14

NEBRASKA DEPARTMENT OF ENVIRONMENTAL QUALITY
Air Quality Division

REC'D
SEP 02 2010
APCC

INITIAL NOTIFICATION FORM

Applicable Rule: *40 CFR Part 63, Subpart ZZZZ* - National Emission Standards for Hazardous Air Pollutants (NESHAP) for Stationary Reciprocating Internal Combustion Engines (RICE) - Promulgated 6/15/04, 1/18/08, & 3/3/10

Company Name City of Wakefield Facility ID# 09044

Owner/Operator/Title City of Wakefield/Mark Bressler/Plant Operator

Mailing Address P.O. Box 178

City Wakefield Zip 68784

Plant Address (if different than owner/operator's mailing address):

Street 303 Oak Street

City Wakefield Zip 68784

Plant Phone Number 402-287-2547

Plant Contact/Title Mark Bressler

This form must be completed, signed and submitted to the following agencies:

NDEQ Air Quality Division
1200 'N' St. Atrium, Suite 400
Lincoln, NE 68509-8922

and

Region VII EPA – Air & Waste Management
901 N. 5th Street
Kansas City, KS 66101-2907

If your facility is located in Omaha or Lancaster County, you must submit a notification to the appropriate air pollution control agency in that area and Region VII EPA.

Provide the following information for the applicable stationary engine(s). Add additional tables or rows as needed.

Unit #	Engine Startup Date	Site Rating Brake Horsepower	Displacement (liters/cylinder)	Fuel(s) Combusted	Compression Ignition	Spark Ignition	Emergency	Limited Use
2	1955	720	/101.96	Dual fuel	X	☐ 4-Stroke x☐ 2-Stroke ☐ Lean Burn ☐ Rich Burn	N/A	☐
4	1961	720	/135.95	Dual fuel	X	☐ 4-Stroke x☐ 2-Stroke ☐ Lean Burn ☐ Rich Burn	N/A	☐
5	1966	1920	/203.92	Dual Fuel	X	☐ 4-Stroke x☐ 2-Stroke ☐ Lean Burn ☐ Rich Burn	N/A	☐

Unit #	Engine Startup Date	Site Rating Brake Horsepower	Displacement (liters/cylinder)	Fuel(s) Combusted	Compression Ignition	Spark Ignition	Emergency	Limited Use
6	1971	1920	/203.92	Dual Fuel	X	☐ 4-Stroke x☐ 2-Stroke ☐ Lean Burn ☐ Rich Burn	N/A	☐
					☐ YES	☐ 4-Stroke ☐ 2-Stroke ☐ Lean Burn ☐ Rich Burn	☐	☐
					☐ YES	☐ 4-Stroke ☐ 2-Stroke ☐ Lean Burn ☐ Rich Burn	☐	☐

Source Classification - Check the box that applies:

☐ Facility is a major source of hazardous air pollutants (HAPs).*

x☐ Facility is an area source of HAPs.*

**Note: A major source is a facility that has a potential to emit greater than 10 tons per year of any single HAP or 25 tons per year of all HAPs combined. All other sources are area sources. The major/area source determination is based on all HAP emission points inside the facility fence line.*

Is the engine(s) a new/reconstructed emergency or limited use engine and > 500 horsepower located at a major source of HAP ? ☐ **Yes** x☐ **No**

If YES, the engine(s) does not have any additional requirements under Subpart ZZZZ, but you must meet the requirements of 40 CFR Part 60 New Source Performance Standards Subpart IIII for Compression Ignition Engines or Subpart JJJJ for Spark Ignition Engines .

Source Type - Check the box that applies:

☐ New Source*

x☐ Existing source*

**Note: To determine if you are a new or existing source, see the attached information following this form.*

Print or type the name and title of the Responsible Official for the facility:

Name: _____ James A Litchfield **Title: _____City Administrator**

A Responsible Official can be:

- The president, vice president, secretary, or treasurer of the company that owns the plant;
- An owner of the plant;
- A plant engineer or supervisor of the plant;
- A government official, if the plant is owned by the Federal, State, City, or County government; or
- A ranking military officer, if the plant is located at a military base.

I CERTIFY THAT INFORMATION CONTAINED IN THIS REPORT IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE.

_____ **August 27, 2010**_____

(Signature of Responsible Official) *(Date)*