



Texas Commission on Environmental Quality

Form OP-UA21 - Instructions Grain Elevator Attributes

General:

This form is used to provide a description and data pertaining to all grain elevators with potentially applicable requirements associated with a particular account number and application. Each table number, along with the possibility of a corresponding letter (i.e., Table 1a, Table 1b), corresponds to a certain state or federal rule. If the rule on the table is not potentially applicable to a grain elevator, then it should be left blank and need not be submitted with the application. If the codes entered by the applicant show negative applicability to the rule or sections of the rule represented on the table, then the applicant need not complete the remainder of the table(s) that corresponds to the rule. Further instruction as to which questions should be answered and which questions should not be answered are located in the “Specific” section of the instruction text. The following is included in this form:

Table 1: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60)
Subpart DD: Standards of Performance for Grain Elevators

The Texas Commission on Environmental Quality (TCEQ) primary account number (XX-XXXX-X) and the application area name from Form OP-1 (Site Information Summary) must appear in the header of each page for the purpose of identification for the initial submittal. The date of the initial form submittal must also be included and should be consistent throughout the application (MM/DD/YYYY). **Leave the permit number blank for the initial form submittal.** If this form is included as part of the permit revision process, enter the permit number assigned by the TCEQ, the area name (from Form OP-1), the date of the revision submittal, and the account number.

Unit attribute questions that do not require a response from all applicants are preceded by qualification criteria in the instructions. If the unit does not meet the qualification criteria, a response to the question is not required. **Anytime a response is not required based on the qualification criteria, leave the space on the form blank.**

Notwithstanding any qualification criteria in the form instructions or information provided in other TCEQ guidance, the applicant may leave an attribute question blank (or indicate “N/A” for “Not Applicable”) if the attribute is not needed for the applicable requirement determinations of a regulation for a unit.

In some situations, the applicant has the option of selecting alternate requirements, limitations, and/or practices for a unit. Note that these alternate requirements, limitations, and/or practices must have the required approval from the TCEQ Executive Director and/or the U.S. Environmental Protection Agency (EPA) Administrator before the federal operating permit application is submitted.

Specific:

Table 1: Title 40 Code of Federal Regulations Part 60 (40 CFR Part 60)
Subpart DD: Standards of Performance for Grain Elevators

UNIT ID NO.: Enter the identification number (ID No.) for the grain elevator units or processes (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

SOP INDEX NO.: Site (SOP) applicants should indicate the SOP index number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-XXXX]). For additional information relating to SOP index numbers, please refer to the TCEQ guidance document entitled “Federal Application Guidance Document.”

CONSTRUCTION/MODIFICATION DATE: Select one of the following codes that describes the date of commencement of the most recent construction, reconstruction, or modification. Enter the code on the form.

Note: Use the definition of “modification” from 40 CFR § 60.304.

<u>Code</u>	<u>Description</u>
78-	On or before August 3, 1978
78+	After August 3, 1978

▼ **Continue only if “Construction/Modification Date” is “78+”.**

FACILITY TYPE: Select one of the following codes for the type of affected facility. Enter the code on the form.

<u>Code</u>	<u>Description</u>
DRYER	Grain dryer
TRKUN	Truck unloading station
RAIL	Railcar loading or unloading station
TRKLD	Truck loading station
BSLOAD	Barge or ship loading station
BSUNLD	Barge or ship unloading station
HANDLE	Other grain handling operation

★ **Do not complete “Capture System” if “Facility Type” is “DRYER.”**

CAPTURE SYSTEM: Enter “YES” if the capture system, as defined by 40 CFR § 60.301(i), is being used to collect particulate matter generated by the affected facility. Otherwise, enter “NO.”

★ **Complete “Dryer Type” only if “Facility Type” is “DRYER.”**

DRYER TYPE: Select one of the following codes for the dryer type. Enter the code on the form.

<u>Code</u>	<u>Description</u>
COLM-	Column dryer with a column plate perforation less than or equal to 2.4 mm (ca. 0.094 inch) in diameter
COLM+	Column dryer with a column plate perforation greater than 2.4 mm (ca. 0.094 inch) in diameter
RACK-	Rack dryer with a screen filter that is as coarse or less coarse than 50 mesh
RACK+	Rack dryer with a screen filter that is coarser than 50 mesh

▼ **Continue only if “Facility Type” is “BSUNLD.”**

ALTERNATIVE METHOD OF CONTROL (AMOC): Enter “YES” if an AMOC that reduces emissions of particulate matter is accepted by the EPA Administrator. Otherwise, enter “NO.”

AMOC ID NO.: If an AMOC has been approved then enter the corresponding AMOC unique identifier for each unit or process, if the unique identifier is unavailable then enter the date of the AMOC approval letter. The unique identifier and/or the date of the approval letter is contained in the compliance file under the appropriate account number. Otherwise, leave this column blank (maximum 10 characters).

