



Ramon Garcia
County Judge

A.C. Cuellar, Jr.
Pct. 1 Commissioner

Hector "Tito" Palacios
Pct. 2 Commissioner

Jose M. Flores
Pct. 3 Commissioner

Joseph Palacios
Pct. 4 Commissioner

Valde Guerra
Commissioner's Court
Executive Officer

Environmental
Compliance Office
1212 S. 25th Suite B
Edinburg, TX 78542-7223
Main Line: (956) 318-2980

Email: stormwater@hchd.org

HIDALGO COUNTY
STORM WATER PROGRAM
Protect storm water it's everyones business.



September 17, 2013

TCEQ Air Permits Initial Review Team (APIRT), MC-161
P.O. Box 13087
Austin, TX 78711-3087

Re: Renewal Application for Air Curtain Incinerator at Hidalgo County
Precinct 1, RN105335459, CN6007753990

Hidalgo County is requesting renewal of Permit by Rule Registration No. 82819 and GOP Permit No. O3278 for our air curtain incinerator located at the Sunset Park Citizen Collection Station, 13266 Mile 1 ½ West, Mercedes, TX 78570. I am the primary county contact for this application and can be reached at 956-2929-7000 ext. 4082 or by email at martin.ramirez@hchd.org. Please contact me with any questions or concerns regarding this request.

Sincerely,

Martin Ramirez
Environmental Compliance Coordinator

Enclosures: PI-7
Core Data Form
TCEQ-20410 ACI GOP No. 518
TCEQ-10536 PBR Checklist for ACIs



**Texas Commission on Environmental Quality
Registration for Permits by Rule (PBR)
Form PI-7 Submission Form
(Page1)**

The TCEQ **requires** that a complete Core Data Form bearing an original signature be submitted on all incoming applications unless a Regulated Entity and Customer Reference Number have been issued by the TCEQ and no core data information has changed. For more information regarding the Core Data Form, call (512) 239-5175 or go to the TCEQ Web site at www.tceq.texas.gov/permitting/central_registry/guidance.html.

I. Registrant Information		
A. Company or other Legal Customer Name: Hidalgo County Precinct 1		
Company Official Contact Name: A.C. Cuellar		
Title: Hidalgo County Commissioner		
Mailing Address: 1902 Joe Stephens Ave.		
City: Weslaco	State: TX	ZIP Code: 78596-3700
Phone: 956-968-8733	Fax: 956-969-1417	E-mail:
B. Technical Contact Name: Martin Ramirez		
Title: Hidalgo County Environmental Coordinator		
Company: Hidalgo County		
Mailing Address: 1212 S. 25th St.		
City: Edinburg	State: TX	ZIP Code: 78542-7223
Phone: 956-292-7000 ext 4082	Fax:	E-mail: martin.ramirez@hchd.org
C. Facility Location Information – Street Address: 13266 Mile 1 1/2 West, Mercedes, TX 78570		
<i>If “NO,” street address provide written driving directions to the site: (attach description of additional space is needed)</i>		
City: Mercedes	County: Hidalgo	ZIP Code: 78570
D. Is the Core Data Form (TCEQ-Form 10400) attached?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
If “NO,” provide customer reference number (CN) and regulated entity number (RN) below:		
Customer Reference Number (CN):		
Regulated Entity Number (RN):		
II. Facility and Site Information		
A. Name and Type of Facility: Sunset Park Citizen Collection Station		<input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Portable
For portable units, please provide the serial number of the equipment being registered below:		
Serial No:	Serial No.:	



**Texas Commission on Environmental Quality
 Registration for Permits by Rule (PBR)
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II. Facility and Site Information (continued)	
B. PBR claimed under 30 TAC § 106 (List all that apply)	
106. 496	106.
106.	106.
106.	106.
Are you claiming a historical standard exemption or PBR ? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<i>If "YES," enter effective date(s) and rule number(s) in the spaces provided below:</i>	
C. Is there a previous Standard Exemption or PBR for the facility in this registration? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
<i>If "YES," enter registration number(s), rule number(s) and effective dates in the spaces provided below:</i>	
Registration No. 82819	30 TAC 106.496
03/26/2009-03/26/2014	
D. Are there any other facilities at this site which are authorized by an Air Standard Exemption or PBR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<i>If "YES," enter registration number(s), rule number, and effective dates in the spaces provided below.</i>	
E. Are there any other air preconstruction permits at this site? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<i>If "YES," enter permit number(s) in the spaces provided below.</i>	
Are there any other air preconstruction permits at this site that would be directly associated with this project? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<i>If "YES," enter permit number(s) in the spaces provided below.</i>	



**Texas Commission on Environmental Quality
 Registration for Permits by Rule (PBR)
 Form PI-7 Submission Form
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II. Facility and Site Information (continued)	
F. Is this facility located at a site which is required to obtain a federal operating permit pursuant to 30 TAC Chapter 122?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> To Be Determined
If the site currently has an existing federal operating permit, enter the permit number:	O3278
Check the requirements of 30 TAC Chapter 122 that will be triggered if this claim is accepted: (check all that apply)	
<input type="checkbox"/> Initial Application for an FOP <input type="checkbox"/> Significant Revision for SOP <input type="checkbox"/> Minor Revision for SOP <input type="checkbox"/> Operational Flexibility/Off Permit Notification for an SOP <input type="checkbox"/> Revision for GOP <input checked="" type="checkbox"/> To be Determined <input type="checkbox"/> None	
Identify the type(s) issued and/or FOP application(s) submitted/pending for the site: <i>(check all that apply)</i>	
<input type="checkbox"/> SOP <input checked="" type="checkbox"/> GOP <input type="checkbox"/> GOP application/revision application: <i>(submitted or under APD review)</i>	
<input type="checkbox"/> N/A <input type="checkbox"/> SOP application/revision application: <i>(submitted or under APD review)</i>	
G. TCEQ Account Identification Number: <i>(if known)</i> HN-A010-J	
III. Fee Information	
See Section VII. for address to send fee or go to www6.tceq.texas.gov/epay to pay online.	
A. Is this registration an update to a previously registered facility and accompanied by a Form APD-CERT solely to establish a federally enforceable emission limit and will not authorize new facilities?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If "YES," a fee is not required.	
If "NO," then go to Section III.B.	
B. If "YES," to either of the following questions, a \$100 fee is required. Otherwise, a \$450 fee is required.	
Does this business have less than 100 employees?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Does this business have less than 6 million dollars in annual gross receipts?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Is this registration submitted by a governmental entity with a population of less than 10,000?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
C. Enter the check, money order, or transaction number).	
Enter the individual or company name printed on the check.	
Norma G. Garcia, Hidalgo County Treasurer	
Fee Amount <i>(spell out)</i> : Four Hundred Fifty Dollars and zero cents	\$ 450.00
Was fee Paid online?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO



**Texas Commission on Environmental Quality
 Registration for Permits by Rule (PBR)
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IV. Selected Facility Reviews <u>Only</u>-Technical Information	
<i>Note: If claiming one of the following PBRs, complete this section, then skip to Section VI., "Submitting your registration" below:</i>	
<i>Animal Feeding Operations § 106.161, Livestock Auction Facilities § 106.162, Saw Mills § 106.223, Grain Handling, Storage and Drying § 106.283, Auto Body Refinishing Facilities § 106.436, Air Curtain Incinerator § 106.496</i>	
A. Is the applicable PBR checklist attached which shows the facility meets all general and specific requirements of the PBR(s) being claimed?	<input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO
B. Distance from this facility's emission release point to the nearest property line:	310 feet
Distance from this facility's emission release point to the nearest off-property structure:	500 feet
V. Technical Information – The following information must be submitted with Form PI-7. Place a check next to the appropriate box to verify you have included it in the submittal.	
<input type="checkbox"/> Process Flow Diagram and Process Description <input type="checkbox"/> Emissions data and calculations <input type="checkbox"/> Table 1(a) (Form 10153) Emission Point Summary <input type="checkbox"/> Confidential Information (All pages properly marked "CONFIDENTIAL")	
Has the company implemented the project or waiting on a response from TCEQ? <input type="checkbox"/> Implemented <input type="checkbox"/> Waiting	
Projected Start of Construction Date:	
Is this an annual certification under 30 TAC Chapter 106.261 and/or 106.262? <input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> Information on meeting the specific PBR requirements (<i>PBR checklists maybe used and are optional.</i>)	<input type="checkbox"/> Information on meeting the general PBR requirements 30 TAC 106.4. (<i>PBR checklists maybe used and are optional.</i>)
<i>Note: Please be reminded that if the facilities listed in this registration are subject to the Mass Emissions Cap & Trade program under 30 TAC Chapter 101, Subchapter H, Division 3, the owner/operator of these facilities must possess NO_x allowances equivalent to the actual NO_x emissions from these facilities.</i>	
Distance from this facility's emission release point to the nearest property line:	feet
Distance from this facility's emission release point to the nearest off-property structure:	feet
<i>Note: In limited cases, a map or drawing of the site and surrounding land use may be requested during the technical review or at the request of the TCEQ Regional Office or local air pollution control program during an investigation.</i>	
VI. Delinquent Fees	
This form will not be processed until all delinquent fees and/or penalties owed to the TCEQ or the Office of the Attorney General on behalf of the TCEQ is paid in accordance with the Delinquent Fee and Penalty Protocol. For more information regarding Delinquent Fees and Penalties, go to the TCEQ Web site at: www.tceq.texas.gov/agency/delin/index.html .	



**Texas Commission on Environmental Quality
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Form PI-7 Submission Form**

VII. SUBMITTING COPIES OF THE CERTIFICATION AND REGISTRATION		
Copies must be sent as listed below: Processing delays may occur if copies are not sent as noted.		
Who	Where	What
Air Permits Initial Review Team (APIRT)	Regular, Certified, Priority Mail MC161, P.O. Box 13087 Austin, Texas 78711-3087 Hand Delivery, Overnight Mail MC 161, 12100 Park 35 Circle, Building C, Third Floor Austin, Texas 78753 Fax: (512) 239-2123 <i>(do not follow fax with paper copies)</i>	Originals Form PI-7, Core Data Form and all attachments
Revenue Section, TCEQ	Regular, Certified, Priority Mail MC 214, P.O. Box 13088 Austin, Texas 78711-3088 Hand Delivery, Overnight Mail MC 214, 12100 Park 35 Circle, Building A, Third Floor Austin, Texas 78753	Original Money Order or Check Copy of Form PI-7 and Core Data Form
Appropriate TCEQ Regional Office	To find your Regional Office address, go to the TCEQ Web site at www.tceq.texas.gov.us/ , or call (512) 239-1250.	Copy of Form PI-7, Core Data Form, and all attachments.
Appropriate Local Air Pollution Control Program(s)	To Find your local or Regional Air Pollution Control Programs go to the TCEQ, APD Website at www.tceq.texas.gov/nav/permits/air_permits.html or call (512) 239-1250	Copy of Form PI-7, Core Data Form, and all attachments.



TCEQ Use Only

TCEQ Core Data Form

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided)			
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application)			
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other	
2. Attachments Describe Any Attachments: (ex. Title V Application, Waste Transporter Application, etc.)			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		PI-7, TCEQ-20410 ACI GOP No. 518, TCEQ-10536 PBR Checklist for ACIs	
3. Customer Reference Number (if issued)		4. Regulated Entity Reference Number (if issued)	
CN 600753990		RN 105335459	

SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)		9/27/2013	
6. Customer Role (Proposed or Actual) – as it relates to the <u>Regulated Entity</u> listed on this form. Please check only <u>one</u> of the following:			
<input type="checkbox"/> Owner	<input type="checkbox"/> Operator	<input checked="" type="checkbox"/> Owner & Operator	
<input type="checkbox"/> Occupational Licensee	<input type="checkbox"/> Responsible Party	<input type="checkbox"/> Voluntary Cleanup Applicant	<input type="checkbox"/> Other: _____
7. General Customer Information			
<input type="checkbox"/> New Customer		<input type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State)		<input type="checkbox"/> Change in Regulated Entity Ownership	
		<input checked="" type="checkbox"/> No Change**	
**If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.			
8. Type of Customer:			
<input type="checkbox"/> Corporation	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship- D.B.A	
<input type="checkbox"/> City Government	<input type="checkbox"/> County Government	<input type="checkbox"/> Federal Government	
<input type="checkbox"/> State Government	<input type="checkbox"/> Other Government	<input type="checkbox"/> General Partnership	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Other: _____		
9. Customer Legal Name (If an individual, print last name first: ex: Doe, John)			End Date:
10. Mailing Address:			
City	State	ZIP	ZIP + 4
11. Country Mailing Information (if outside USA)		12. E-Mail Address (if applicable)	
13. Telephone Number		14. Extension or Code	
() -		() -	
16. Federal Tax ID (9 digits)		17. TX State Franchise Tax ID (11 digits)	
18. DUNS Number (if applicable)		19. TX SOS Filing Number (if applicable)	
20. Number of Employees			21. Independently Owned and Operated?
<input type="checkbox"/> 0-20	<input type="checkbox"/> 21-100	<input type="checkbox"/> 101-250	<input type="checkbox"/> 251-500
<input type="checkbox"/> 501 and higher	<input type="checkbox"/> Yes <input type="checkbox"/> No		

SECTION III: Regulated Entity Information

22. General Regulated Entity Information (If 'New Regulated Entity' is selected below this form should be accompanied by a permit application)			
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information <input type="checkbox"/> No Change** (See below)			
**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.			
23. Regulated Entity Name (name of the site where the regulated action is taking place)			
Hidalgo County Precinct 1			

24. Street Address of the Regulated Entity: <i>(No P.O. Boxes)</i>	13266 Mile 1 1/2 West							
	City	Mercedes	State	TX	ZIP	78570	ZIP + 4	
25. Mailing Address:	1902 Joe Stephens Avenue							
	City	Weslaco	State	TX	ZIP	78596	ZIP + 4	3700
26. E-Mail Address:								
27. Telephone Number	28. Extension or Code			29. Fax Number <i>(if applicable)</i>				
(956) 968-8733				(956) 969-1417				
30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)		32. Primary NAICS Code (5 or 6 digits)		33. Secondary NAICS Code (5 or 6 digits)			
4953			562213					
34. What is the Primary Business of this entity? <i>(Please do not repeat the SIC or NAICS description.)</i>								
Sanitation department for Hidalgo County Precinct 1.								

Questions 34 – 37 address geographic location. Please refer to the instructions for applicability.

35. Description to Physical Location:	0.25 mile north of intersection of Mile 11 North Road and Mile 1.5 West Road							
36. Nearest City	County			State		Nearest ZIP Code		
Mercedes	Hidalgo			TX		78570		
37. Latitude (N) In Decimal:		38. Longitude (W) In Decimal:						
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
26	13	7	97	55	56			

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form or the updates may not be made. If your Program is not listed, check other and write it in. See the Core Data Form instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Industrial Hazardous Waste	<input type="checkbox"/> Municipal Solid Waste
<input checked="" type="checkbox"/> New Source Review – Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS	<input type="checkbox"/> Sludge
PBR Registration 82819				
<input type="checkbox"/> Stormwater	<input checked="" type="checkbox"/> Title V – Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil	<input type="checkbox"/> Utilities
	Permit O3278			
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

SECTION IV: Preparer Information

40. Name:	Martin Ramirez	41. Title:	Environmental Coordinator
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(956) 292-7000	4082	() -	martin.ramirez@hchd.org

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

Company:	Hidalgo County	Job Title:	Commissioner
Name <i>(In Print)</i> :	A.C. Cuellar	Phone:	(956) 968-8733
Signature:		Date:	



Texas Commission on Environmental Quality
Air Curtain Incinerator General Operating Permit (GOP) Number 518
Application for an Authorization to Operate

I. COMPANY IDENTIFYING INFORMATION		
A. Company Name: Hidalgo County Precinct 1		
B. Primary Account No.: HN-A010-J		
C. Customer Reference No.: CN 600753990		
D. Regulated Entity No.: RN 105335459		
II. UNIT INFORMATION		
A. Unit Name/No.: S-327 Self Contained Refractory Walled Air Curtain Incinerator, SN#S27FBN06286		
B. Physical Address or Physical Location: Hidalgo County Pct. 1 Sanitation Department at intersection of Mile 14 ⁺ North and Mile 1.5 West.		
City: Mercedes	County: Hidalgo	ZIP Code: 78570
III. APPLICATION AND CERTIFICATION SUBMITTAL TYPE <i>(Place an "X" in the appropriate box.)</i>		
General Operating Permit (GOP) and List Permit Number(s)		
<input type="checkbox"/> Initial GOP Application		
<input type="checkbox"/> Revision to Initial GOP Application		
<input type="checkbox"/> Revision to Issued GOP Authorization to Operate		
<input checked="" type="checkbox"/> Renewal of Issued GOP Authorization to Operate		
O3278		
IV. NEW SOURCE REVIEW (NSR) AUTHORIZATION		
Permit by Rule (30 TAC Chapter 106) or Standard Exemption <i>(only authorizations allowed for GOP Number 518)</i>		
Registration No.: 82819	Date Issued: March 26, 2009	



Texas Commission on Environmental Quality
Air Curtain Incinerator General Operating Permit (GOP) Number 518
Application for an Authorization to Operate

V. OFF-SITE PERMIT REQUEST <i>(Optional for applicants requesting the right to hold the permit at an off-site location.) continued</i>		
A. Office/Facility Name:		
B. Delivery Address:		
City:	County:	ZIP Code:
C. Physical Location:		
D. Contact Name: (Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/>)		
E. Telephone No.:	Additional Telephone No.:	
V. TECHNICAL CONTACT IDENTIFYING INFORMATION <i>(If different from RO or DAR information.)</i>		
A. Technical Contact Name: (Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/>)		
B. Technical Contact Title:		
C. Employer Name:		
D. Mailing Address:		
City:	State:	ZIP Code:
E. Telephone No.:	Fax No.:	
E-mail Address:	Additional Telephone No.:	
VII. APPLICABILITY <i>(Place an "X" in the appropriate boxes.)</i>		
A. <u>Only wood waste, clean lumber, or a mixture of these materials is burned.</u> <i>If the response to Question A is "NO," the air curtain incinerator is not eligible for the GOP</i>		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
B. Title 30 Texas Administrative Code Chapter 111 - Control of Air Pollution From Visible Emissions and Particulate Matter		
1. The application is for one air curtain incinerator.		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO



Texas Commission on Environmental Quality
Air Curtain Incinerator General Operating Permit (GOP) Number 518
Application for an Authorization to Operate

VII. APPLICABILITY (Place an "X" in the appropriate boxes.)	
<p>C. Title 40 Code of Federal Regulations (40 CFR) Part 60, Subpart CCCC - Standards of Performance for Commercial and Industrial Solid Waste Incineration Units for Which Construction is Commenced After November 30, 1999 or for Which Modification or Reconstruction is Commenced on or After June 1, 2001.</p> <p>Title 40 CFR Part 62, Subpart III - Federal Plan Requirements for Commercial and Industrial Solid Waste Incineration Units that Commenced Construction On or Before November 30, 1999</p> <p><i>Note: Air curtain incinerators authorized under this GOP will be subject to the rules identified in Question C OR Question D, but not both.</i></p>	
<p>1. The air curtain incinerator is a distinct operating unit of a commercial or industrial facility.</p> <p><i>If the response to Question VII.C.1 is "NO," the air curtain incinerator is not subject to 40 CFR Part 60, Subpart CCCC or 40 CFR Part 62, Subpart III. Go to section VII.D.</i></p>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>2. The air curtain incinerator was constructed after November 30, 1999 or modified or reconstructed on or after June 1, 2001.</p> <p><i>If the response to Question VII.C.2 is "YES," the air curtain incinerator is subject to the New Source Performance Standards (40 CFR Part 60, Subpart CCCC). If the response to Question VII.C.2 is "NO," the air curtain incinerator is instead subject to the emission guidelines (40 CFR Part 62, Subpart III).</i></p>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>D. Title 40 CFR Part 60, Subpart EEEE - Standards of Performance for Other Solid Waste Incineration Units for Which Construction is Commenced After December 9, 2004, or for Which Modification or Reconstruction is Commenced on or After June 16, 2006.</p>	
<p>1. The air curtain incinerator burns less than 35 tons per day?</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<p>2. The air curtain incinerator is located at an institutional facility (a facility that is owned or operated by an organization having a governmental, educational, civic, or religious purpose such as a school, hospital, prison, military installation, church, or other similar establishment).</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<p>3. The air curtain incinerator burns only materials generated at that institutional facility.</p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<p>4. The air curtain incinerator burns waste collected from the general public and from residential, commercial (such as commercial land clearing), institutional, and industrial sources.</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<p>5. The air curtain incinerator was constructed after December 9, 2004 or modified or reconstructed on or after June 16, 2006.</p> <p><i>If the response to Question VII.D.5 is "YES," the air curtain incinerator is subject to the New Source Performance Standards (40 CFR Part 60, Subpart EEEE). If the response to Question VII.D.5 is "NO," the air curtain incinerator is subject to the emission guidelines.</i></p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO



Texas Commission on Environmental Quality
Air Curtain Incinerator General Operating Permit (GOP) Number 518
Application for an Authorization to Operate

VIII. RESPONSIBLE OFFICIAL (RO) IDENTIFYING INFORMATION		
A. RO Name: (Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/>) A.C. Cuellar, Jr.		
B. RO Title: Hidalgo County Commissioner Precinct 1		
C. Employer Name: Hidalgo County		
D. Mailing Address: 1902 Joe Stephens Ave.		
City: Weslaco	State: TX	ZIP Code: 78596
E. Telephone No.: 956-968-8733	Fax No.: 956-969-1417	
E-mail Address:	Additional Telephone No.:	
F. Effective Date:		
IX. DULY AUTHORIZED REPRESENTATIVE (DAR) IDENTIFYING INFORMATION <i>(if applicable)</i>		
A. DAR Name: (Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/>) Martin Ramirez		
B. DAR Title: Hidalgo County Environmental Compliance Coordinator		
C. Employer Name: Hidalgo County		
D. Mailing Address: 1212 S. 25th		
City: Edinburg	State: TX	ZIP Code: 78542-7223
E. Telephone No.: 956-318-2980	Fax No.:	
E-mail Address: martin.ramirez@hchd.org	Additional Telephone No.:	
F. Effective Date:		
X. CERTIFICATION OF TRUTH		
<p>I, <u>A.C. Cuellar</u>, <i>(Certifier Name printed or typed)</i></p> <p>certify that I am the _____ for this application and that, based on information and (RO or DAR) belief formed after reasonable inquiry, the statements and information contained in this application are true, accurate, and complete. Based, at a minimum, on the compliance method specified in the associated applicable requirements and any other credible evidence or information, all emission units addressed in this application are in compliance with all their respective applicable requirements as identified in this application. As the responsible official it is my intent that all emission units shall continue to be in compliance with all applicable requirements, and all emission units shall be in compliance by the compliance dates with any applicable requirements that become effective during the permit term.</p>		
Responsible Official Signature: _____ Signature Date: _____		
<i>(Complete only when a DAR is delegated)</i>		
Duly Authorized Representative Signature: _____ Signature Date: _____		

PRINT FORM

RESET FORM



Air Curtain Incinerators
Air Permits by Rule (PBR) Checklist
Title 30 Texas Administrative Code § 106.496

Check the most appropriate answer and include any additional information in the spaces provided. If additional space is needed, please include an extra page and reference the rule number. The PBR forms, tables, checklists, and guidance documents are available from the TCEQ, Air Permits Division Web site at: www.tceq.state.tx.us/permitting/air/nav/air_pbr.html.

This PBR ([§ 106.496](#)) requires registration with the commission's Office of Permitting, Remediation, and Registration in Austin before construction begins. Registration of the facility can be performed by completing [Form PI-7](#), "Registration for Permits by Rule," or [Form PI-7-CERT](#), "Certification and Registration for Permits by Rule." This checklist should accompany the registration form.

Definitions:

The following words and terms, when used in this section, shall have the following meanings, unless the context clearly indicates otherwise.

- A. Air curtain incinerator (ACI): An incinerator that operates by forcefully projecting a curtain of air across an open chamber or pit in which combustion occurs. Incinerators of this type may be constructed above or below ground and with or without refractory walls or floor.
- B. Clean lumber: Wood or wood products that have been cut or shaped, including wet, air-dried, and kiln-dried wood products. Clean lumber does not include wood products that have been painted, pigment-stained, or pressure-treated by compounds such as chromate, copper arsenate, pentachlorophenol, or creosote.
- C. Emergency cleanup: The removal and disposal of wastes resulting from events such as high winds, floods, and other events of nature that is necessary to protect public health and safety.
- D. Land-clearing: The removal of trees, brush, and other vegetative matter from agriculture, forest management, or land development.
- E. Municipal solid waste sites: Landfills that may burn on-site or off-site generated waste as specifically authorized by the executive director under [30 TAC § 330](#) of this title (relating to Permit Required)
- F. Noncommercial industrial sites: Locations at which on-site generated waste resulting from the processing or manufacturing of products may be burned. These industrial sites must be noncommercial, as limited by [30 TAC § 335.2\(d\)\(1\)](#) of this title (relating to Permit Required), and burn only on-site generated waste that results from the processing or manufacturing of products, and do not include sites that accept off-site generated waste for disposal or destruction.
- G. Site: One or more contiguous or adjacent properties that are under common control of the same person, or persons.



**Air Curtain Incinerators
Air Permits by Rule (PBR) Checklist
Title 30 Texas Administrative Code § 106.496**

CHECK THE MOST APPROPRIATE ANSWERS AND FILL IN THE BLANKS		
Rule	Questions/Description	Response
Applicability		
(a)	Will the ACI be used only for the burning of trees, clean lumber, and brush from land clearing?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(a)	Will the material burned come from land-clearing, right-of-way maintenance, emergency clean-up operations, noncommercial industrial sites, and municipal solid waste sites?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Scope		
(b)	The ACI will be located at/for (pick one): <input type="checkbox"/> Land Clearing Site <input type="checkbox"/> Land Clearing Public Right-of-Way <input type="checkbox"/> Emergency Clean-up <input type="checkbox"/> Non-commercial Industrial Site <input checked="" type="checkbox"/> Municipal Solid Waste Site	
Operational Limits		
(c)(1)	Will the ACI be located at least 300 feet from the closest property line and any other facility with an air permit, or any ACI operating under PBR?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(2)(A)	Will the ACI be located at the site operate no more than 600 hours in any rolling 12-month period?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(2)(B)	Will the portable ACI be temporarily located at a site and operate up to 180 consecutive calendar days or 600 hours, whichever occurs first, and removed from the site after ceasing operation?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Daily Operation		
(c)(3)(A)	Will the daily burning commence no earlier than one hour after sunrise?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(3)(B)	Will the daily burning be completed on the same day, not later than one hour before sunset? <i>Note: At the end of the burn, embers shall not be flaming or smoking, and no additional fuel shall be added to the ACI.</i>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(3)(C)	Will material added to the ACI be below the air curtain?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(3)(D)	Will an operator remain with the ACI at all times it is operating?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(3)(E)	Will the ACI blower remain on until the end of daily burning or until enough material is consumed so that any remaining material in the trench does not flame or cause smoke that exceeds the requirements of this section when the blower is turned off?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(3)(F)	Will material not being worked and material being stockpiled to be burned at a later date be kept at least 75 feet from the trench or fire box?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(4)(A)	Will visible emissions from the ACI, stockpiles, work areas, and any in-plant roads associated with the facility leave the property for a period exceeding 30 seconds in any six-minute period as determined by United States Environmental Protection Agency Test Method 22?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO



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CHECK THE MOST APPROPRIATE ANSWERS AND FILL IN THE BLANKS		
Rule	Question/Description	Response
Daily Operation (continued)		
(c)(4)(B)	Will best management practices be used to ensure that the ACI blower is operated in a manner to minimize smoke and ash becoming airborne?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(5)	Will the facility be operated in compliance with all requirements of this section?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(c)(6)	Upon notification by a representative of the commission or any local air pollution control program having jurisdiction that the ACI is not complying with the conditions of this section, will any additional material be added to the ACI until the facility returns to compliance?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Trench Burning		
(d)	Does this facility use a trench and air manifold fan system?	<input type="checkbox"/> YES <input type="checkbox"/> NO
(d)(1)	At all times, will the trench be less than 12 feet wide, 35 feet long, and no less than 6 feet deep?	<input type="checkbox"/> YES <input type="checkbox"/> NO
(d)(2)	Does the length of the trench exceed the length of the air manifold fan system?	<input type="checkbox"/> YES <input type="checkbox"/> NO
(d)(3)	Will the walls of the trench be maintained such that they remain sufficiently vertical to maintain the air curtain?	<input type="checkbox"/> YES <input type="checkbox"/> NO
(d)(4)	Will any ash left in the trench be completely covered with incombustible material and soil?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Firebox Burning		
(e)	Does the facility use an above-ground firebox and air manifold fan system?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(e)(1)	Are the interior dimensions of the firebox not greater than 8 feet wide, 35 feet long, and at least 6 feet deep?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(e)(2)	Will the walls of the firebox be maintained such that they remain sufficiently vertical to maintain the air curtain?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(e)(3)	Is the length of the air blower manifold equal to the length of the firebox burning area?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(e)(4)	Will the firebox be equipped with refractory walls and above-fire air supply, and will it operate no more than 750 hours in any rolling 12-month period?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Ash Processing		
(f)(1)(A)	Will all ash be removed from the ACI burning as necessary to maintain efficient combustion?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(f)(1)(B)	Will the ash be removed in such a way that ash dust is minimized during handling?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(f)(1)(C)	Will ash be completely extinguished (not smoldering) before being disposed of or placed in contact with combustible material, and stored so no fire hazard is created?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO



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CHECK THE MOST APPROPRIATE ANSWERS AND FILL IN THE BLANKS		
Rule	Question/Description	Response
Ash Processing		
(f)(2)	<p>Which one of the following methods will be used to dispose of the ash?</p> <p><input type="checkbox"/> Will ash be disposed of by being buried on-site in the ACI trench, be deed recorded, and will a copy of the document be provided to the executive director as required by 30 TAC § 330 (relating to Deed Recordation)?</p> <p><input checked="" type="checkbox"/> Will ash be disposed of by sending it to a Type I landfill and be containerized with no hot coals?</p> <p><input type="checkbox"/> If ash is being disposed of by beneficial use, has it been determined to be acceptable by the executive director in accordance with 30 TAC § 330?</p> <p>Indicate the acceptable beneficial use:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><i>Note: If you have not determined if ash is being disposed of by an acceptable beneficial use, please call the TCEQ Air Permits Division, General/Standard/Permits by Rule (GSR) Section at 512-239-1250.</i></p>	
Other Applicable Rules and Regulations		
(g)(1)-(2)	<p>Do you understand that authorization under this section does not exempt the ACI from any local government regulations or other local government requirements, permits, registrations, or other authorizations required by local authorities, or compliance with any additional state air regulations, state waste regulations, or state water regulations?</p> <p><i>Note: It is recommended that the owner or operator of the incinerator contact the city, county, or other local government and/or the local fire marshal to determine if there are any additional requirements or burn bans in effect that may apply to the facility.</i></p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(g)(3)	<p>For a permanent ACI, is the unit used for Commercial and Industrial Solid Waste Incineration?</p> <p><i>If "YES," commercial and industrial solid waste incinerators must address the applicability of 40 CFR Part 60, NSPS Subpart CCCC, Standards of Performance for Commercial and Industrial Solid Waste Incineration Units for Which Construction is Commenced after November 30, 1999 or for Which Modification or Reconstruction is Commenced on or After June 1, 2001 (as published in the December 1, 2000 issue of the Federal Register).</i></p> <p><i>Note: Commercial and Industrial Solid Waste Incinerators must demonstrate compliance with this federal regulation, including initial stack sampling, opacity reading, reporting, and record keeping.</i></p> <p><i>If "YES," proceed to the next section.</i></p>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> NA



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CHECK THE MOST APPROPRIATE ANSWERS AND FILL IN THE BLANKS		
Rule	Question/Description	Response
Other Applicable Rules and Regulations		
(g)(4)(A)	For an ACI located at a landfill site, is a separate waste authorization under 30 TAC § 330 (relating to Permit Required) being obtained?	<input type="checkbox"/> YES <input type="checkbox"/> NO
(g)(4)(A)	Will the below-ground ACI at a landfill site be located in undisturbed soil not previously excavated, built up, compacted, or used in any type of active landfill operation?	<input type="checkbox"/> YES <input type="checkbox"/> NO
(g)(4)(B)	Do you understand that compliance with all the requirements of this PBR will serve as authorization to store, process, remove, and/or dispose of the ash resulting from the operation of an ACI?	<input type="checkbox"/> YES <input type="checkbox"/> NO
(g)(5)	Do you understand that nothing in this section removes the responsibility of the owner/operator from obtaining any necessary authorization under 30 TAC Chapter 308 of this title (relating to Criteria and Standards for the National Pollutant Discharge Elimination System)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Administrative Requirements		
(h)(1)	Will multiple ACIs, or multiple locations of a single ACI, at a given site meet all design requirements, operating restrictions, and the cumulative annual hourly limitation?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(h)(2)(A)	Is this an initial registration including checklist, Core Data Form, and PI-7 Form?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
(h)(2)(B)	Is this a re-registration due to a Notice of Enforcement including checklist, Core Data Form and PI-7 Form?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
(h)(2)(C)	For an emergency clean-up operation only, was the Regional Notification Standard Permit/Permit by Rule Relocation Form submitted to the Regional Office and local air pollution control program?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
(h)(2)(D)	Is this a registration renewal including checklist, Core Data Form and PI-7 Form?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(h)(3)(B)	For relocation notification, was the Regional Notification Standard Permit/Permit by Rule Relocation Form submitted to the Regional Office and local air pollution control program at least 14 days prior to proposed operation? <i>If "YES," the relocation notification must be sent to the Regional Director with this checklist attached to a Core Data Form.</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA
(h)(4)	Will records be kept to demonstrate compliance with the permit by rule conditions listed above?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(h)(4)(A)	Is the ACI equipped with a run time meter and a written record or log of the hours of operation of the ACI maintained at this site and made available at the request of personnel from the commission or any air pollution control program having jurisdiction?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(h)(4)(B)	Will records be kept to demonstrate compliance with all operational or location requirements? <i>Note: These records must include a copy of the return receipt demonstrating notification to the appropriate regional office and local air pollution control programs having jurisdiction, and plot plans showing distance limits are met. For portable facilities once relocated to a new site, records will be maintained at a central location for a two-year rolling period.</i>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO



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CHECK THE MOST APPROPRIATE ANSWERS AND FILL IN THE BLANKS		
Rule	Question/Description	Response
Administrative Requirements		
(h)(4)(C)	Will a copy of the PBR rule and any operating instructions be kept at the burn site, followed by owners or operators, and be made available at the request of personnel from the commission or any local air pollution control program having jurisdiction?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(h)(4)(D)	Will the ACI unit be clearly and permanently marked with the regulated entity (preferred) or account identification number on the fan manifold or aboveground unit?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Forms		
<ul style="list-style-type: none"> • Form PI-7 (Registration for Permits by Rule) • Core Data Form (See: Instructions for completing the Core Data Form) • Regional Notification Standard Permit/Permit by Rule Relocation Form (Only complete this form if you are relocating an ACI that has been previously registered with the TCEQ within the past five years. If you are providing notification of relocation, you only need to notify the TCEQ Regional Office and any local air control program in the region in which the ACI will be located.) <p>For questions about completing forms or about rule requirements, please call (512) 239-1250.</p>		

Record Keeping: In order to demonstrate compliance with the general and specific requirements for this PBR, the owner or operator of the ACI, at a minimum, must meet the following requirements:

- A. The ACI must be equipped with a run time meter. A written record or log of the hours of operation of the ACI must be maintained at the site and made available at the request of personnel from the commission or any air pollution control program having jurisdiction. This run time record or log must be organized such that compliance with the requirements of this section can be readily determined.
- B. Records must be kept to demonstrate compliance with all operational or location requirements of this section. These records must include a copy of the return receipt demonstrating notification to the appropriate regional office and local air pollution control programs having jurisdiction, and plot plans showing distance limits are met. For portable facilities, once relocated to a new site, records must be maintained at a central location for a two-year rolling period.
- C. A copy of this section and any operating instructions must be kept at the burn site and must be followed by the owners or operators, and must be made available at the request of personnel from the commission or any local air pollution control program having jurisdiction.
- D. The ACI must be clearly and permanently marked with the regulated entity (preferred) or account identification number on the fan manifold or aboveground unit.

In addition, the required record keeping in accordance with [30 TAC § 106.8](#) may be based upon one time calculations, monitoring devices, data sets, or periodic calculations based upon actual production. If you have any question about the type of records that should be maintained, contact the Air Program in the [TCEQ Regional Office](#) for the county in which the site is located.

Recommended Calculation Method: In general, air emissions estimates are not required during a PBR registration review for this facility. However, in order to demonstrate compliance with the general requirements for PBRs, the registrant may be asked to estimate air emissions during an investigation. These estimates can be made by compiling the required records. If sufficient records are maintained on-site and requirements are being met, the applicant and the TCEQ will be able to establish these emission rates if needed.