

PA-65-00853A

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**PERMIT APPLICATION FOR RACT RENEWAL PERMIT  
KOPPERS INDUSTRIES, INC.  
MONESSEN COKE PLANT**

February 2003

Prepared for:

Koppers Industries Incorporated  
Monessen Coke Plant  
345 Donner Avenue  
Monessen, Pennsylvania 15062

Prepared by:

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Project No. 03-003

**PERMIT APPLICATION FOR RACT RENEWAL PERMIT  
KOPPERS INDUSTRIES, INC.  
MONESSEN COKE PLANT**

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**ATTACHMENTS**

Attachment 1.	Statistical Analysis of Battery Test Results from 1996 Through 2002
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**FIGURES**

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**SECTION 1**

**Description of Permit Application**

**RACT RENEWAL PERMIT APPLICATION  
DESCRIPTION OF PERMIT APPLICATION  
KOPPERS INDUSTRIES, INC.  
MONESSEN COKE PLANT**

Koppers Industries, Inc. (KII) is submitting this permit application to renew their Reasonably Available Control Technology (RACT) Permit (Permit Number 65-000-853), which expires on March 20, 2003 and to request revisions to certain emission limitations for volatile organic compounds (VOCs) and nitrogen oxides (NOx) contained in the RACT permit.

The changes in the emissions of NOx and VOC result mainly from the use of more recent and accurate stack testing and updated emission factors. KII has notified PADEP on many occasions over the past six (6) years of the need to revise the emissions contained in the RACT permit. In December 1997, a letter was sent by KII to PADEP requesting revised limits for all of the NOx and VOC sources. In October 1998, a statistical analysis report was prepared to arrive at the proposed hourly and annual emission limitations for the Battery 1B Combustion Stack, Battery 2 Combustion Stack and Coke Pushing Baghouse. This statistical analysis was revised in June 2002 to add 1999 through 2001 stack test data. Another revision was prepared in January 2003 and is included in this application (Refer to Attachment A).

The following details the requested revisions to the RACT permit by emission unit.

Boilers 1&2

- The NOx emission limitation is to remain unchanged at 112.1 tons per year (tpy) and therefore, NOx emissions or regulatory requirements are not addressed in this application for the boilers.
- The VOC emission limitation is to be changed from 2.7 tpy to 6.89 tpy. This change is based on updated EPA emission factors for natural gas combustion. KII evaluated VOC emissions from the combustion of coke oven gas (COG) using a 1999 stack test and determined that higher VOC emissions result from the combustion of natural gas.

Battery 1B Combustion Stack

- The NOx emission limitations are based on the results of the January 2003 statistical analysis, as follows:
  - Hourly emissions from 60.7 lb/hr to 159.1 lb/hr
  - Annual emissions from 286 tpy to 454 tpy
- The VOC emission limitation are based on the results of the January 2003 statistical analysis, as follows:
  - Hourly emissions from 0.3 lb/hr to 84.5 lb/hr
  - Annual emissions from 1.0 tpy to 139 tpy

### Battery 2 Combustion Stack

- The NO<sub>x</sub> emission limitations are based on the results of the January 2003 statistical analysis, as follows:
  - Hourly emissions from 55.4 lb/hr to 90.1 lb/hr
  - Annual emissions from 246 tpy to 261 tpy
- The VOC emission limitations are based on the results of the January 2003 statistical analysis, as follows:
  - Hourly emissions from 0.5 lb/hr to 28 lb/hr
  - Annual emissions from 1.9 tpy to 54 tpy

### Coke Pushing

- The NO<sub>x</sub> emission limitations are based on the results of the January 2003 statistical analysis and to include the addition of fugitive emissions based on an 85% capture efficiency, as follows:
  - Hourly stack emissions from 7.8 lb/hr to 14.2 lb/hr
  - Hourly fugitive emissions to 2.51 lbs/hr
  - Annual stack emissions from 4.8 tpy to 25.5 tpy
  - Annual fugitive emissions to 4.5 tpy
- The VOC emission limitations are based on the results of the January 2003 statistical analysis and to include the addition of fugitive emissions based on an 85% capture efficiency, as follows:
  - Hourly stack emissions from 1.1 lb/hr to 2.3 lb/hr
  - Hourly fugitive emissions to 0.41 lb/hr
  - Annual stack emissions from 0.6 tpy to 4.5 tpy
  - Annual fugitive emissions to 0.8 tpy

### Flares

- The NO<sub>x</sub> emission limitation from 31.7 tpy to 136 tpy is based on 1) the use of AP-42 emission factors instead of the previously used *AIRS Facility Subsystem, Source Classification Codes and Emission Factor Listing for Criteria Air Pollutants* (EPA 450/4-90-003, March 1990) (1990 AIRS) emissions factor; and 2) on capacity of the flares.
- The VOC emission limitation from 27.6 tpy to 119 tpy is based on 1) the use of engineering calculations involving the COG composition instead of the previously used 1990 AIRS emissions factor; and 2) on capacity of the flares.

### Coal Charging

- The NO<sub>x</sub> and VOC emission are to remain unchanged; however, this category should be called *Battery Operations, including Coal Charging, Battery Door, Lid and Offtake Leaks and Soaking*. This unit is not mentioned any further in this application.

### Coke Quenching

- Very little data is available for VOC emissions from quenching. Some researchers have reported various gaseous emissions, while other industry tests have been unable to duplicate these findings (*Air Pollution Engineering Manual*,

Second Edition, 2000). Draft AP-42, as well as historical AP-42 documents for coke production, do not attempt to quantify gaseous emissions from quenching, but do acknowledge that trace organic emissions may be present, especially when the coke is green. For the annual emission statements, KII does not quantify VOC emissions from quenching since there is such poor data. The current RACT permit contains a VOC emission limitation of 5.4 tpy. KII requests that this limit remain unchanged. This unit is not mentioned any further in this application.

#### Miscellaneous Sources

- The current RACT Permit contains VOC emission limitations for miscellaneous sources, fugitives and the coke by-product plant. KII requests that these three units be combined and called *Miscellaneous Sources, including equipment leaks, product loading and storage tank emissions*. The VOC emission limitation should be 43.8 tpy. This unit is not mentioned any further in this application.

Note that a "full-blown" emissions inventory and regulatory review has not been prepared for each of the above units in this application. The application only addresses emissions and regulatory requirements as they pertain to NOx and VOC emissions for the requested limitation changes. The previous RACT submittal contains the RACT analysis which was used to justify the existing controls as RACT. The purpose of this submittal is to provide a more accurate analysis of the emission rates based on six years of data.

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## **SECTION 2**

### **General Information Form**

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FORM



**COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
GENERAL INFORMATION FORM – AUTHORIZATION APPLICATION**

Before completing this General Information Form (GIF), read the step-by-step instructions provided in this application package. This version of the General Information Form (GIF) must be completed and returned with any program-specific application being submitted to the Department.

Related ID#s (If Known)		<b>DEP USE ONLY</b>
Client ID# _____	APS ID# _____	Date Received & General Notes
Site ID# _____	Auth ID# _____	
Facility ID# _____		

**CLIENT INFORMATION**

<b>DEP Client ID#</b>	<b>Client Type / Code</b>			
	PACOR			
<b>Organization Name or Registered Fictitious Name</b>		<b>Employer ID# (EIN)</b>	<b>Dun &amp; Bradstreet ID#</b>	
KOPPERS INDUSTRIES, INC.		25-1588399	196991582	
<b>Individual Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>Suffix</b>	<b>SSN</b>
<b>Additional Individual Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>Suffix</b>	<b>SSN</b>
<b>Mailing Address Line 1</b>		<b>Mailing Address Line 2</b>		
345 DONNER AVENUE				
<b>Address Last Line – City</b>	<b>State</b>	<b>ZIP+4</b>	<b>Country</b>	
MONESSEN	PA	15062	USA	
<b>Client Contact Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>Suffix</b>	
SHAMITKO	GREGORY		MR	
<b>Client Contact Title</b>	<b>Phone</b>		<b>Ext</b>	
ENVIRONMENTAL MANAGER	724-684-1009			
<b>Email Address</b>	<b>FAX</b>			
SHAMITKOG@KOPPERS.COM	724-684-1011			

**SITE INFORMATION**

<b>DEP Site ID#</b>	<b>Site Name</b>			
	KOPPERS INDUSTRIES, INC. - MONESSEN COKE PLANT			
<b>EPA ID#</b>	<b>Estimated Number of Employees to be Present at Site</b>			
PAD982577082				
<b>Description of Site</b>				
COKE PLANT				
<b>County Name</b>	<b>Municipality</b>	<b>City</b>	<b>Boro</b>	<b>Twp</b>
WESTMORELAND	MONESSEN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>County Name</b>	<b>Municipality</b>	<b>City</b>	<b>Boro</b>	<b>Twp</b>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Site Location Line 1</b>		<b>Site Location Line 2</b>		
345 DONNER AVENUE				
<b>Site Location Last Line – City</b>	<b>State</b>	<b>ZIP+4</b>		
MONESSEN	PA	15062		
<b>Detailed Written Directions to Site</b>				
51 SOUTH TO I-70 WEST. TAKE PA-201 N EXIT (43B). TURN SLIGHT RIGHT ONTO PA-201N/ROSTRAVER RD. TURN LEFT ONTO PA-3013N/C VANCE DEICAS MEMORIAL HWY. TURN LEFT ONTO PA-906S. FOLLOW UNTIL FIRST AVENUE. TURN RIGHT INTO KOPPERS CONTRACTORS ENTRANCE.				
<b>Site Contact Last Name</b>	<b>First Name</b>	<b>MI</b>	<b>Suffix</b>	
GREGORY	SHAMITKO		MR	
<b>Site Contact Title</b>	<b>Site Contact Firm</b>			
ENVIRONMENTAL MANAGER				
<b>Mailing Address Line 1</b>		<b>Mailing Address Line 2</b>		
345 DONNER AVENUE				
<b>Mailing Address Last Line – City</b>	<b>State</b>	<b>ZIP+4</b>		
MONESSEN	PA	15062		

<b>Phone</b> 724-684-1009	<b>Ext</b>	<b>FAX</b> 724-684-1011	<b>Email Address</b> SHAMITKOG@KOPPERS.COM
<b>NAICS Codes</b> (Two- & Three-Digit Codes – List All That Apply) 324199			<b>6-Digit Code</b> (Optional)

**Client to Site Relationship**  
NA

### FACILITY INFORMATION

<b>Modification of Existing Facility</b>	<b>Yes</b>	<b>No</b>
1. Will this project modify an existing facility, system, or activity?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Will this project involve an addition to an existing facility, system, or activity?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*If "Yes", check all relevant facility types and provide DEP facility identification numbers below.*

Facility Type	DEP Fac ID#	Facility Type	DEP Fac ID#
<input checked="" type="checkbox"/> Air Emission Plant		<input type="checkbox"/> Industrial Minerals Mining Operation	
<input type="checkbox"/> Beneficial Use (water)		<input type="checkbox"/> Laboratory Location	
<input type="checkbox"/> Blasting Operation		<input type="checkbox"/> Land Recycling Cleanup Location	
<input type="checkbox"/> Captive Hazardous Waste Operation		<input type="checkbox"/> MineDrainageTrmt/LandRecyProjLocation	
<input type="checkbox"/> Coal Ash Beneficial Use Operation		<input type="checkbox"/> Municipal Waste Operation	
<input type="checkbox"/> Coal Mining Operation		<input type="checkbox"/> Oil & Gas Encroachment Location	
<input type="checkbox"/> Coal Pillar Location		<input type="checkbox"/> Oil & Gas Location	
<input type="checkbox"/> Commercial Hazardous Waste Operation		<input type="checkbox"/> Oil & Gas Water Poll Control Facility	
<input type="checkbox"/> Dam Location		<input type="checkbox"/> Public Water Supply System	
<input type="checkbox"/> Deep Mine Safety Operation -Anthracite		<input type="checkbox"/> Radiation Facility	
<input type="checkbox"/> Deep Mine Safety Operation -Bituminous		<input type="checkbox"/> Residual Waste Operation	
<input type="checkbox"/> Deep Mine Safety Operation -Ind Minerals		<input type="checkbox"/> Storage Tank Location	
<input type="checkbox"/> Encroachment Location (water, wetland)		<input type="checkbox"/> Water Pollution Control Facility	
<input type="checkbox"/> Erosion & Sediment Control Facility		<input type="checkbox"/> Water Resource	
<input type="checkbox"/> Explosive Storage Location		<input type="checkbox"/> Other:	

Latitude/Longitude Point of Origin	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	40	9	47	79	53	3

<b>Horizontal Accuracy Measure</b>	Feet	--or--	Meters
<b>Horizontal Reference Datum Code</b>	<input type="checkbox"/> North American Datum of 1927 <input type="checkbox"/> North American Datum of 1983 <input type="checkbox"/> World Geodetic System of 1984		

<b>Horizontal Collection Method Code</b>
<b>Reference Point Code</b>

<b>Altitude</b>	Feet	760	--or--	Meters
<b>Altitude Datum Name</b>	<input checked="" type="checkbox"/> The National Geodetic Vertical Datum of 1929 <input type="checkbox"/> The North American Vertical Datum of 1988 (NAVD88)			

<b>Altitude (Vertical) Location Datum Collection Method Code</b>
------------------------------------------------------------------

<b>Geometric Type Code</b>
----------------------------

<b>Data Collection Date</b>
-----------------------------

<b>Source Map Scale Number</b>	Inch(es)	=	Feet
	Centimeter(s)	=	Meters

### PROJECT INFORMATION

<b>Project Name</b> RACT PERMIT RENEWAL AND REVISION TO CERTAIN EMISSIONS LIMITATIONS FOR NOX AND VOC			
<b>Project Description</b> SAME AS PROJECT NAME			
<b>Project Consultant Last Name</b> Coy	<b>First Name</b> Kimberly	<b>MI</b> D	<b>Suffix</b> Ms.
<b>Project Consultant Title</b> Senior Engineer		<b>Consulting Firm</b> Air/Compliance Consultants, Inc.	
<b>Mailing Address Line 1</b> 1050 William Pitt Way		<b>Mailing Address Line 2</b>	
<b>Address Last Line – City</b> Pittsburgh		<b>State</b> PA	<b>ZIP+4</b> 15238

Phone

Ext

FAX

Email Address

## Time Schedules

NA

## Project Milestone (Optional)

1. Is this application for an authorization type on the list of authorizations affected by the land use policy? ☐ Yes ☒ No

**Note:** If "Yes", you must complete the following Land Use Information section, unless exempted by Questions 2 or 3 below.

If "No", skip Questions 2 & 3 below as well as the following Land Use Information section.

For referenced list, see Appendix A attached to the GIF Instructions.

2. For an Air program authorization only. All other authorizations continue with Question 3 below. Will the permit authorize the construction of facilities outside an existing permitted area? ☐ Yes ☒ No

**Note:** If "Yes", you must complete the following Land Use Information section unless exempted by Question 3 below.

If "No", skip Question 3 below as well as the following Land Use Information section.

3. Have you attached or submitted municipal and county 'Early Opt Out' approval letters for the project? ☐ Yes ☒ No

**Note:** If "Yes" to Question 3, skip the following Land Use Information section. This should only be checked "Yes" if applicant is choosing the early opt-out option. Required approval letters described in the GIF Checklist and Instructions should be attached.

If "No" to Question 3, continue with the following Land Use Information section.

### LAND USE INFORMATION

**Note:** Applicants are encouraged to submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances.

- |     |                                                                                                                                                                                               |                                     |     |                                     |    |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----|-------------------------------------|----|
| 1.  | Is there a municipal comprehensive plan(s)?                                                                                                                                                   | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 2.  | Is there a county comprehensive plan(s)?                                                                                                                                                      | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 3.  | Is there a multi-municipal or multi-county comprehensive plan?                                                                                                                                | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 4.  | Is the proposed project consistent with these plans? If no plan(s) exists, answer "Yes".                                                                                                      | <input checked="" type="checkbox"/> | Yes | <input type="checkbox"/>            | No |
| 5.  | Is there a municipal zoning ordinance(s)?                                                                                                                                                     | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 6.  | Is there a joint municipal zoning ordinance(s)?                                                                                                                                               | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 7.  | Will the proposed project require a zoning approval (e.g., special exception, conditional approval, re-zoning, variance)? If zoning approval has already been received, attach documentation. | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 8.  | Are any zoning ordinances that are applicable to this project currently the subject of any type of legal proceeding?                                                                          | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 9.  | Will the project be located on a site that has been or is being remediated under DEP's Land Recycling Program?                                                                                | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 10. | Will the project result in reclamation of abandoned mine lands through re-mining or as part of DEP's Reclaim PA Program?                                                                      | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 11. | Will the project be located in an agricultural security area or an area protected under an agricultural conservation easement?                                                                | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 12. | Will the project be located in a Keystone Opportunity Zone or Enterprise Development Area?                                                                                                    | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |
| 13. | Will the project be located in a Designated Growth Area as defined by the Municipalities Planning Code?                                                                                       | <input type="checkbox"/>            | Yes | <input checked="" type="checkbox"/> | No |

## COORDINATION INFORMATION

**Note:** The PA Historical and Museum Commission must be notified of proposed projects in accordance with DEP Technical Guidance Document 012-0700-001 and the accompanying Cultural Resource Notice Form.

**If the activity will be a mining project** (i.e., mining of coal or industrial minerals, coal refuse disposal and/or the operation of a coal or industrial minerals preparation/processing facility), respond to questions 1.0 through 2.5 below.

**If the activity will not be a mining project**, skip questions 1.0 through 2.5 and begin with question 3.0.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0. (DEP Use/48y1)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.1	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be equal to or greater than 200 tons/day? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.2	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be greater than 50,000 tons/year? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.3	Will this coal mining project involve coal preparation/ processing activities in which thermal coal dryers or pneumatic coal cleaners will be used? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters? (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.5	Will this coal mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet? (DEP Use/3140)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well? (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0. (DEP Use/48y1)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.2	Will this non-coal (industrial minerals) mining project involve the crushing and/or screening of sand and gravel with the exception of wet sand and gravel operations (screening only) and dry sand and gravel operations with a capacity of less than 150 tons/hour of unconsolidated materials? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.3	Will this non-coal (industrial minerals) mining project involve the construction, operation and/or modification of a portable non-metallic (i.e., non-coal) minerals processing plant under the authority of the General Permit for Portable Non-metallic Mineral Processing Plants (i.e., BAQ-PGPA/GP-3)? (DEP Use/4x70)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters? (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.5	Will this non-coal (industrial minerals) mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet? (DEP Use/3140)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

3.0	Will your project, activity, or authorization have anything to do with a well related to oil or gas production, site development for such activity, or the waste from such a well? If "Yes", respond to 3.1-3.3. If "No", skip to Question 4.0. (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
3.1	Does the oil- or gas-related project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water (including wetlands)? (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.2	Will the oil- or gas-related project involve discharge of industrial wastewater or stormwater to a dry swale, surface water, ground water or an existing sanitary sewer system or storm water system? If "Yes", discuss in <i>Project Description</i> . (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.3	Will the oil- or gas-related project involve the construction and operation of industrial waste treatment facilities? (DEP Use/4z41)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.0	Will the project involve a construction activity that results in earth disturbance? If "Yes", specify the total disturbed acreage. (DEP Use/4x66)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
4.0.1	Total Disturbed Acreage				
5.0	Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water (including wetlands)? (DEP Use/4x66)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
6.0	Will the project involve discharge of industrial wastewater or stormwater to a dry swale, surface water, ground water or an existing sanitary sewer system or separate storm water system? If "Yes", discuss in <i>Project Description</i> . (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities? (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	Will the project involve construction of sewage treatment facilities, sanitary sewers, or sewage pumping stations? If "Yes", indicate estimated proposed flow (gal/day). Also, discuss the sanitary sewer pipe sizes and the number of pumping stations/treatment facilities/name of downstream sewage facilities in the <i>Project Description</i> , where applicable. (DEP Use/4x62)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0.1	Estimated Proposed Flow (gal/day)				
9.0	Was sewage planning submitted and approved? If "Yes", attach the Act 537 approval letter unless the submitted application is actually requesting Act 537 approval (Approval required prior to 105/NPDES approval). (DEP Use/4x61)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
9.0.1	Is Act 537 Approval Letter attached?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.0	Is this project for the beneficial use of biosolids for land application within Pennsylvania? If "Yes" indicate how much (i.e. gallons or dry tons per year). (DEP Use/4X62)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
10.0.1	Gallons Per Year (residential septage)				
10.0.2	Dry Tons Per Year (biosolids)				
11.0	Does the project involve construction, modification or removal of a dam? If "Yes", identify the dam. (DEP Use/3140)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
11.0.1	Dam Name				
12.0	Will the project interfere with the flow from, or otherwise impact, a dam? If "Yes", identify the dam. (DEP Use/3140)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
12.0.1	Dam Name				
13.0	Will the project involve operations (excluding during the construction period) that produce air emissions (i.e., NOX, VOC, etc.)? If "Yes", identify each type of emission followed by the amount of that emission. (DEP Use/4x70)	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
13.0.1	Enter all types & amounts of emissions; separate each set with semicolons.				
	REFER TO PLAN APPROVAL AND COMBUSTION FORMS				

14.0	<b>Is an on-site drinking water supply (well), other than individual house wells, proposed for your project?</b> If "Yes", indicate total number of people served and/or the total number of connections served, if applicable. Also, check all proposed sub-facilities. (DEP Use/4x81)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
14.0.1	Number of Persons Served				
14.0.2	Number of Employee/Guests				
14.0.3	Number of Connections				
14.0.4	Sub-Fac: Distribution System	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.5	Sub-Fac: Water Treatment Plant	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.6	Sub-Fac: Source	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.7	Sub-Fac: Pump Station	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.8	Sub-Fac: Entry Point	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.9	Sub-Fac: Transmission Main	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.10	Sub-Fac: Storage Facility	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
15.0	<b>Will your project involve purchasing water in bulk, excluding during the construction period?</b> If "Yes", name the provider. Also, indicate the daily number of employees or guests served. (DEP Use/4x81)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
15.0.1	Provider's Name				
15.0.2	Number of Employees/Guests				
16.0	<b>Is your project to be served by public water supply?</b> If "Yes", indicate name of supplier and attach letter from supplier stating that it will serve the project. (DEP Use/4x81)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
16.0.1	Supplier's Name				
16.0.2	Letter of Approval from Supplier is Attached	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
17.0	<b>Will this project involve a new or increased drinking water withdrawal from a stream or other water body?</b> If "Yes", provide name of stream. (DEP Use/4x81)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
17.0.1	Stream Name				
18.0	<b>Will the construction or operation of this project involve treatment, storage, reuse, or disposal of waste?</b> If "Yes", indicate what type (i.e., hazardous, municipal (including infectious & chemotherapeutic), residual) and the amount to be treated, stored, re-used or disposed. (DEP/Use4x32)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
18.0.1	Type & Amount				
19.0	<b>Will your project involve the removal of coal, minerals, etc. as part of any earth disturbance activities?</b> (DEP Use/48y1)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
20.0	<b>Does your project involve installation of a field constructed underground storage tank?</b> If "Yes", list each Substance & its Capacity. <b>Note:</b> Applicant may need a Storage Tank Site Specific Installation Permit. (DEP Use/2570)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
20.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
21.0	<b>Does your project involve installation of an aboveground storage tank greater than 21,000 gallons capacity at an existing facility?</b> If "Yes", list each Substance & its Capacity. <b>Note:</b> Applicant may need a Storage Tank Site Specific Installation Permit. (DEP Use/2570)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
22.0	<b>Does your project involve installation of a tank greater than 1,100 gallons which will contain a highly hazardous substance as defined in DEP's Regulated Substances List, 2570-BK-DEP2724?</b> If "Yes", list each Substance & its Capacity. <b>Note:</b> Applicant may need a Storage Tank Site Specific Installation Permit. (DEP Use/2570)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
22.0.1	Enter all substances & capacity of each; separate each set with semicolons.				

23.0 Does your project involve installation of a storage tank at a new facility with a total AST capacity greater than 21,000 gallons? If "Yes", list each Substance & its Capacity. **Note:** Applicant may need a Storage Tank Site Specific Installation Permit. (DEP Use/2570) ☐ Yes ☒ No

23.0.1 Enter all substances & capacity of each; separate each set with semicolons.

### CERTIFICATION

I certify that I have the authority to submit this application on behalf of the applicant named herein and that the information provided in this application is true and correct to the best of my knowledge and information.

Type or Print Name RICHARD JAMES BURKHART

PLANT MANAGER

Signature

Title

Date

2-3-03

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## **SECTION 3**

### **Boiler 1 & 2**

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF AIR QUALITY

COMBUSTION

Submit in Triplicate

**Application for Plan Approval to Construct, Modify or  
Reactivate an Air Contamination Source and/or Air Cleaning Device**

*Section A - Identity and Location of Air Contamination Source*

<b>1A. Application is being made for:</b>  <input type="checkbox"/> Construction of New Source <input type="checkbox"/> Reactivation of a Source <input checked="" type="checkbox"/> Modification of Existing Source <input type="checkbox"/> Installation of Air Cleaning Device <input type="checkbox"/> Amendment to a Previous Application Previous Application No. _____ <input type="checkbox"/> Other _____		<b>OFFICIAL USE ONLY</b>  Application No. _____ Plant Code _____ Unit ID _____ Date Received _____ Reviewed By _____  Potential Emissions (TPY) PM _____ SO <sub>2</sub> _____ VOC _____ NO <sub>x</sub> _____ CO _____ Other _____  Actual Emissions (TPY) PM _____ SO <sub>2</sub> _____ VOC _____ NO <sub>x</sub> _____ CO _____ Other _____  Change in Actual Emissions (+ or -) PM _____ SO <sub>2</sub> _____ VOC _____ NO <sub>x</sub> _____ CO _____ Other _____	
<b>1B. Type of source</b> <b>BOILER 1&amp;2</b>			
<b>1C. Plant in which source is located</b>  <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> NEW           <input checked="" type="checkbox"/> EXISTING         </div>			
<b>1D. If source is new, does it replace another source</b> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> YES           <input checked="" type="checkbox"/> NO         </div>		<b>1E. Expected date of completion</b> NA	
<b>2A. Owner of source</b> <b>KOPPERS INDUSTRIES, INC., MONESSEN COKE PLANT</b>		<b>2B. Employer I.D. No. (Federal IRS No.)</b> <b>25-1588399</b>	
<b>3A. Owners designation of source and /or plant if any</b> <b>BOILER 1&amp;2.</b> <b>THE APPLICATION WILL ONLY ADDRESS EMISSIONS OF NOX AND VOC SINCE THESE POLLUTANTS ARE ADDRESSED IN THE RACT PERMIT.</b>		<b>3B. Location of source</b> (Street address or Route No.) <b>345 DONNER AVENUE</b> <b>MONESSEN, PA 15062</b>  <b>Political Subdivision</b> (Township, etc.) <b>MONESSEN</b> <b>WESTMORELAND</b>	
<b>3C. Mailing address (Street or P.O. Box, City, Zip Code)</b> <b>345 DONNER AVENUE</b> <b>MONESSEN, PENNSYLVANIA 15062</b>		<b>3D. Telephone No.</b> <b>724-684-1009</b>	
<b>4A. Person to contact regarding this Application (name and title)</b> <b>GREGORY SHAMITKO</b>		<b>4B. Mailing address (Street, P.O. Box, City State Zip Code)</b> <b>345 DONNER AVENUE</b> <b>MONESSEN, PENNSYLVANIA 15062</b>	
<b>4C. Telephone No.</b> <b>724-684-1009</b>			
<b>5. Official signing application must be an agent of the Company having primary responsibilities for operation of the facility to which this application applies. Although he may not have participated in the design of the facility he should be responsible for approval of the design.</b>			

**AFFIDAVIT**

I, **RICHARD JAMES BURKHART**, being duly sworn according to law depose and say that I am the official have in primary responsibility for the design and operation of the facilities to which this application applies and that the information included in the foregoing application is true to the best of my knowledge, information and belief.

Sworn to and subscribed before me this 3rd day  
of February 2003.

*Elita L. Watkins*  
Elita L. Watkins, Notary Public  
Monessen, Westmoreland County  
My Commission Expires Nov. 24, 2003

*R.J. Burkhardt*  
Signature

**PLANTMANAGER**

## Section B.2 - Combustion Units Information

## 1. COMBUSTION UNITS

A. Manufacturer <b>TAMPELLA/KEELER</b>	B. Model No. <b>DS-M129-6</b>	C. No. of Units <b>2</b>
D. Rated heat input (Btu/hr) <b>143 MMTU/HR, EACH</b>	E. Peak heat input (Btu/hr)	F. Use <b>STEAM</b>
G. Method firing <b>SEQUENTIALLY</b>		

## 2. FUEL REQUIREMENTS

TYPE	QUANTITY HOURLY	ANNUALLY	SULFUR	% ASH (WEIGHT)	BTU CONTENT
OIL NUMBER _____	GPH @ 60 °F	x 10 <sup>3</sup> Gal.	% by wt.		Btu/Gal. & lbs/Gal. @ 60°F
NATURAL GAS (SECONDARY FUEL)	<b>143,000 SCF EACH</b>	<b>1,252 MMCF EACH</b>	<b>NEGLIGIBLE</b>	<b>NEGLIGIBLE</b>	<b>1000 BTU/SCF</b> Btu/SCF
GAS (OTHER) _____	SCFH	x 10 <sup>6</sup> SCF	gr/100 SCF		Btu/SCF
COAL _____	TPH	Tons	% by wt.		Btu/lb.
OTHER <b>COG</b>	<b>~ 292,000 scf/hr EACH</b>	<b>2,557 MMCF EACH</b>	<b>45 gr/100 scf</b>	<b>Trace</b>	<b>~ 490-550 BTU/SCF</b>

## 3. COMBUSTION AIDS, CONTROLS, AND MONITORS

<input type="checkbox"/> A. Oven fire jets <b>NA</b>	Type	Number	Height above grate
<input type="checkbox"/> B. Draft controls <b>NA</b>	Type		
<input type="checkbox"/> C. Oil preheat <b>NA</b>			
<input type="checkbox"/> D. Soot cleaning <b>NA</b>	Temperature (°F)	Frequency	
<input type="checkbox"/> E. Stack sprays <b>NA</b>	Method		
<input type="checkbox"/> F. Opacity monitoring device <b>NA</b>		Method	Cost
<input checked="" type="checkbox"/> G. Sulfur oxides monitoring device <b>H2S Monitor</b>	Type <b>Tutweiler</b>	Method	Cost
<input type="checkbox"/> H. Nitrogen oxides monitoring device <b>NA</b>	Type	Method	Cost
<input type="checkbox"/> I. Fuel metering and/or recording devices <b>NA</b>	Type	Method	Cost
<input type="checkbox"/> J. Atomization interlocking device <b>NA</b>	Type	Method	Cost
<input type="checkbox"/> K. Collected flyash re entrainment preventative device <b>NA</b>	Type		
<input type="checkbox"/> L. Modulation controls <div style="text-align: center;"><input type="checkbox"/> Step      <input type="checkbox"/> Automatic</div>			

4. ☐ Flyash reinjection      Describe Operation  
**NA**

5. Describe method of supplying make up air to the furnace room.

**NA**

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*Section B.2 - Combustion Units Information, Continued*

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**6. OPERATING SCHEDULE**

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24 hours/day

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7 days/week

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52 weeks/year

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**7. SEASONAL PERIODS (MONTHS) ALL YEAR ROUND**Operating using primary fuel  
\_\_\_\_\_ to \_\_\_\_\_Operating using secondary fuel  
\_\_\_\_\_ to \_\_\_\_\_Non-operating  
\_\_\_\_\_ to \_\_\_\_\_

- 
8. If heat input is in excess of 250 x 106 Btu/hr., describe fully the facilities provided to record the following: rate of fuel burned; heating value; sulfur and ash content of fuels; smoke, sulfur oxides and nitrogen oxides emissions; and if electric generating plant, the average electrical output and the minimum and maximum hourly generation rate.

NA

- 
9. Describe modification to boiler in detail.

**AS DESCRIBED IN THE COVER LETTER, KII IS RENEWING THE RACT PERMIT, WHICH EXPIRES ON MARCH 20, 2003. THE RACT PERMIT IMPOSES ANNUAL EMISSION LIMITATIONS FOR NOX AND VOC. KII WISHES TO REVISE THE EMISSION LIMIT FOR VOC ONLY BASED ON AN EVALUATION OF 1999 STACK TEST RESULTS AND UPDATED AP-42 EMISSION FACTORS. REFER TO ATTACHMENT 2 FOR THE CALCULATIONS.**

- 
10. Type and method of disposal of all waste materials generated by this boiler.  
(Is a Solid Waste Disposal Permit needed? ☐ YES ☐ NO )

NA

- 
11. Briefly describe the method of handling the waste water from this boiler and its associated air pollution control equipment.  
(Is a Water quality Management Permit needed? ☐ YES ☐ NO )

NA

- 
12. Attach any and all additional information necessary to perform a thorough evaluation of this boiler.

NA

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*Section D - Flue and Air Contaminant Emission Information*

**1. STACK AND EXHAUSTER**

A. Exhauster (attach fan curves) \_\_\_\_\_ in w.g. \_\_\_\_\_ HP @ \_\_\_\_\_ RPM

B. Stack height above grade (ft) **126** C. Stack diameter (ft) **5.58** D. Weather Cap  
☐ YES ☒ NO

E. Indicate on an attached sheet the location of sampling ports with respect to exhaust fan, breeching, etc.  
 Give all necessary dimensions.

**FOUR 90 DEGREE OPPOSED SAMPLING PORTS. TEST PORTS LOCATED  
 30 FEET DOWNSTREAM NEAREST DISTURBANCE AND 12 FEET UPSTREAM  
 NEAREST DISTURBANCE**

F. Can the control equipment be bypassed: (If Yes, explain) ☐ YES ☒ NO

**LOW NOX BURNERS AND FLUE GAS RECIRCULATION**

**2. ATMOSPHERIC EMISSIONS**

A. Particulate matter emissions (lbs/hr or gr/SCF Dry)  
**NA - Application for NOx and VOC limits only**

B. Gaseous contaminant emissions

Contaminants	Concentration	
(1) <b>VOC</b> _____ ppm (Vol.)	_____ lbs/hr	<b>0.787 lb/hr, EACH</b>
(2) _____ ppm (Vol.)	_____ lbs/hr	
(3) _____ ppm (Vol.)	_____ lbs/hr	

C. Outlet volume of exhaust gases

	<b>~ 24,800</b>	CFM (Standard)
@	<b>~ 492</b>	°F
	<b>~ 21</b>	% Moisture

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*Section E - Miscellaneous Information*

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1. Describe fully facilities to monitor and record the emission of air contaminants. Provide detailed information to show that the facilities provided are adequate. Include cost and maintenance information. Periodic maintenance reports are to be submitted to the Department.

**GOOD ENGINEERING PRACTICES**

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2. Attach Air Pollution Episode Strategy (if applicable)

**NA**

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3. The following requirements are applicable only to construction of a new source.

a. Briefly describe the nature of the area in which the proposed source is located. Attach a copy of the appropriate portion of the quadrangle map (7 1/2' scale) published by the U.S. Geological Survey and identify the location of proposed source.

**NA**

b. Demonstrate that the establishment of the new source is justifiable as a result of necessary economic or social development.

**NA**

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4. Attach calculations and any additional information necessary to thoroughly evaluate compliance with all the applicable requirements of Article III of the rules and regulations of the Department of Environmental Resources and those requirements promulgated by the Administrator of the United States Environmental Protection Agency pursuant to the provisions of the Clean Air Act.

**REFER TO ADDENDUM A FOLLOWING THIS FORM.**

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5. List all attachments made to this Application.

**REFER TO TABLE OF CONTENTS OF PACKAGE**

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**ONLY APPLICABLE REQUIREMENTS PERTAINING TO VOC EMISSIONS WILL BE ADDRESSED. ALL OTHER APPLICABLE REQUIREMENTS ARE CONTAINED IN THE TITLE V PERMIT APPLICATION.**

[illegible]

**Pennsylvania Department of Environmental Protection  
Bureau Of Air Quality**

**Addendum 1: Method of Compliance Worksheet**

**Section 1: Applicable Requirement**

Federal Tax Id: 25-1588399 Firm Name: Koppers Industries, Inc.

Plant Code: \_\_\_\_\_ Plant Name: Monessen Coke Plant

**Applicable Requirement for:** (please check only one box below)

- ☐ The entire site
- ☐ A group of sources, Group ID: \_\_\_\_\_
- ☒ A single source, Unit ID: Boilers 1&2
- ☐ Alternative Scenario, Scenario Name: \_\_\_\_\_

Citation #: 65-000-853

**This plan approval (Condition 7) imposes the following VOC emission limitation for the units:**

VOC      2.7 tpy

**KII wishes to revise this limits as follows:**

VOC      6.89 tpy

**The proposed limit was derived using results from a 1999 stack test.**

**Compliance Method based upon:** ☐ Applicable Requirement ☒ Gap Filling Requirement

**Method of Compliance Type:** (Check all that applies and complete all appropriate sections below)

- ☐ Monitoring ☐ Testing ☒ Reporting
- ☐ Record Keeping ☒ Workpractice Standard

**Section 2: Monitoring**

1. Monitoring device type (stack test, CEM, etc): \_\_\_\_\_
2. Monitoring device locations: \_\_\_\_\_
3. Describe all parameters being monitored along with the frequency and duration of monitoring each parameter?  
\_\_\_\_\_  
\_\_\_\_\_
4. How will data be reported? \_\_\_\_\_  
\_\_\_\_\_

**Addendum 1: Method of Compliance Worksheet****Section 3: Testing**

1. Reference Test Method Description: \_\_\_\_\_

2. Reference Test Method Citation: \_\_\_\_\_

**Section 4: Record Keeping**

Describe what parameters will be recorded and the frequency of recording:

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**Section 5: Reporting**

1. Describe what is to be reported and the frequency of reporting:

**Annual emission statements, in accordance with 25 PA 135.21, will be submitted to demonstrate compliance with the annual emission limitations. An emission factor was developed using 1999 stack test data.**

2. Reporting start-date: \_\_\_\_\_

**Section 5: Work Practice Standard**

Describe any work practice standards:

**KII will operate the units in accordance with good engineering and maintenance practices.**

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**Pennsylvania Department of Environmental Protection  
Bureau Of Air Quality**

**Addendum 1: Method of Compliance Worksheet**

**Section 1: Applicable Requirement**

Federal Tax Id: 25-1588399 Firm Name: Koppers Industries, Inc.

Plant Code: \_\_\_\_\_ Plant Name: Monessen Coke Plant

**Applicable Requirement for:** (please check only one box below)

- ☐ The entire site
- ☐ A group of sources, Group ID \_\_\_\_\_
- ☒ A single source, Unit ID: Boilers 1&2
- ☐ Alternative Scenario, Scenario Name: \_\_\_\_\_

Citation #: 65-302-071

**THERE ARE NO REQUIREMENTS PERTAINING TO VOC EMISSIONS IN THIS PERMIT.**

**Compliance Method based upon:** ☐ Applicable Requirement ☒ Gap Filling Requirement

**Method of Compliance Type:** (Check all that applies and complete all appropriate sections below)

- ☐ Monitoring ☐ Testing ☐ Reporting
- ☐ Record Keeping ☐ Workpractice Standard

**Section 2: Monitoring**

1. Monitoring device type (stack test, CEM, etc): \_\_\_\_\_
2. Monitoring device locations \_\_\_\_\_
3. Describe all parameters being monitored along with the frequency and duration of monitoring each parameter?  
\_\_\_\_\_  
\_\_\_\_\_
4. How will data be reported? \_\_\_\_\_  
\_\_\_\_\_

**Addendum 1: Method of Compliance Worksheet****Section 3: Testing****For demonstration of hourly emissions:**

1. Reference Test Method Description: \_\_\_\_\_

2. Reference Test Method Citation: \_\_\_\_\_

**Section 4: Record Keeping**

Describe what parameters will be recorded and the frequency of recording:

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**Section 5: Reporting**

1. Describe what is to be reported and the frequency of reporting:

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2. Reporting start-date: \_\_\_\_\_

**Section 5: Work Practice Standard**

Describe any work practice standards:

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**Pennsylvania Department of Environmental Protection  
Bureau Of Air Quality**

**Addendum 1: Method of Compliance Worksheet**

**Section 1: Applicable Requirement**Federal Tax Id: 25-1588399 Firm Name: Koppers Industries, Inc.Plant Code: \_\_\_\_\_ Plant Name: Monessen Coke Plant**Applicable Requirement for:** (please check only one box below)

- ☐ The entire site
- ☐ A group of sources, Group ID: \_\_\_\_\_
- ☒ A single source, Unit ID: Boilers 1&2
- ☐ Alternative Scenario, Scenario Name: \_\_\_\_\_

Citation #: 25 PA 129.91-129.95**Compliance Method based upon:** ☐ Applicable Requirement ☒ Gap Filling Requirement

Method of Compliance Type: (Check all that applies and complete all appropriate sections below)

- ☐ Monitoring ☐ Testing ☐ Reporting
- ☐ Record Keeping ☒ Workpractice Standard

**Section 2: Monitoring**

1. Monitoring device type (stack test, CEM, etc): \_\_\_\_\_
2. Monitoring device locations: \_\_\_\_\_
3. Describe all parameters being monitored along with the frequency and duration of monitoring each parameter?  
\_\_\_\_\_  
\_\_\_\_\_
4. How will data be reported? \_\_\_\_\_  
\_\_\_\_\_

**Addendum 1: Method of Compliance Worksheet****Section 3: Testing****For demonstration of hourly emissions:**

1. Reference Test Method Description: \_\_\_\_\_
2. Reference Test Method Citation: \_\_\_\_\_

**Section 4: Record Keeping**

Describe what parameters will be recorded and the frequency of recording:

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**Section 5: Reporting**

1. Describe what is to be reported and the frequency of reporting:

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2. Reporting start-date: \_\_\_\_\_

**Section 5: Work Practice Standard**

Describe any work practice standards:

**RACT proposal submitted to PADEP June 1994, in accordance with this rule.**

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