

**SECTION 2.0 – PERMIT BY RULE:  
Small Animal Incinerators**

FACILITY NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

NDEE Facility ID#: \_\_\_\_\_ NOTE: YOU MUST ALSO FILL OUT SECTION 1.0 IN ITS ENTIRETY

**PART 3.1: NOTICE OF INTENT: Small Animal Incinerators**

**IMPORTANT: PLEASE READ THE INSTRUCTIONS ACCOMPANYING THIS SECTION**  
Please do **NOT** use pencil to fill out this application. Please type responses or use black ink.

**Boundaries and Location**

<p>a) You are required to define your boundaries in order to prohibit access so that the public cannot come in contact with air emissions that may be harmful to human health. For Small Animal Incinerators, no boundary is needed.</p> <p style="text-align: right;">001.05</p>	<p>b) By applying to be covered by this Permit-by-Rule, you are indicating that the source is (will be) located in an attainment area and a minimum of five (5) miles (will) exist between the source and Weeping Water, NE. Is this statement correct?</p> <p style="text-align: center;"> <input type="checkbox"/> YES    <input type="checkbox"/> NO         </p> <p style="text-align: right;">001.06</p>
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NOTE: If you answered NO to the questions on Boundaries and Location, you do not qualify for the Permit-by-Rule and you must apply for a permit

**Incinerator Information**

1) Incinerator Manufacturer:				
2) Mailing Address:	3) City:	4) State:	5) Zip Code:	
6) Phone:	7) Email:			
8) Model:	9) Design Burning Capacity (lbs/hr):			
	Maximum Capacity (lbs):			

**Incinerator Features**

Please confirm that your Small Animal Incinerator has the following features:

Dual Chambers: <input type="checkbox"/> YES <input type="checkbox"/> NO <p style="text-align: right;">012</p>	Design Burning Capacity <input type="checkbox"/> YES <input type="checkbox"/> NO $\leq 200$ lbs/hr: <p style="text-align: right;">012</p>
Primary Charging Chamber: <input type="checkbox"/> YES <input type="checkbox"/> NO <p style="text-align: right;">012</p>	Stack outlet $\geq 7$ feet above the ground: <input type="checkbox"/> YES <input type="checkbox"/> NO <p style="text-align: right;">012</p>
Secondary Chamber (Afterburner): <input type="checkbox"/> YES <input type="checkbox"/> NO <p style="text-align: right;">012</p>	Secondary Chamber (will be) $\geq 1400$ degrees Fahrenheit during operation: <input type="checkbox"/> YES <input type="checkbox"/> NO <p style="text-align: right;">012.05</p>
Each Chamber has its own burner: <input type="checkbox"/> YES <input type="checkbox"/> NO <p style="text-align: right;">012</p>	Secondary Chamber (will have) residence time $\geq 0.5$ seconds: <input type="checkbox"/> YES <input type="checkbox"/> NO <p style="text-align: right;">012.05</p>

NOTE: If you answered NO to questions on the Incinerator Features, you do not qualify for the Permit-by-Rule and you must apply for a permit.

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**Operating Conditions and Limits**

Please confirm that your Small Animal Incinerator does (will) operate the following ways:

The incineration rate (lb/hr) specified by the manufacturer will never be exceeded:  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.01</div>	The incinerator will be properly operated at all times, in accordance with the manufacturer:  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.08</div>
a) When the weight of the load is estimated, the incinerator will be operated as if the maximum rated amount of material was being incinerated:  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.01A</div>	b) When the weight of the load is known, the incinerator will be operated for a period of time equal to the weight of the load divided by the incineration rate (lb/hr) specified by the manufacturer:  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.01B</div>

NOTE: If you answered NO to questions on the Operating Conditions and Limits, you do not qualify for the Permit-by-Rule and you must apply for a permit

**Incinerator Fuels**

Please confirm that your Small Animal Incinerator will use the following:

Only the following fuels will be used in the Incinerator:  Natural Gas <b>OR</b> Liquid Petroleum Gas <b>OR</b> <input type="checkbox"/> YES <input type="checkbox"/> NO Distillate Oil (Diesel #1 or #2)  <div style="text-align: right;">0012.02</div>	If distillate fuel is used, the sulfur content will be < 0.05% by weight.  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">0012.02</div>
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c) Total Rated Capacity of both Burners \_\_\_\_\_ MMBtu/hr    Total amount of fuel consumed by both Burners \_\_\_\_\_

NOTE: If you answered NO to questions on the Incinerator Fuels, you do not qualify for the Permit-by-Rule and you must apply for a permit.

**Material Constraints**

Please confirm that your Small Animal Incinerator will incinerate the following:

You agree to only incinerate the following material:  Deceased Animals <b>OR</b> Deceased Animals and Medical/Infectious Waste (not to exceed 10% by weight of all waste incinerated in a single load)  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.03</div>
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NOTE: If you answered NO to question on the Material Constraints, you do not qualify for the Permit-by-Rule and you must apply for a permit.

**Particulate Matter Control**

Please confirm that you will do the following:

Particulate matter shall not be allowed to become airborne in such quantities and concentrations that it remains visible in the air beyond your property line. Daily observations will occur in order to ensure compliance.  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.07</div>	Daily Observations of Particulate Emissions shall include: <ul style="list-style-type: none"> <li>• Determination whether particulate matter is becoming airborne in such quantities and concentrations that it remains visible in the air beyond the property line</li> <li>• Assurance that Storage Pile and Haul Road moisture content is adequate.</li> <li>• Other indications that may necessitate corrective action</li> </ul> If correction action is needed, it will be taken immediately.  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.07A</div>
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NOTE: If you answered NO to questions on Particulate Matter Control, you do not qualify for the Permit-by-Rule and you must apply for a permit.

**Record Keeping**

Please confirm that you will do the following:

You will keep the appropriate records for a minimum of five years.

YES  NO 012.09

You will provide the NDEE personnel access to, or copies of, the required records.

YES  NO 012.10

**You are required to keep the following records.**

Please confirm that you will keep the following records:

Records documenting the type of materials incinerated during each charge including the weight of medical/infectious waste and total weight (estimated or actual) of each charge.  YES  NO

Records documenting the date and time daily particulate matter emission observations are conducted.  YES  NO  
A description of the observations made will be included in the documentation.  NO

Records documenting the operating cycle of the main chamber (hours) and calculated incineration rate of each charge.  YES  NO

Records documenting the types of fuel used in the incinerator including sulfur content of distillate fuel, if used.  YES  NO

Records documenting the date and time routine maintenance and preventative actions were performed. A description of the maintenance or action performed will be included in the documentation.  YES  NO

Records documenting the date and time of equipment failures or malfunctions and the date and time remedial action was taken. A description of the failure, malfunction, or remedial action will be included in the documentation.  YES  NO

NOTE: If you answered NO to the questions on Record Keeping or did not check all of the boxes regarding the types of records you must keep, then you do not qualify for the Permit-by-Rule and you must apply for a permit.

**PART 3.2: AIR EMISSIONS TESTING: Small Animal Incinerators**

**IMPORTANT: PLEASE READ THE INSTRUCTIONS ACCOMPANYING THIS SECTION**

**In order to be covered by Title 129, Chapter 42, Air Emissions Testing MUST be conducted on your unit or a similar unit. You must submit air emissions testing results for your unit or submit air emissions testing for a similar unit that yields results that would be expected from your unit.**

Has Air Emissions Testing been conducted on your Small Animal Incinerator (the unit you (will) operate)?  YES  NO  N/A

Has Air Emissions Testing been conducted on a unit identical or similar to the one proposed (same model or similar incinerator features)?  YES  NO  N/A

Has Air Emissions Testing been submitted to the NDEE in the past?  YES  NO  N/A

Date Submitted \_\_\_\_\_

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**If Testing has been Performed, please fill out the information below:**

<b>Testing Company Information</b>				
10) Testing Company Name:				
11) Mailing Address:		12) City:	13) State:	14) Zip Code:
15) Phone:		16) Email Address or Website:		
<b>Emissions Test Summary</b>				
17) EPA Methods Used:				
18) Parameter/Calculation	Run 1	Run 2	Run 3	Average
Percent Excess Oxygen in which Test was Conducted				
TOTAL PM (grains/dscf)				
TOTAL PM Corrected to 7% Oxygen (grains/dscf)				(This value must be below .1 grains/scf Title 129, Ch.22, Sec. 002)
NOTE: Total PM <sub>10</sub> must include both filterable and condensable particulates				
NOTE: The formula in 40 CFR, Part 60.56c (b)(5) provides a suitable formula to correct the oxygen concentration to 7%.				
<b>Please provide a copy of the <u>COMPLETE</u> air emissions test results including results, calculation sheets, field data sheets, analytical data, and equipment calibrations. If you have previously submitted the complete air emissions test results, you do not have to resubmit.</b>				
012.12B				
19) Does your Incinerator Emissions Test Results verify that your incinerator has an opacity of visible emissions from the stack not $\geq$ 20% as evaluated by Method 9 in Appendix A of 40 CFR Part 60?  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.04</div>	20) Does your Incinerator Emissions Test Results verify that the incinerator emits less than 0.60 pounds of particulate matter per million British Thermal unit (MMBtu)?  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: right;">012.06</div>			
NOTE: If you answered NO to questions above, you do not qualify for the Permit-by-Rule and you must apply for a permit.				

**If the Air Emissions Test Results submitted are for a similar unit, please briefly describe why you believe the results accurately reflect what is expected from your unit (e.g. same model, describe similarities)**

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**If Testing has NOT been performed:**

Do you acknowledge that you must perform air emissions testing on your Small Animal Incinerator within 60 days after reaching maximum operating capacity but not later than 180 days after the start-up of operation?

YES    NO    N/A

Do you understand that these test results must prove that your Small Animal Incinerator has an opacity  $\leq 20\%$ , emits less particulate matter than 0.60 lbs/MMBtu per hour, and emits particulate matter less than 0.1 grains/dry standard cubic foot corrected to 7% oxygen?

YES    NO    N/A

Note: If you answered NO to the questions above, you do not qualify for the Permit-by-Rule and must apply for a permit.

**PART 3.3: DIAGRAM: Small Animal Incinerators**

Please provide a diagram of the planned/existing incinerator in the space below or on a separate, attached sheet(s). The incinerator diagram must include all dimensions of the unit including length, width, height, stack height, etc. If a separate, attached sheet(s) is (are) used (e.g., engineering diagrams, surveyor’s drawing, etc), it (they) should be clearly marked as being a replacement(s) for Part 3.3. Also clearly indicate that a separate, attached sheet(s) was submitted in the space below.