



**Minnesota Pollution
Control Agency**

520 Lafayette Road North
St. Paul, MN 55155-4194

EMS-00

**EMS Permit Qualification
Air Quality Permit Program**

Doc Type: Permit Application

AQ Facility ID No.: _____ AQ File No.: _____

Facility Name: _____

The purpose of this form is to help you and MPCA determine your facility's eligibility for the state air permit with Environmental Management System provisions ("EMS permit"). If the facility is eligible for the EMS permit, this form also serves as the cover page for your application package.

Requirements associated with the EMS permit can be found in Minn. R. 7007.0100, 7007.1102, 7007.1105, and 7007.1107. You may find those rules at <https://www.revisor.mn.gov/rules/?id=7007>. Other information on the EMS permit may be found on the Minnesota Pollution Control Agency (MPCA) website at: <http://www.pca.state.mn.us/index.php/topics/preventing-waste-and-pollution/assistance-and-resources/environmental-management-systems.html>. If you have questions, please contact the (MPCA) at 651-296-6300 or 800-657-3864 and ask for Environmental Management Systems staff.

The EMS permit will contain limitations to keep the potential-to-emit for criteria and hazardous air pollutants below the following federal major source thresholds, on a facility-wide basis:

Pollutant	Federal Thresholds
Any single HAP	10 tons per year
Total HAP	25 tons per year
PM	100 tons per year
PM ₁₀	100 tons per year
VOC	100 tons per year
SO ₂	100 tons per year
NO _x	100 tons per year
CO	100 tons per year
Pb	0.50 tons per year
CO ₂ e	100,000 tons per year

Complete the following to determine if your stationary source qualifies for an EMS permit.

1. To be eligible for an EMS permit, Minn. R. 7007.1105 requires that your facility's EMS conform to the international EMS standard ISO 14001: Environmental management systems - Specification with guidance for use, published by the International Organization for Standardization (ISO). The ISO 14001 standard is available at the American National Standards Institute (ANSI), New York, New York 10036 (<http://www.ansi.org>), or through the Minitex interlibrary loan system. Check the box that applies to your facility.

- ☐ The EMS for my facility is registered to the ISO 14001 EMS standard. Go to Question 2.
- ☐ The EMS for my facility conforms to ISO 14001. Go to question 3.
- ☐ My facility does not currently have an EMS registered or conforming to ISO 14001. Go to question 6.

2. Provide the name of your facility's registering organization, or "registrar" (NOT your EMS auditor).

_____ Go to question 3.

3. "EMS auditor" means a person certified as an EMS lead auditor by the Registrar Accreditation Board (or successor organization, RABQSA International) to conduct ISO 14001 EMS audits who is not an owner, operator, or employee of the stationary source or a subsidiary, division, or subdivision of an owner, operator, or employee of the stationary source. Other than previous EMS audits, an EMS auditor shall not have provided EMS or other environmental consulting services to the audited stationary source within the two years prior to the EMS audit.

Does the EMS auditor who evaluated your facility's EMS meet this definition?

- ☐ Yes. Go to question 4.
- ☐ No. Go to question 7.

4. Provide the name and contact information for the EMS auditor most recently used by your facility.

Name: _____

Phone Number: _____ E-mail: _____

Go to question 5.

5. Please provide the following information regarding your facility's most recent EMS audit:

Date: _____

Type (e.g. registration, surveillance, nonconformance follow-up): _____

List any major or minor nonconformances found and their current status (corrected or to be corrected, on what timeline):

Go to question 10.

6. (Only if you checked the third box under question 1.) Please check the box which applies to your facility.

☐ My facility has not yet been constructed.

☐ My facility is an existing facility.

Go to question 7.

7. Do you intend to implement an EMS conforming or registered to ISO 14001, and audited by a qualified EMS auditor (defined under question 3)?

☐ Yes. Go to question 8.

☐ No. Your stationary source does not qualify for the EMS permit.

8. Will you accept a permit condition to complete EMS development and auditing within 365 days of EMS permit issuance?

☐ Yes. Go to question 9.

☐ No. Your stationary source does not qualify for the EMS permit.

9. On what date do you anticipate a third-party audit of your EMS's conformance to ISO 14001?

Date: _____ Go to question 10.

10. Will you accept permit conditions with facility-wide limits for each pollutant emitted by your facility?

☐ Yes. Go to question 11.

☐ No. Your stationary source does not qualify for the EMS permit.

11. Will you accept a permit condition that requires an audit of your facility's EMS by an EMS auditor at least once every two years?

☐ Yes. Go to question 12.

☐ No. Your stationary source does not qualify for the EMS permit.

12. "Summary of EMS audit results" is a document signed by an EMS auditor, describing the date and scope of the audit, and conformance, minor nonconformance, or any major nonconformance found in the course of an EMS audit. For major nonconformance, the summary of EMS audit results summarizes the objective evidence found by the EMS auditor, describes corrective actions planned or completed by the stationary source, and details follow-up audit activity planned or completed by the EMS auditor.

Will you accept a permit condition requiring your EMS auditor to send a summary of EMS audit results directly to the MPCA within 45 days of the date of any EMS audit, if requested by the commissioner or as required under Minn. R. 7007.1105, subps. 1 to 6?

☐ Yes. Go to question 13.

☐ No. Your stationary source does not qualify for the EMS permit.

13. You must perform an ambient air quality assessment as described in Minn. R. 7007.1148 to be eligible for an EMS permit. You may assume limits such as production or hourly limits in completing the assessment, but these limits must be included in your permit. The simplest assessments (such as the CAPS spreadsheet at <http://www.pca.state.mn.us/index.php/air/air-permits-and-rules/air-permits-and-forms/air-permits/capped-air-emission-state-permit.html>) are the most conservative, so you may want to complete more detailed assessments (see <http://www.pca.state.mn.us/index.php/view-category.html?gid=376>) if the simpler ones predict concentrations higher than the standard in Minn. R. 7009.0080. For further assistance, call the MPCA at 651-296-6300 or 800-657-3864 and ask to speak to air dispersion modeling staff.

Were the one-hour, three-hour, and 24-hour SO₂; the 24-hour PM₁₀; and annual NO_x concentrations predicted in your assessment at and beyond the property line of your facility lower than the corresponding standard in Minn. R. 7009.0080?

- ☐ Yes.
- ☐ No. Your stationary source does not qualify for the EMS permit.

Submit all air modeling input and results tables with your permit application if you use the CAPS spreadsheet. If you use other models, see <http://www.pca.state.mn.us/index.php/view-category.html?gid=376> for more information on what needs to be submitted with your permit application.

- ☐ Check here if you have recently completed MPCA-approved modeling and this permit action does not affect the outcome of that modeling. If you checked this box, you need not resubmit the results of the previously-completed modeling.

If your facility qualifies for the EMS permit (i.e., you did not check any boxes above that state "Your stationary source does not qualify for the EMS permit"), you may apply for an EMS permit. To do so, choose the most appropriate of Options A, B, or C on the following page, check the appropriate boxes within the option, and apply for an EMS permit as described therein. Remember that your EMS permit will include both "customary" conditions and EMS provisions. Your CD-01 form (compliance plan) under Options A and B on the next page should therefore include: a) requirements relating to customary conditions, b) the necessary requirements relating to your EMS and its auditing, and c) the conditions under which you may calculate some emissions on an annual basis if your actual emissions are low (see Minn. R. 7007.1107, subpart 2). If you have completed a qualified EMS audit, remember to attach a summary of your most recent EMS audit results to your application.

- ☐ **Option A:** Facility currently holds an individual state or Part 70 operating permit (not a registration permit, capped permit, or general permit) issued by the MPCA.

The facility currently holds an individual ☐ state ☐ Part 70 operating permit.

Air Emission Permit No.: _____

- ☐ No additional applications pending (e.g. permit amendments, reissuance application)
- ☐ The following amendment or reissuance applications are pending (type = amendment or reissuance)

Permit application type: _____ Date of submittal: _____

Permit application type: _____ Date of submittal: _____

Apply for a major amendment to the existing permit to change it to an EMS permit, by submitting a complete permit application using the "CH-xx" series of forms, available on the MPCA website at <http://www.pca.state.mn.us/index.php/air/air-permits-and-rules/air-permits-and-forms/air-forms/air-quality-forms-permit-application-notifications-compliance-and-miscellaneous.html>. The CH forms include instructions. Be sure to also include this form (EMS-00), CD-01 outlining the EMS provisions, and SCP-01 (cover page and certification).

- ☐ **Option B:** The facility does not currently hold an operating permit, or holds a registration, capped, or general permit, **and has applied** for an individual state or Part 70 operating permit.

- ☐ No current operating permit
- ☐ Registration permit held – Permit No.: _____
- ☐ Capped permit held – Permit No.: _____
- ☐ General permit held – Permit No.: _____

A permit application for an individual operating permit was submitted on

_____ (date) ☐ State ☐ Part 70

Change the pending application to an application for an EMS permit, by supplementing it with the applicable forms from the total facility permit application, available on the MPCA website at <http://www.pca.state.mn.us/index.php/air/air-permits-and-rules/air-permits-and-forms/air-forms/air-quality-forms-permit-application-notifications-compliance-and-miscellaneous.html>. At a minimum, be sure to include this form (EMS-00), Form CD-01 outlining the EMS provisions, and a certification (Form SCP-01).

☐ **Option C:** The facility does not currently hold any type of operating permit, or holds a registration, capped, or general permit, **and has not applied** for an individual state or Part 70 operating permit.

☐ No current operating permit

☐ Registration permit held – Permit No.: _____

☐ Capped permit held – Permit No.: _____

☐ General permit held – Permit No.: _____

To apply for an EMS permit, submit a complete application using the total facility permit application. These forms are available on the MPCA website at <http://www.pca.state.mn.us/index.php/air/air-permits-and-rules/air-permits-and-forms/air-forms/air-quality-forms-permit-application-notifications-compliance-and-miscellaneous.html>. Be sure to include this form (EMS-00) and a certification (Form SCP-01).

Submit all permit applications to: Air Permit Document Coordinator
Minnesota Pollution Control Agency
520 Lafayette Road North
St. Paul, Minnesota 55155

Facility contact for EMS Permit:

Contact name: _____ Contact phone: _____

Contact e-mail address: _____