

DIVISION OF AIR QUALITY AIR QUALITY, ENERGY, AND SUSTAINABILITY

REQUESTING A FACILITY ID NUMBER AND CHANGES TO MASTERFILE

June 5, 2020

Carthen Baker, Division of Air Quality

Energy

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REQUESTING A FACILITY ID

AND

CHANGES TO MASTERFILE FOR MINOR SOURCES

Creation of a Facility ID (PI number)

 Submit an "Air Quality Facility ID Request" Form

Changes of Masterfile

• Submit a "Non-Technical Amendment" Form

Transfer of Ownership

• Submit a "Non-Technical Amendment" Form

CREATION OF A FACILITY ID (PI NUMBER)

- Complete and Submit an "Air Quality Facility ID Request" Form to obtain a Facility ID (PI number). The Facility's information will be entered in the Masterfile.
- No fee required

Note: If a facility is requesting a Facility ID located at the physical address of an existing Facility, a Common Control Questionnaire will be required to complete.

The Air Quality Facility ID Request form and the Common Control Questionnaire can be found in our Stationary Source Website at <u>www.nj.gov/dep/aqpp</u> "Application and Forms" section on the page.

CHANGES TO MASTERFILE

- Submit a Non-Technical Amendment form to provide the revised information.
 - A change in the facility name, mailing address, facility contact, and name of the responsible official who signs the certification (as responsible official is defined at N.J.A.C. 7:27-1.4):
- Applicable fee will be required to process the Non-Technical Amendment in accordance to N.J.A.C. 7:27-8.21(d)1 and N.J.A.C. 7:27 - 8.6 Table A-3.
- The fee of \$190 will be charged per Facility.

TRANSFER OF OWNERSHIP OF A REGISTERED FACILITY

- Submit a Non-Technical Amendment form to provide the revised information:
 - Transfer of ownership or operational control of the facility.
- Applicable fee will be required to process the Non-Technical Amendment in accordance to N.J.A.C. 7:27-8.21(d)2 and N.J.A.C. 7:27 - 8.6 Table A-3.
- The fee of \$190 will be charged per Facility.

NON-TECHNICAL AMENDMENT SUBMITTAL

- The application form for Non-Technical Amendment can be retrieved from our Stationary Source Website at <u>www.nj.gov/dep/aqpp</u>
 "Application and Forms" section on the page.
- The form must be sent via email by the responsible official. This is their way of certifying the form
 - Consultants cannot submit the Non-Tech form on behalf of their clients.
 - Persons with direct knowledge nor administrative staff can submit the Non-Tech form on behalf of their company.

WHEN IS NOT REQUIRED TO PAY THE FEE FOR A NON-TECHNICAL AMENDMENT?

- If a Facility has a pending permit application in-house, and the application fee exceeds the maximum allowed fee per legislation, the fee for the Non-Technical Amendment will be waived.
- If a facility is vacant/abandoned and a new owner/operator will keep same Facility ID, no fee will be charged for the changes requested to Masterfile as long as permit(s) are not transferred from old facility. This is the same procedure as a new facility except the Facility ID is recycled.

Note: Although fee is not required, the Non-Technical Amendment form should be completed and submitted to the Department.

ACTUAL NTA FORM

New Jersey Department of Environmental Protection Air Quality Permitting Program

Non-Technical Amendment Application Form for Non-Major Facilities

This form is to be used only for N.J.A.C. 7:27-8.21 amendments. (Do not use for major facilities subject to N.J.A.C. 7:27-22)

¹<u>Amendment Types: Check all that apply</u>* (Red Asterisks denote required fields)

Change in Facilty Name	Change in Facility Contact Information				
Change in Facility Mailing Address	Correction to Physical Plant Address				
Transfer of Ownership					

Fee - \$190.00 PER APPLICATION

Do Not Submit a Check. After a Permittee submits a completed Non-Technical Amendment, the Department will assess and invoice the Permittee for the base fee due to the Department. Invoices will be sent to the Fee/Billing Contact listed on Page 2. The Permittee should return the invoice along with the base fee to the address on the invoice.

* ^{2.} Facility ID No.	
* ³ Physical Plant Location	1 Address
* New Facility Name	
^{5.} New Mailing Address	⁶ County
7. City	^{8.} State ^{9.} Zip

ACTUAL NTA FORM II

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Transfer of Owne	i sinp.												
^{10.} Previous Busine	ss Name												
Flevious Busilie	ss Maine												
	(o 1)	~											
¹¹ Date Transfer of	t Ownersh	p Occurre	d										

¹². Supply activity numbers to be transferred if you are not transferring the entire facility. Attach list if necessary:

ACTUAL NTA FORM III

FACILITY CONTACT AND COMPANY INFORMATION

Contact types to use below:

- Responsible Official (Required)** **Please note all permit correspondence will go to the address for the responsible official**
- Air Permit Information Contact Individual with Direct Knowledge of Air Permit (Required)
- Fee/Billing Contact Individual Responsible for Receiving Invoices (Required)
- Organization types Corporation, Individually Owned, Partnership, LLC, Private, Public, Municipal, County, Federal, State or Utility.

Contact Type Information

Contact's Company Information

Contact Type: AIR PERMIT INFORMATION CONTACT	^{21.} NJ Tax ID (EIN)					
* 16. Name	*22. Company Name					
* 17. Title	23. Organization Type					
* 18. Telephone	* 24. Mailing Address					
^{19.} Fax	25. Mailing Address Line 2					
* ^{20.} Email	* 26. City	*27. State *28.	Zip			
Copy to the Fee\Billing Contact Copy to the Responsible Official Clear						
Contact Type Information Contact's Company Information						
contact Type Information	Conta	ct's company informa	ation			
Contact Type: FEE/BILLING CONTACT	21. NJ Tax ID (EIN)	ct's company informa				
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Contact Type: FEE/BILLING CONTACT * 16. Name * 17. Title	21. NJ Tax ID (EIN) *22. Company Name 23. Organization Type	ct's Company Informa				
Contact Type: FEE/BILLING CONTACT * 16. Name * 17. Title *18. Telephone	21. NJ Tax ID (EIN) *22. Company Name 23. Organization Type *24. Mailing Address		8.Zip:			

ACTUAL NTA FORM IV

Contact Ty	Contact Type Information Contact's Company Information								
Contact Typ	e: RESPONSIBLE OFFI	CIAL	21. NJ Tax ID (EIN)						
*16. Name			* 22. Company Name						
* 17. Title			23. Organization Type						
*18. Telephone			* 24. Mailing Address						
^{19.} Fax			25. Mailing Address Lir	ne 2 🔽					
* ^{20.} Email			* 26. City		* 27. State	* 28. Zip			
	Copy to the Air Permitting Contact Copy to the Fee\Billing Contact Clear This form must be submitted by a Responsible Official using their company or personal email address to NONTECH@dep.nj.gov								
including	I certify under penalty of law that the submitted information is true, accurate and complete. I am aware that there may be significant civil penalties imposed, including the possibility of fine, imprisonment or both, for submitting false, inaccurate or incomplete information. An email submission of this form by a company responsible official denotes certification.								
*29. Date	t I am a responsible official fo esponsible Official	or the facility requ	esting the above mentioned c	hanges.	I agree to the terms and	conditions stated	above.		



QUESTIONS