

Texas Commission on Environmental Quality
 Federal Operating Permit Deviation Report Form
 Form Dev Rep (Part 1)

AIR CO/ /RP

Permit Holder Name

Customer Number CN

Area Name

Account Number (XX-XXXX-XX)

Report Period Start Date

Report Period End Date

Operating Permit Number 0

Report Submittal Date

Operating Permit Requirement for Which Deviations are Being Reported

ID Number	Term & Condition No.	Pollutant	Regulatory Requirement Citation	Type of Requirement	SOP or GOP Index Number	Monitoring Method	Monitoring Frequency
Unit ID <input type="text"/>							
Group ID GRP <input type="text"/>							

Dev Item No.	STEERS incident No	Deviation Period				No. of Dev	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
		Start		End				
		Date	Time	Date	Time			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Total Deviations: Is there a Part 3 Miscellaneous Monitoring/Credible Evidence from supporting this deviation report? Yes No

Texas Commission on Environmental Quality
 Federal Operating Permit Deviation Report Form
 Form Dev Rep (Part 2)
 30 TAC Chapter 101 Non-Reportable Emission Events

AIR CO/ /RP

Permit Holder Name

Customer Number CN

Area Name

Account Number (XX-XXXX-XX)

Report Period Start Date

Report Period End Date

Operating Permit Number 0

Report Submittal Date

Operating Permit Requirement for Which Deviations are Being Reported

ID Number	Term & Condition No.	Pollutant	Regulatory Requirement Citation	Type of Requirement	SOP or GOP Index Number	Monitoring Method	Monitoring Frequency
Unit ID <input style="width: 100px; height: 20px;" type="text"/>							
Group ID GRP <input style="width: 100px; height: 20px;" type="text"/>							

Dev Item No.	Deviation Period				No. of Dev	Cause of Deviation	Corrective Action Taken to Remedy or Mitigate Deviation Situation
	Start		End				
	Date	Time	Date	Time			
<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>
<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>

Total Deviations:	<input style="width: 40px; height: 30px;" type="text"/>	Is there a Part 3 Miscellaneous Monitoring/Credible Evidence from supporting this deviation report?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Texas Commission on Environmental Quality
 Federal Operating Permit Deviation Report Form
 Form Dev Rep (Part 3)

AIR CO/ /RP

OPTIONAL

Miscellaneous Monitoring and Credible Evidence Submittal

Deviation Item Number	Monitoring Method/ Evidence Reference	Monitoring/Evidence Results Supporting Compliance Status	Additional Materials Attached? Y/N	
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No