

Permit to Operate Application Form



Air Quality Division
Linn County Public Health
501 13th St. NW
Cedar Rapids, IA 52405

Form PTO: Permit to Operate
Please see instructions on reverse side or call (319) 892-6000

ALL INFORMATION IS REQUIRED FOR PROCESSING – IF INFORMATION IS MISSING PERMIT WILL NOT BE ISSUED

FACILITY INFORMATION

SEE BACK FOR PERMIT APPLICATION FEE INFORMATION.

1) Company Name		1a) Facility Plant Number	
2) Facility Name (if different than #1)			
3) Facility Permit Contact Person/Title			<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.
4) Telephone Number and Email Address			
5) Address Permit should be sent to			
6) City/State/Zip			
7) Equipment Location Address (if different than #5)			
8) City/State/Zip			

PROCESS EQUIPMENT INFORMATION

THIS SECTION IS TO BE COMPLETED TO DESCRIBE THE EQUIPMENT THAT WAS PERMITTED UNDER THE AUTHORIZATION TO INSTALL CONSTRUCTION PERMIT FOR WHICH YOU ARE NOW SEEKING TO OBTAIN A FINAL PERMIT TO OPERATE PERMIT.

9) Equipment Description	
10) Installation Completion Date	
11) Emission Point #	
12) Authorization to Install #	
13) Are All ATI Permit Conditions currently being adhered to?	<input type="checkbox"/> YES <input type="checkbox"/> NO

SOURCE TESTING

THIS SECTION IS REQUIRED TO BE COMPLETED ONLY IF SOURCE TESTING WAS REQUIRED IN THE AUTHORIZATION TO INSTALL CONSTRUCTION PERMIT.

14) Was source testing required?	<input type="checkbox"/> YES <input type="checkbox"/> NO
15) Agency or Organization that Performed Source Test	
16) Date(s) of Test	
17) Was Test Report Submitted Previously? (If NO, submit test report with this application)	<input type="checkbox"/> YES <input type="checkbox"/> NO
18) Results of Test	

CERTIFICATION

I CERTIFY THAT BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY, THE ENCLOSED DOCUMENTS INCLUDING THE ATTACHMENTS ARE TRUE, ACCURATE, AND COMPLETE. LEGAL ENTITLEMENT TO INSTALL AND OPERATE THE EQUIPMENT COVERED BY AND ON THE PROPERTY IDENTIFIED IN THE PERMIT APPLICATION HAS BEEN OBTAINED.

19) Responsible Official's Name/Title	
20) RESPONSIBLE OFFICIAL SIGNATURE	
21) Date	

FOR LINN COUNTY USE ONLY

CDS # (Plant ID):	Field Inspection Approval:	Date:
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Instructions for Form PTO

This form is used by Linn County to issue final operating approval for a source which has obtained and is in compliance with the permit conditions set forth in the Authorization to Install construction permit. An \$80.00 filing fee is required. This initial application fee for operation shall be assessed on a prorated basis from the date of expiration of the Authorization to Install until the end of the Linn County fiscal year at which time the annual Permit to Operate renewal fee will be assessed. If this application is for an already existing and operating unpermitted source, the filing fee is \$80.00 for every year or part thereof for each year in excess of one the source was in operation without a permit. Make checks payable to Linn County Treasurer.

1. Provide the name of the company or organization applying for the permit.
 - 1a. Provide the Linn County Facility I.D. Number. This can be obtained from previously issued facility permits or correspondence. For a new facility, Linn County will assign this number after submission.
2. Name of the facility, which the equipment will be or is located in.
3. Name of the primary person who should be contacted regarding this permit.
4. Telephone number and e-mail address of person listed in (3).
- 5-6. Address that the permit should be sent to.
- 7-8. Address where equipment is located.
9. Provide the name of the equipment.
10. Provide the day, month and year in which the installation was completed.
11. Provide the identification number of the emission point.
12. Provide the Authorization to Install permit number issued by Linn County.
13. All permit conditions stated in the Authorization to Install permit must be adhered prior to Linn County issuing the final Permit to Operate permit. If you are not currently complying with one or more conditions provide an explanation on a separate sheet.
14. Check "YES" if the Authorization to Install permit for this source required a source test to be completed and proceed with 15-18. If no source testing was required skip this section.
15. Provide the name of the firm that performed the testing.
16. Provide the date(s) of the test.
17. A copy of the source test must be submitted to Linn County either prior to or at the time of the submittal of the Permit to Operate application.
18. Provide a summary of the test results for each pollutant and/or opacity whichever is applicable.
- 19-21 Fill in the certification section with a signature, name, title and date. A responsible official must sign the certification. A responsible official could be the owner, the designated representative of the owner, or the engineer who prepared the application and works for the company.

