# Texas Commission on Environmental Quality

# Form OP-UA33

# Mineral Processing Plant Attributes

General:

This form is used to provide a description and data pertaining to all facilities in mineral processing plants with potentially applicable requirements associated with a particular regulated entity number and application. Each table number, along with the possibility of a corresponding letter (i.e., Table 1a, Table 1b), corresponds to a certain state or federal rule. If the rule on the table is not potentially applicable to a mineral processing plant, then it should be left blank and need not be submitted with the application. If the codes entered by the applicant show negative applicability to the rule or sections of the rule represented on the table, then the applicant need not complete the remainder of the table(s) that corresponds to the rule. Further instruction as to which questions should be answered and which questions should not be answered are located in the “Specific” section of the instruction text. The following is included in this form:

[**Table 1**](#Table_1)**:** **Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart LL: Standards of Performance for Metallic Mineral Processing Plants**

[Tables 2a](#Table2a) - [2c](#Table2c): Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart OOO: Standards of Performance for Nonmetallic Mineral Processing Plants

[Table 3a](#Table3a) - [3c](#Table3c): Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart F: Standards of Performance for Portland Cement Plants

[Table 4](#Table_4): Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart HH: Standards of Performance for Lime Manufacturing Plants

[Table 5](#Table_5): Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart UUU: Standards of Performance for Calciners and Dryers in Mineral Industries

[Tables 6a](#Table_6a) - [6c](#Table6c): Title 40 Code of Federal Regulations Part 63 (40 CFR Part 63), Subpart LLL: National Emission Standards for Hazardous Air Pollutants from the Portland Cement Manufacturing Industry

The Texas Commission on Environmental Quality (TCEQ) Regulated Entity Number (RNXXXXXXXXX) and the application area name from Form OP-1 (Site Information Summary) must appear in the header of each page for the purpose of identification for the initial submittal. The date of the initial form submittal must also be included and should be consistent throughout the application (MM DD YYYY). **Leave the permit number blank for the initial form submittal.** If this form is included as part of the permit revision process, enter the permit number assigned by the TCEQ, the area name (from Form OP-1), the date of the revision submittal, and the regulated entity number.

Unit attribute questions that do not require a response from all applicants are preceded by qualification criteria in the instructions. If the unit does not meet the qualification criteria, a response to the question is not required. **Anytime a response is not required based on the qualification criteria, leave the space on the form blank.**

**Notwithstanding any qualification criteria in the form instructions or information provided in other TCEQ guidance, the applicant may leave an attribute question blank (or indicate “N/A” for “Not Applicable”) if the attribute is not needed for the applicable requirement determinations of a regulation for a unit.**

In some situations, the applicant has the option of selecting alternate requirements, limitations, and/or practices for a unit. Note that these alternate requirements, limitations, and/or practices must have the required approval from the TCEQ Executive Director and/or the U.S. Environmental Protection Agency Administrator before the federal operating permit application is submitted.

The Texas Commission on Environmental Quality (TCEQ) **requires** that a Core Data Form be submitted on all incoming registrations unless **all** of the following are met: the Regulated Entity and Customer Reference Numbers have been issued by the TCEQ and no core data information has changed. The Central Registry, a common record area of the TCEQ, maintains information about TCEQ customers and regulated activities, such as company names, addresses, and telephone numbers. This information is commonly referred to as “core data.” The Central Registry provides the regulated community with a central access point within the agency to check core data and make changes when necessary. When core data about a facility is moved to the Central Registry, two new identification numbers are assigned: the *Customer Reference (CN) number* and the *Regulated Entity (RN) number*. The Core Data Form is required if facility records are not yet part of the Central Registry or if core data for a facility has changed. If this is the initial registration, permit, or license for a facility site, then the Core Data Form must be completed and submitted with application or registration forms. If amending, modifying, or otherwise updating an existing record for a facility site, the Core Data Form is not required, unless any core data information has changed. To review additional information regarding the Central Registry, go to the TCEQ website at [www.tceq.texas.gov/permitting/central\_registry/index.html](http://www.tceq.texas.gov/permitting/central_registry/index.html).

38TSpecific:

**[Table 1](#Tbl_1):** **Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart LL: Standards of Performance for Metallic Mineral Processing Plants**

Unit ID No.:

Enter the identification number (ID No.) for the affected facility (maximum 10 characters) at the metallic mineral processing plant (i.e., crusher, screen, bucket elevator, conveyor belt transfer point, thermal dryer, product packaging station, storage bin, enclosed storage area, truck loading station, truck unloading station, railcar loading station or railcar unloading station at the mill or concentrator, or each crusher and screen in open-pit mine) as listed on Form OP‑SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please refer to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/sop\_initial.pdf](https://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/sop_initial.pdf).

Located Outside of Underground Mines**:**

Enter “YES” if the affected facility is located outside of underground mines. Otherwise, enter “NO.”

* Continue Only if “Located Outside of Underground Mines” is “YES.”

Located At a Uranium Ore Processing Plant**:**

Enter “YES” if the affected facility is located at a uranium ore processing plant. Otherwise, enter “NO.”

* Continue Only if “Located at a Uranium Ore Processing Plant” is “NO.”

Construction/Modification Date**:**

Select one of the following options that describes the date of commencement of the most recent construction or modification. Enter the code on the form:

**Code Description**

82- On or before August 24, 1982

82+ After August 24, 1982

* Continue Only if “Construction/Modification Date” is “82+.”

73TStack Emissions**:**

Enter “YES” if the facility has any stack emissions. Otherwise, enter “NO.”

* Continue Only if “Stack Emissions” is “YES.”

Wet Scrubbing Emissions Control Device**:**

Enter “YES” if the affected facility’s stack emissions are controlled by the use of a wet scrubbing emission control device. Otherwise, enter “NO.”

Control Device ID No.:

If applicable, enter the identification number (ID No.) for the control device to which emissions are routed. This number should be consistent with the control device identification number listed on Form OP-SUM. If there is no control device, then leave this column blank (maximum 10 characters).

**[Table 2a](#Tbl_2a): Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart OOO: Standards of Performance for Nonmetallic Mineral Processing Plants**

* Complete this table for all crushers, grinding mills, screening operations, bucket elevators, belt **conveyors, bagging operations, storage bins, and enclosed truck or railcar loading stations located at either a nonmetallic mineral processing plant, or prior to the first storage silo or bin at a hot mix asphalt facility that uses crushers or grinding mills to reduce the size of nonmetallic minerals embedded in recycled asphalt pavement.**
* **Do not complete this table for affected facilities associated with the following operations:**
* Underground mine;
* Plant without crushers or grinding mills above ground; or
* Wet material processing operation (as defined in 40 CFR §60.671.
* **Do not complete this table for affected facilities that are located at the following plants:**
* Fixed sand and gravel plant with a capacity of 25 tons/hour or less (23 Mg/hr);
* Fixed crushed stone plant with a capacity of 25 tons/hour or less (23 Mg/hr);
* Portable sand and gravel plant with a capacity of 150 tons/ hour or less (1136 Mg/hr);
* Portable crushed stone plant with a capacity of 150 tons/ hour or less (136 Mg/hr);
* Common clay plant with a capacity of 10 tons/ hour or less (9 Mg/hr); or
* Pumice plant with a capacity of 10 tons/hour or less (9 Mg/hr)

Unit ID No.:

Enter the identification number (ID No.) for the affected facility (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

Note: If the owner or operator has a facility or facilities that are enclosed and has chosen to comply with the emission limitations of 40 CFR Part 60, Subpart OOO as a building under 40 CFR § 60.672(e), then the identification number should be an identification for that building. All affected facilities enclosed in the building are not to be listed as separate affected facilities.

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf)

93TConstruction/Modification Date:

Select one of the following codes that describe the date of commencement of the most recent construction, modification, or reconstruction. Enter the code on the form.

**Code Description**

83- On or before August 31, 1983

83-08 After August 31, 1983 and before April 22, 2008

08+ On or after April 22, 2008

Continue only if “Construction/Modification Date” is “83-08” or “08+.”

Subpart Applicability:

Select **one** of the following options for subpart applicability. Enter the **code83T** on the form.

**Code Description**

60F Affected facility is subject to 40 CFR Part 60, Subpart F, or follows any other facility in the plant process that is subject to Subpart F

60I Affected facility is subject to 40 CFR Part 60, Subpart I, or follows any other facility in the plant process that is subject to Subpart I

NONE Affected facility is not subject to 40 CFR Part 60, Subparts F or I, and does not follow any other facility in the plant process that is subject to Subparts F or I

Continue only if “Subpart Applicability” is “NONE.”

Facility Type:

Select **one** of the following options for the affected facility located at the nonmetallic mineral processing plant. Enter the **code** on the form.

**Code Description**

BLDGV Building enclosing one or more affected facilities other than a storage bin or enclosed truck or railcar station, which is complying with the requirements of 40 CFR § 60.672(e), and has at least one vent as defined in 40 CFR § 60.671

BLDGVST Building enclosing one or more affected facilities, including a storage bin or enclosed truck or railcar station, which is complying with the requirements of 40 CFR § 60.672(e), and has at least one vent as defined in 40 CFR § 60.671

BLDGNOV Building enclosing one or more affected facilities which is complying with the requirements of 40 CFR § 60.672(e), and does not have any vents as defined in 40 CFR § 60.671

CRSHR Crusher

GRNDML Grinding mill

SCRNOP Screening operation not processing saturated material and that has never processed saturated material

SCRNOP-P Screening operation not currently processing saturated material but that has previously processed saturated material

BKTELV Bucket elevator not processing saturated material that has never processed saturated material

BKTELV-P Bucket elevator not currently processing saturated material but that has previously processed saturated material

TRANSP Transfer point on a belt conveyor not processing saturated material that has never processed saturated material

TRANSP-P Transfer point on a belt conveyor not currently processing saturated material but that has previously processed saturated material

BAGOP Bagging operation

STGBN Storage bin

ENTKRC Enclosed truck or rail car loading station

93TReplacement Type:

Select one of the following options for facility replacement. Enter the code on the form.

**Code Description**

FACRP Affected facility is of equal or smaller size (as defined in §60.671), and has the same function as the existing facility, with no increase in the amount of emissions. (use only if affected facility is NOT part of a production line with all affected facilities replaced with new facilities)

PRORP Affected facility is part of a production line with all affected facilities replaced with new facilities

OTHER Not replacing an existing facility or is other than FACRP or PRORP

**[Table 2b](#Tbl_2b): Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart OOO: Standards of Performance for Nonmetallic Mineral Processing Plants**

* **Continue only if “Replacement Type” is “PRORP” or “OTHER.”**

Unit ID No.:

Enter the identification number (ID No.) for the nonmetallic mineral unit or process (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

* **Do not complete “Capture System” if “Facility Type” is “BLDGV,” “BLDGVST,” or “BLDGNOV.”**

**Capture System**:

Select one of the following options for capture systems. Enter the code on the form.

**Code Description**

CAP Affected facility is using a capture system with no fugitive emissions prior to the control device

CAPFE Affected facility is using a capture system with fugitive emissions prior to the control device (capture system is not completely effective in transporting emissions to the control device)

NOCAP Affected facility is not using a capture system as defined in 40 CFR § 60.671 for emissions control

* Complete “Wet Suppression” only if “Capture System” is “CAPFE” or “NOCAP” or if “Facility Type” is “BLDGV,” “BLDGVST,” or “BLDGNOV.”

**Wet Suppression**:

Select one of the following options for wet suppression. Enter the code on the form.

**Code Description**

DIR Affected facility is using direct water sprays for fugitive emissions control

WCUP Affected facility is using water carryover from upstream water sprays for fugitive emissions control

NONE Affected facility is not using water sprays or water carryover for fugitive emissions control (e.g. partial enclosure)

* Complete “Exhaust Gas Velocity” only if “Facility Type” is “BLDGV” or “BLDGVST.”

Exhaust Gas Velocity:

Select **one** of the following options for measuring of exhaust gas velocity from building vents. Enter the **code** on the form.

**Code Description**

M2A1 Method 2 of 40 CFR Part 60, Appendix A-1

AGFR You are electing to determine the average gas flow rate produced by the power fans to the building vent (due to low exhaust gas velocity)

* Complete “Control Device Type” only if “Capture System” is “CAP” or “CAPFE.”

Control Device Type:

Select **one** of the following options for the type of control device used by the affected facility. Enter the **code** on the form.

**Code Description**

BH Baghouse controlling emissions from an affected facility other than an individual enclosed storage bin

BHISB Baghouse controlling emissions from only an individual enclosed storage bin

WS Wet scrubber

OTHER Dry control device as defined in 40 CFR § 60.671 other than a baghouse (use only if the date of commencement of the most recent construction, modification, or reconstruction for the affected facility is after August 31, 1983 and before April 22, 2008)

Control Device ID No.:

If applicable, enter the identification number for the control device to which emissions are routed (maximum 10 characters). This number should be consistent with the control device identification number listed on Form OP-SUM. Use multiple lines if more than one control device is used. If there is no control device, then leave this column blank.

**[Table 2c](#Tbl_2c): Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart OOO: Standards of Performance for Nonmetallic Mineral Processing Plants**

Unit ID No.:

Enter the identification number (ID No.) for the nonmetallic mineral unit or process (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

* Complete “Baghouse Monitoring” only if “Construction/Modification Date” is “08+” and “Control Device Type” is “BH” or “BHISB.”

Baghouse Monitoring:

Select **one** of the following options for the visible emissions inspection methods for affected facilities using a baghouse to control emissions. Enter the **code** on the form.

**Code Description**

M22A7 Method 22 of 40 CFR Part 60, Appendix A-7

BLDS Using a bag leak detection system and electing to comply with the requirements of § 60.674(d)(1)-(3)

LIME Affected facility is subject to the requirements for processed stone handling operations in 40 CFR Part 63, Subpart AAAAA (Lime Manufacturing Plants) and electing to follow the continuous compliance requirements in row 1 items (i) through (iii) of Table 6 to Subpart AAAAA of 40 CFR Part 63

* Complete “Baghouse Operation” only if:

1. “Facility Type” is “STGBN” AND “Control Device Type” is “BH” or “BHISB.;” or
2. “Facility Type” is “ENTKRC” or “BLDGVST” AND “Control Device Type” is “BH.”

Baghouse Operation:

Select **one** of the following options for storage bins and enclosed truck or railcar loading stations using a baghouse to control emissions. Enter the83T **code83T** on the form.

**Code Description**

1HR- Affected facility operates for less than one hour at time

1HR+ Affected facility operates for at least one hour at a time

* **Do not complete “PM Concentration Method” if “Facility Type” is “BLDGNOV**,” **“Capture System” is “NOCAP,” or “**93TControl Device Type” is93T **“BHISB.”**

PM Concentration Method:

Select **one** of the following options for the method used to determine the particulate matter concentration. Enter the **code** on the form.

**Code Description**

M5A3 Method 5 of 40 CFR Part 60, Appendix A-3

M17A6 Method 17 of 40 CFR Part 60, Appendix A-6

M5IA3 Method 5I of 40 CFR Part 60, Appendix A-3

Do not continue if “**Capture System**” is “CAP.”

Emissions Interference:

Select **one** of the following options for the emissions interference type influencing the affected facility. Enter the **code** on the form.

**Code Description**

INT Emissions from two or more facilities continuously interfere so that the opacity of fugitive emissions from the individual affected facility cannot be read

NOINT No emissions interference occurs for the affected facility

[Table 3a:](#Tbl_3a) Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart F: Standards of Performance for Portland Cement Plants

* Complete Tables 3a - 3c only for the following affected facilities in Portland cement plants: Kiln, clinker cooler, raw mill system, finish mill system, raw mill dryer, raw material storage, clinker storage, finished product storage, conveyor transfer points, *bagging and bulk loading and unloading systems.*

Unit ID No.:

Enter the identification number (ID No.) for the Portland cement plant unit or process as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

93TConstruction/Modification Date:

Select **one** of the following options that describe the date of commencement of the most recent construction, modification, or reconstruction. Enter the 83T**code83T** on the form.

**Code Description**

71- Constructed, reconstructed, or modified on or before August 17, 1971

71-08 Constructed, reconstructed, or modified after August 17, 1971, but on or before June 16, 2008

08+ Constructed or reconstructed after June 16, 2008

08+M Modified after June 16, 2008

Continue only if “Construction/Modification Date” is “71-08”, “08+”, or “08+M.”

Facility Type:

Select **one** of the following options for the facility type within a Portland cement plant. Enter the **code** on the form.

**Code Description**

KILN Kiln

CLINK Clinker cooler

RAW Raw mill system

FINSH Finish mill system

RDRY Raw mill dryer

RSTOR Raw material storage

CLSTO Clinker storage

FNSTO Finished product storage

CVTP Conveyor transfer points

BAG Bagging system

LOAD Loading and unloading system

If “Facility Type” is “RAW,” “FINSH,” “RDRY,” “RSTOR,” “CLSTO,” “FNSTO,” “CVTP,” “BAG,” or “LOAD” continue onto Table 3b. Do not complete the remainder of Table 3a.

* Complete “Kiln/Clinker Cooler Combined” only if “Facility Type” is “KILN.”

Kiln/Clinker Cooler Combined:

Enter “YES” if the kiln and clinker cooler exhaust are combined for energy efficiency purposes and sent to a single control device. Otherwise, enter “NO.”

* Complete “Alternate PM Limit” only if “Kiln/Clinker Cooler Combined” is “YES.”

Alternate PM Limit:

Enter “YES” if the appropriate kiln PM limit is adjusted using the procedures in §63.1343(b). Otherwise, enter “NO.”

* **Complete “Kiln Alkali Bypass” only if “Facility Type” is “KILN.”**

Kiln Alkali Bypass:

Enter “YES” if the kiln has a separate alkali bypass stack. Otherwise, enter “NO.”

**[Table 3b](#Tbl_3b)**: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart F: Standards of Performance for Portland Cement Plants

Unit ID No.:

Enter the identification number (ID No.) for the Portland cement plant unit or process as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

BLDS (Bag Leak Detection System):

Enter “YES” if a bag leak detection system is being used. Otherwise, enter “NO.”

EPA Alternative Requirements:

Enter “YES” if alternative monitoring requirements are approved by the EPA administrator. Otherwise, enter “NO.”

EPA Alternative Requirements93T **ID**:

If alternative continuous monitoring has been approved, then enter the corresponding unique identifier for each unit or process (maximum 10 characters). If the unique identifier is unavailable, then enter the date of the approval letter. The unique identifier and/or the date of the approval letter are contained in the Compliance File under the appropriate account number. Otherwise, leave this column blank.

* Complete “RM/FM Emissions Monitoring System” only if “Facility Type” is “RAW” or “FINSH.”

RM/FM Emissions Monitoring System:

Select one of the following options that describe the raw mill or finish mill emissions monitoring system. Enter the code on the form.

**Code Description**

COMS Continuous opacity monitoring system

BLDS Bag leak detection system

DAYVIS Daily visible emissions observations

**[Table 3c](#Tbl_3c)**: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart F: Standards of Performance for Portland Cement Plants

Unit ID No.:

Enter the identification number (ID No.) for the Portland cement plant unit or process as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

Continue only if “Facility Type” is “KILN” and “Construction/Modification Date” is “08+.”

90% Reduction:

Enter “YES” if there is 90% SOR2R emissions reduction or greater measured across the SOR2R control device. Otherwise, enter “NO.”

[Table 4:](#Tbl_4) Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart HH: Standards of Performance for Lime Manufacturing Plants

* Complete only for rotary lime kilns used in the manufacture of lime.

Unit ID No.:

Enter the identification number (ID No.) for the rotary lime kiln located within a lime manufacturing plant as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

Construction/Modification Date:

Select one of the following options that describe the date of commencement of the most recent construction, modification, or reconstruction. Enter the code on the form.

**Code Description**

77- On or before April 3, 1977

77+ After April 3, 1977

Rotary Lime Kiln:

Enter “YES” if the unit is a rotary lime kiln used in the manufacture of lime. Otherwise, enter “NO.”

Continue only if “Construction/Modification Date” is “77+” and “Rotary Lime Kiln” is “YES.”

Manufacture Type:

Enter “YES” if the facility is used in the manufacture of lime at kraft pulp mills. Otherwise, enter “NO.”

Continue only if “Manufacture Type” is “NO.”

Wet Scrubber:

Enter “YES” if a wet scrubber emissions control device is used. Otherwise, enter “NO.”

Control Device ID No.:

If applicable, enter the identification number for the control device to which emissions are routed (maximum 10 characters). This number should be consistent with the control device identification number listed on Form OP-SUM. Use multiple lines if more than one control device is used. If there is no control device, then leave this column blank.

Continue only if “Wet Scrubber” is “NO.”

Multiple Stack:

Enter “YES” if a control device with a multiple stack exhaust or roof monitor system is used. Otherwise, enter “NO.”

Control Device ID No.:

If applicable, enter the identification number for the control device to which emissions are routed (maximum 10 characters). This number should be consistent with the control device identification number listed on Form OP-SUM. Use multiple lines if more than one control device is used. If there is no control device, then leave this column blank.

[Table 5:](#Tbl_5) Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60), Subpart UUU: Standards of Performance for Calciners and Dryers in Mineral Industries

Unit ID No.:

Enter the identification number (ID No.) for the calciners and dryers as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

Construction/Modification Date:

Select **one** of the following options that describe the date of commencement of the most recent construction, modification, or reconstruction. Enter the **code** on the form.

**Code Description**

86- On or before April 23, 1986

86+ After April 23, 1986

Continue only if “Construction/Modification Date” is “86+.”

Wet Scrubber:

Enter “YES” if the affected unit uses a wet scrubber to comply with the mass emission standard. Otherwise, enter “NO.”

Control Device ID No.:

If applicable, enter the identification number for the control device to which emissions are routed (maximum 10 characters). This number should be consistent with the control device identification number listed on Form OP-SUM. Use multiple lines if more than one control device is used. If there is no control device, then leave this column blank.

Continue only if “Wet Scrubber” is “NO.”

PM Emissions:

Select **one** of the following options for the particulate matter (PM) emission rate of the unit. Enter the **code** on the form.

**Code Description**

10- PM emissions are less than 10 Mg/yr (11 Tons/yr)

10+ PM emissions are greater than or equal to 10 Mg/yr (11 Tons/yr)

Continue only if “PM Emissions” is “10+.”

Dry Control(b):

Enter “YES” if the unit uses a dry control device and is on the following list. Otherwise, enter “NO.”

Ball clay vibrating grate dryer

Bentonite rotary dyer;

Diatomite flash dryer

Diatomite rotary calciner

Feldspar rotary dryer

Fire clay rotary dryer

Industrial sand fluid bed dryer

Kaolin rotary calciner

Perlite rotary dryer

Roofing granules rotating dryer

Talc rotary calciner

Titanium dioxide spray dryer

Titanium dioxide fluid bed dryer

Vermiculite fluid bed dryer

Vermiculite rotary dryer

93TDry Control(c):

Enter “YES” if the unit uses a dry control device and is on the following list. Otherwise, enter “NO.”

Ball clay rotary dyer

Diatomite rotary dyer

Feldspar fluid bed dryer

Fuller’s earth rotary dryer

Gypsum rotary dryer

Gypsum flash calciner

Gypsum kettle calciner

Industrial sand rotary dryer

Kaolin rotary dryer

Kaolin multiple hearth furnace

Perlite expansion furnace

Talc flash dryer

Talc rotary dryer

Titanium dioxide direct or indirect rotary dryer

Vermiculite expansion furnace

Control Device ID No.:

If applicable, enter the identification number for the control device to which emissions are routed (maximum 10 characters). This number should be consistent with the control device identification number listed on Form OP-SUM. Use multiple lines if more than one control device is used. If there is no control device, then leave this column blank.

[Table 6a:](#Tbl_6a) Title 40 Code of Federal Regulations Part 63 (40 CFR Part 63), Subpart LLL: National Emission Standards for Hazardous Air Pollutants from the Portland Cement Manufacturing Industry

* Complete Tables 5a - 5c only for affected sources specified in 40 CFR § 63.1340(b), located at Portland cement plants.

Unit ID No.:

Enter the identification number (ID No.) for the Portland cement plant unit (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

Major Source:

Enter “YES” if the affected source is located at Portland cement plant that is a major source as defined in 40 CFR § 63.2. Otherwise, enter “NO.”

Facility Type:

Select **one** of the following options for the facility type within the Portland cement plant. Enter the **code** on the form.

For sources with a “Major Source” designation of “YES”:

**Code Description**

KILN1 Kiln

ILK-RM1 In-line kiln/raw mill

COOL Clinker cooler

DRY1 Raw material dryer

RFMILL Raw mill or finish mill

MISC Raw material storage bin, clinker storage bin, finished product storage bin, conveying system transfer point, bagging system, bulk loading system, or bulk unloading system

For sources with a “Major Source” designation of “NO”:

**Code Description**

KILN2 Kiln

ILK-RM2 In-line kiln/raw mill

DRY2 Raw material dryer

* Complete “Burning Hazardous Waste” only if “Facility Type” is “KILN1,” “KILN2,” “ILK-RM1” or “ILK‑RM2.”

Burning Hazardous Waste:

Enter “YES” if the kiln or in-line kiln/raw mill burns hazardous waste and is subject to and regulated under 40 CFR Part 63, Subpart EEE. Otherwise, enter “NO.”

* **Do not continue if “Burning Hazardous Waste” is “YES.”**
* Complete “Source Classification” only if “Facility Type” is “KILN1,” “KILN2,” “ILK-RM1,” “ILK-RM2,” “DRY1,” or “DRY2.”

Source Classification:

Select one of the following options for the classification of the source. Enter the code on the form.

**Code Description**

EXST Existing source constructed, reconstructed or modified prior to March 24, 1998

BRNS1 Brownfield source constructed or reconstructed after 03/24/1998 and before 12/02/2005

BRNS2 Brownfield source constructed or reconstructed after 12/02/2005

GFNS1 Greenfield source constructed after 03/24/1998 and before 12/02/2005

GFNS2 Greenfield source constructed after 12/02/2005

* Complete “98% Weight Reduction” only if “Source Classification” is “BRNS2” or “GFNS2.”

98% Weight Reduction:

Enter “YES” if the owner or operator is electing to demonstrate compliance with the 98% by weight reduction limitation for THC. Otherwise, enter “NO.”

Do not continue if “Facility Type” is “DRY2.”

[**Table 6b**](#Tbl_6b): Title 40 Code of Federal Regulations Part 63 (40 CFR Part 63), Subpart LLL: National Emission Standards for Hazardous Air Pollutants from the Portland Cement Manufacturing Industry

Unit ID No.:

Enter the identification number (ID No.) for the portland cement plant unit (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

* Complete “Alkali By-Pass” Only if “Facility Type” is “KILN1,” “ILK-RM1,” or “ILK-RM2.”

Alkali By-Pass:

Enter “YES” if there is an alkali by-pass associated with the kiln or in-line kiln/raw mill. Otherwise, enter “NO.”

* Do not complete “Alternate Opacity Monitoring” if “Facility Type” is “KILN2” or “ILK-RM2.”

Alternate Opacity Monitoring:

Enter “YES” if an application has been submitted and approval received for alternate monitoring requirements to demonstrate compliance with the opacity emission standards. Otherwise, enter “NO.”

* Complete “Raw/Finish Mill Opacity” only if “Facility Type” is “RFMILL.”

Raw/Finish Mill Opacity:

Select **one** of the following options for the opacity monitoring of the raw or finish mill. Enter the **code** on the form.

**Code Description**

VIS Conducting daily visible emissions observations according to 40 CFR § 63.1350(e)

COM Using a continuous opacity monitors

BLDS Using a bag leak detection system

Do not continue if “Facility Type” is “DRY1,” “RFMILL,” or “MISC.”

* Do not complete “Monovent” if “Facility Type” is “KILN2” or “ILK-RM2.”

Monovent:

Enter “YES” if the unit has a control device that exhausts through a monovent. Otherwise, enter “NO.”

* Complete “COM Feasibility” only if “Monovent” is “NO.”

Com Feasibility:

Enter “YES” if the use of a continuous opacity monitor (COM), in accordance with the installation specifications of Performance Specification 1 of 40 CFR Part 60, Appendix B is not feasible. Otherwise, enter “NO.”

* Complete “Multiple Stacks” only if “COM Feasibility” is “NO.”

Multiple Stacks:

Enter “YES” if a fabric filter with multiple stacks or an electrostatic precipitator with multiple stacks is used. Otherwise, enter “NO.”

* Complete “COM” only if “Multiple Stacks” is “YES.”

COM:

Enter “YES” if a COM is used. Otherwise, enter “NO.”

Continue only if “Facility Type” is “KILN1,” “KILN2,” “ILK-RM1,” or “ILK-RM2.”

**[Table 6c](#Tbl_6c)**: Title 40 Code of Federal Regulations Part 63 (40 CFR Part 63), Subpart LLL: National Emission Standards for Hazardous Air Pollutants from the Portland Cement Manufacturing Industry

Unit ID No.:

Enter the identification number (ID No.) for the Portland cement plant unit (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

SOP Index No.:

Site operating permit (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please go to the TCEQ website at [www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title\_V/additional\_fop\_guidance.pdf](http://www.tceq.texas.gov/assets/public/permitting/air/Guidance/Title_V/additional_fop_guidance.pdf).

Performance Test Temperature:

Select **one** of the following options for the average of the performance test run average temperatures at the inlet to the particulate matter (PM) control device. Enter the **code** on the form.

**Code Description**

204- Less than or equal to 204° C (400° F)

204+ Greater than 204° C (400° F)

Carbon Injection:

Enter “YES” if carbon injection is employed as an emission control technique. Otherwise, enter “NO.”

Control Device:

Enter “YES” if a control device other than ACI is used to comply with Mercury emission limitations. Otherwise, enter “NO.”

Alternate Hg Monitoring:

Select **one** of the following options to indicate if alternate monitoring requirements have been approved to demonstrate compliance with the standards for mercury (Hg).

For units without carbon injection:

**Code Description**

AM1 An application has been submitted and approval received for alternate monitoring requirements to demonstrate compliance with the Hg emission standards

NONE No alternate Hg monitoring requirements have been approved

For units with carbon injection:

**Code Descriptio**n

AMF An application has been submitted and approval received for alternate monitoring requirements, in lieu of only the 40 CFR § 63.1350(f) requirements, to demonstrate compliance with the Hg emission standards

AMG An application has been submitted and approval received for alternate monitoring requirements, in lieu of only the 40 CFR § 63.1350(g) requirements, to demonstrate compliance with the Hg emission standards

AMFG An application has been submitted and approval received for alternate monitoring requirements, in lieu of the 40 CFR § 63.1350(f) and (g) requirements, to demonstrate compliance with the Hg emission standards

NONE No alternate Hg monitoring requirements have been approved

* Complete “Hg AMR Id No.” only if “Alternate Hg Monitoring” is “AM1,” “AMF,” “AMG,” or AMFG.”

Hg AMR ID No.:

If alternate monitoring requirements for Hg have been approved, please enter the AMR identification number (ID No.) for each unit (maximum 10 characters). If the AMR identification number is unavailable, enter the date of the approval letter. The identification number and/or the date of the approval letter are contained in the compliance file under the appropriate regulated entity number. Otherwise, leave this column blank.

Alternate D/F Monitoring:

Select one of the following options to indicate if alternate monitoring requirements have been approved to demonstrate compliance with the standards for dioxins and furans (D/F).

For units without carbon injection:

**Code Description**

AM1 An application has been submitted and approval received for alternate monitoring requirements to demonstrate compliance with the D/F emission standards

NONE No alternate D/F monitoring requirements have been approved

For units with carbon injection:

**Code Description**

AMF An application has been submitted and approval received for alternate monitoring requirements, in lieu of only the 40 CFR § 63.1350(f) requirements, to demonstrate compliance with the D/F emission standards

AMG An application has been submitted and approval received for alternate monitoring requirements, in lieu of only the 40 CFR § 63.1350(g) requirements, to demonstrate compliance with the D/F emission standards

AMFG An application has been submitted and approval received for alternate monitoring requirements, in lieu of the 40 CFR § 63.1350(f) and (g) requirements, to demonstrate compliance with the D/F emission standards

NONE No alternate D/F monitoring requirements have been approved

* Complete “D/F AMR Id No.” only if “Alternate Hg Monitoring” is “AM1,” “AMF,” “AMG,” or AMFG.”

D/F AMR ID No.:

If alternate monitoring requirements for D/F have been approved, please enter the AMR identification number (ID No.) for each unit (maximum 10 characters). If the AMR identification number is unavailable, enter the date of the approval letter. The identification number and/or the date of the approval letter are contained in the compliance file under the appropriate regulated entity number. Otherwise, leave this column blank.

# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 1)

# Federal Operating Permit Program

# Table 1: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60)

# Subpart LL: Standards of Performance for Metallic Mineral Processing Plants

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| **Unit ID No.** | **SOP Index No.** | **Located Outside of Underground Mines** | **Located at a Uranium Ore Processing Plant** | **Construction/ Modification Date** | **Stack Emissions** | **Wet Scrubbing Emissions Control Device** | **Control Device**  **ID No.** |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 2)

# Federal Operating Permit Program

# Table 2a: Title 40 Code of Federal Regulations (40 CFR Part 60)

# Subpart OOO: Standards of Performance for Nonmetallic Mineral Processing Plants

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****Unit ID No.**** | ****SOP Index No.**** | ****Construction/Modification Date**** | ****Subpart Applicability**** | ****Facility Type**** | ****Replacement Type**** |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 3)

# Federal Operating Permit Program

# Table 2b: Title 40 Code of Federal Regulations (40 CFR Part 60)

# Subpart OOO: Standards of Performance for Nonmetallic Mineral Processing Plants

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****Unit ID No.**** | ****SOP Index No.**** | ****Capture System**** | ****Wet Suppression**** | ****Exhaust Gas Velocity**** | ****Control Device Type**** | ****Control Device ID No.**** |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 4)

# Federal Operating Permit Program

# Table 2c: Title 40 Code of Federal Regulations (40 CFR Part 60)

# Subpart OOO: Standards of Performance for Nonmetallic Mineral Processing Plants

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****Unit ID No.**** | ****SOP Index No.**** | ****Baghouse Monitoring**** | ****Baghouse Operation**** | ****PM Concentration Method**** | **E**missions Interference**** |
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Texas Commission on Environmental Quality

Mineral Processing Plant Attributes

Form OP-UA33 (Page 5)

Federal Operating Permit Program

Table 3a: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60)

Subpart F: Standards of Performance for Portland Cement Plants

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****Unit ID No.**** | ****SOP Index No.**** | ****Construction/Modification****  ****Date**** | ****Facility Type**** | ****Kiln/Clinker Cooler Combined**** | ****Alternate PM Limit**** | ****Kiln Alkali Bypass**** |
| --- | --- | --- | --- | --- | --- | --- |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 6)

# Federal Operating Permit Program

# Table 3b: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60)

# Subpart F: Standards of Performance for Portland Cement Plants

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****Unit ID No.**** | ****SOP Index No.**** | ****TBLDS**** | ****EPA Alternative Requirements**** | ****EPA Alternative Requirements ID**** | ****RM/FM Emissions Monitoring System**** |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 7)

# Federal Operating Permit Program

# Table 3c: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60)

# Subpart F: Standards of Performance for Portland Cement Plants

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
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| ****Unit ID No.**** | ****SOP Index No.**** | ****90% Reduction**** |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 8)

# Federal Operating Permit Program

# Table 4: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60)

# Subpart HH: Standards of Performance for Lime Manufacturing Plants

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****ID No.**** | ****SOP****  ****Index No.**** | ****Construction/Modification Date**** | ****Rotary Lime Kiln**** | ****Manufacture Type**** | ****Wet Scrubber**** | ****Control Device ID No.**** | ****Multiple Stack**** | ****Control Device ID No.**** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 9)

# Federal Operating Permit Program

# Table 5: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60)

# Subpart UUU: Standards of Performance for Calciners and Dryers in Mineral Industries

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****Unit ID No.**** | ****SOP Index No.**** | ****Construction/Modification Date**** | ****Wet Scrubber**** | ****Control Device ID No.**** | ****PM Emissions**** | ****Dry Control(b)**** | ****Dry Control(c)**** | ****Control Device ID No.**** |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 10)

# Federal Operating Permit Program

# Table 6a: Title 40 Code of Federal Regulations Part 63 (40 CFR Part 63)

# Subpart LLL: National Emission Standards for Hazardous Air Pollutants from the Portland Cement Manufacturing Industry

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****Unit ID No.**** | ****SOP Index No.**** | ****Major Source**** | ****Facility Type**** | ****Burning Hazardous Waste**** | ****Source Classification**** | ****98% Weight Reduction**** |
| --- | --- | --- | --- | --- | --- | --- |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 11)

# Federal Operating Permit Program

# Table 6b: Title 40 Code of Federal Regulations Part 63 (40 CFR Part 63)

# Subpart LLL: National Emission Standards for Hazardous Air Pollutants From the Portland Cement Manufacturing Industry

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
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| ****Unit ID No.**** | ****SOP Index No.**** | ****Alkali By-Pass**** | ****Alternate Opacity Monitoring**** | ****Raw/Finish Mill Opacity**** | ****Monovent**** | ****COM Feasibility**** | ****Multiple Stacks**** | ****COM**** |
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# Texas Commission on Environmental Quality

# Mineral Processing Plant Attributes

# Form OP-UA33 (Page 12)

# Federal Operating Permit Program

# Table 6c: Title 40 Code of Federal Regulations Part 63 (40 CFR Part 63)

# Subpart LLL: National Emission Standards for Hazardous Air Pollutants From the Portland Cement Manufacturing Industry

| **Date** | **Permit No.** | **Regulated Entity No.** |
| --- | --- | --- |
|  |  |  |

| ****Unit ID No.**** | ****SOP Index No.**** | ****Performance Test Temperature**** | ****Carbon Injection**** | ****Control Device**** | ****Alternate Hg Monitoring**** | ****Hg AMR ID No.**** | ****Alternate D/F Monitoring**** | ****D/F AMR ID No.**** |
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