



Year 2012
Air Quality Division

ANNUAL AIR EMISSIONS INVENTORY QUESTIONNAIRE

Minor Source

The 2012 Annual Emissions Inventory Questionnaire includes 4 forms that are required to be completed and submitted to the Air Quality Division. Instructions for each form are included below. Upon completion, submit all forms along with the signature by the Responsible Official of the facility within 90 days of receipt of a letter from the Department to the address below.

FORM 1: Facility General Information

Complete all information as requested.

FORM 2: Equipment, Stack & Location Data

Equipment Data: List all of the permitted equipment operated. Indicate, if not available.

FORM 3: Stack & Location Data

Stack Data: Provide the information of each stack.

Location Data: If the portable equipment was moved from one location to another, list the dates, the cities & counties, the latitude & longitude or address/driving directions.

FORM 4: Emissions Data – Point & Fugitive Emissions

Enter the equipment id, annual process rate or design capacity, hours of operation, pollutants, control device and control efficiency, emission factor, emission factor reference (AP-42 11.2.3 1997) and actual emissions totals. If the hours of operation are unknown for fugitives, enter 8760 as the worst case estimates.

FORM 5: Summary & Certification

A summarization of all the emissions by each pollutant will be listed within this form. All reports submitted to the Department should be certified true and accurate by the Responsible Official of the facility. This person is the owner or operator of the facility. **If there is a change of the Responsible Official of the facility, please notify the Department with an additional letter stating the change.**

If you have any question or have difficulty completing this form, please contact Darlene Celaya at (602) 771-7662.

Remember to make photocopies of the completed questionnaire prior to mailing for your records/reference. Please mail the emission inventory questionnaire form to the following address:

**Arizona Department of Environmental Quality
Attention: Darlene Celaya, Emission Inventory Team
Air Quality Division, SIP Section 3415A-3
1110 West Washington Street
Phoenix, AZ 85007**

SECTION I: Plant Identification & Mailing Information

Company Name: _____
Place Name: _____ Place ID #: _____
Mailing Address: _____ City: _____ State: _____
County: _____ Zip Code: _____
Phone: _____ Fax: _____
Permit # or LTF #: _____ General Permit: Yes No

SECTION II: Emissions Inventory Contact

Name: _____ Title: _____
Phone: _____ Fax: _____
E-mail Address: _____

SECTION III: Confidential Request

Pursuant to Arizona Revised Statutes §49-432 and §49-201, do you claim the Emissions Inventory data submittal confidential. Yes No

If yes include which portions of the inventory are confidential along with a brief explanation:

FORM 3: Stack & Location Data

Stack Information

	Stack #1	Stack #2	Stack #3	Stack #4	Stack #5	Stack #6	Stack #7	Stack #8
Equipment Name								
Height (feet)								
Diameter (feet)								
Velocity (feet/second)								
Exhaust Gas Temperature (F)								
Flow Rate (actual cubic feet per minute)								

Location

Date		City & County of Operation	Latitude (DD,MM,SS)	Longitude (DDD,MM,SS)	Address or Driving Directions
From	To				

FORM 5: SUMMARY & CERTIFICATION**Year: 2012**

All the emissions for each pollutant are totalled and entered in the table below.

Pollutant	Tonnage (tons per year)
Particulate Matter (PM)	
Particulate Matter Less Than 2.5 Microns (PM2.5)	
Particulate Matter Less Than 10 Microns (PM10)	
Nitrogen Oxides (NOx)	
Sulfur Oxides (SOx)	
Volatile Organic Compounds (VOC)	
Carbon Monoxide (CO)	
Lead (Pb)	
Hazard Air Pollutants (HAPs)	

Certification of Truth & Accuracy

I certify that based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

All information not identified by me as confidential in nature shall be treated by the Arizona Department of Environmental Quality as public record.

Date:

Signature of Responsible Official:

Print Name:

Title: