**Texas Commission on Environmental Quality**

**Title 30 Texas Administrative Code § 106.225 Checklist**

**(Previously Standard Exemption 115)**

**Semiconductor Manufacturing Facilities**

**Changes and Additions to Existing Operations**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| The following checklist has been developed by the Texas Commission on Environmental Quality (TCEQ) to provide verification that the basic requirements of Title 30 Texas Administrative Code (TAC) Section 106.225, previously Standard Exemption 115, are met. The questions below are derived from § 106.4 and the exemption list. Please read all of the questions and check each answer “YES” or “NO,” or provide specific information as applicable to the facility. Total plant site emissions of Volatile Organic Compounds (VOC) cannot exceed 25 tons per year. If all conditions of a specific permit by rule (PBR) are not met, the facility will not be allowed to operate under that PBR and an application for a construction permit will be required pursuant to § 116.110 prior to construction.  For additional assistance with your application, including resources to help calculate your emissions, please visit the Small Business and Local Government Assistance (SBLGA) webpage at the following link: [www.TexasEnviroHelp.org](http://www.TexasEnviroHelp.org). | | | | |
| **Complete the checklist below:** | | | | |
| **Note:** *If specific information needs to be given, include it on an additional page and clearly explain which question is being answered.* | | | | |
| Facility Type: | | | | |
| Operating Schedule: | hours/day | days/week | weeks/year | |
| Describe the changes which you propose to make under this exemption: | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
| **Description** | | | | |
| 1. Has a permit been issued by the TCEQ for at least one emission source on the property? | | | | YES  NO |
| 1. Have baseline emission concentrations been determined by atmospheric dispersion modeling? | | | | YES  NO |
| 1. Does the baseline include all emissions from this property and have these baseline emission rates passed a TCEQ toxicology review? | | | | YES  NO |
| 1. Data from air emissions monitoring or an emissions inventory is compiled and/or updated on an annual basis for all emission sources on the property, maintained on a three-year rolling retention cycle, and made available upon request by the TCEQ Executive Director or a designated representative. | | | | YES  NO |

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| **Complete the checklist below:** | | | | |
| 1. List the increase in the emissions of the following air contaminants from the exempted facility: | | | | |
| **Contaminant** | **Increase** | **Limit** | | |
| Particulate matter (tpy): |  | <5 TPY | | |
| VOC (tpy): |  | <15 TPY | | |
| Acid gases or vapors (tpy): |  | <10 TPY | | |
| Base gases or vapors (tpy): |  | <10 TPY | | |
| Non-VOC (tpy): |  | <10 TPY | | |
| Other air contaminants (tpy): |  | <5 TPY | | |
| Total of all air contaminant increases (tpy): |  | <25 TPY | | |
| **Note:** *If specific information needs to be given, include it on an additional page and clearly explain which question is being answered.* | | | | |
| (f.) The increase (if any) in the emissions of the air contaminants above does not in any case exceed the specified limits. | | | | YES  NO |
| (g.) The total increase in emissions for each contaminant through any single or cumulative use of this exemption is less than 25% of the established emission rate and GLC baseline for that contaminant. | | | | YES  NO |
| (h.) The emission of any air contaminant substituted for another contaminant established in the baseline meets the criteria in part (e) of § 106.351, previously Standard Exemption 115 | | | | YES  NO |
| Please enclose a summary of supporting data. | | | | |
| (i.) The proposed changes will not result in visible emissions from any exhaust point. | | | YES  NO | |

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| **Complete the checklist below:** | | |
| **Registration Submitted By:** | | |
| Name: | | |
| Company: | | |
| Title: | | |
| Facility Name: | | |
| Phone No.: | Fax No.: | |
| E-mail Address: | | |
| Account ID No.: | | |
| Location: | | |
| Signature of Company Officer: | | Date: |