary source category:

4. Proposed Permit Terms

   a. List all air pollution control requirements that would be included in the permit:

   b. List proposed compliance demonstration methods and records:

   c. Proposed permit term: ☐ non-expiring ☐ 5 year ☐ other: _____

   d. Permit applies to: (select all that apply)

   ☐ ozone attainment areas ☐ ozone non-attainment areas ☐ other non-attainment areas: _____

| 5. Will any case-by-case emission limits or other requirements apply to sources within this category? ☐ Yes ☐ No | If yes, how would you propose to address those limitations or requirements? |
|---|---|

| 6. Estimate the number of sources in the source category who would be eligible for the general permit: | What is the basis for the estimate? |
|---|---|

| 7. Estimate the number of sources interested in obtaining the general permit: | What is the basis for the estimate (e.g., survey of trade association members)? |
|---|---|

8. Estimate the range of annual actual emissions of each air contaminant from a stationary source that would be covered under the general permit, if issued:

9. Is additional information attached? ☐ Yes ☐ No

**Petitioner Signature**

I certify that all information provided is true and correct.

| Signature of Petitioner | Date Signed |
|---|---|
| | |

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| Received by: | Receipt Date | Processed by: | Status: |
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| ☐ central office<br>☐ southeast<br>☐ south central<br>☐ west central<br>☐ northern<br>☐ northeast | / / | ☐ central office<br>☐ southeast<br>☐ south central<br>☐ west central<br>☐ northern<br>☐ northeast | ☐ Returned to petitioner for additional information<br>☐ Denied<br>☐ Approved |
| | APS Entry Date / / | | |
| | Approval Date / / | | |

Comments