



MAJOR SOURCE OPERATING PERMIT APPLICATION  
 FACILITY IDENTIFICATION

1. FACILITY NAME AND OWNER'S NAME IF DIFFERENT FROM THE FACILITY NAME:	FOR APC USE ONLY	APC COMPANY NO.
MAILING ADDRESS (ST/RD/P.O. BOX):		LOG/PERMIT NO.
CITY, STATE, ZIP CODE:		
2. FACILITY LOCATION (ST/RD/HWY):	COUNTY NAME:	
CITY OR DISTANCE TO NEAREST TOWN, ZIP CODE:	TELEPHONE NUMBER WITH AREA CODE:	
3. FACILITY'S PRIMARY ACTIVITY AND THE FACILITY SIX DIGIT NAICS CODE(S):		
4. CONTACT PERSON'S NAME FOR THIS PERMIT:	TITLE:	TELEPHONE NUMBER WITH AREA CODE
5. IF FACILITY IS LOCATED IN AN AREA DESIGNATED AS "NONATTAINMENT" OR "ADDITIONAL CONTROL", INDICATE THE POLLUTANT(S) F OR THE DESIGNATION.		
6. LIST ALL VALID AIR POLLUTION PERMITS ISSUED TO THE SOURCES CONTAINED IN THIS APPLICATION [IDENTIFY ALL PERMITS WITH MOST RECENT PERMIT NUMBERS AND EMISSION SOURCE REFERENCE NUMBERS LISTED ON THE PERMIT(S)].		
7. PERMIT REQUESTED FOR:		
INITIAL APPLICATION TO OPERATE: _____	RELOCATION TO OPERATE: _____	
MODIFICATION: _____	PERMIT RENEWAL TO OPERATE: _____	
REVISION (ADMINISTRATIVE AMENDMENTS): _____		
8. OWNER'S REGISTERED AGENT'S NAME & ADDRESS FOR SERVICE OF PROCESS	TELEPHONE NUMBER WITH AREA CODE	
9. IS THIS FACILITY SUBJECT TO THE PROVISIONS GOVERNING PREVENTION OF ACCIDENTAL RELEASES OF HAZARDOUS AIR CONTAMINANTS CONTAINED IN CHAPTER 1200-3-32 OF THE TENNESSEE AIR POLLUTION CONTROL REGULATIONS?		
_____ YES _____ NO		
IF THE ANSWER IS YES, ARE YOU IN COMPLIANCE WITH THE PROVISIONS OF CHAPTER 1200-3-32 OF THE TENNESSEE AIR POLLUTION CONTROL REGULATIONS?		
_____ YES _____ NO		
10. PAGE NUMBER:	REVISION NUMBER:	DATE OF REVISION: