PETITION FOR A HEARING BEFORE THE HEARING BOARD OF THE SAN JOAQUIN VALLEY AIR POLLUTION CONTROL DISTRICT

	4800 Ent	Region Office terprise Way , CA 95356	_	Central Region 1990 E. Gettys Fresno, CA 93	sburg Ave.		,	Southern Region Office 34946 Flyover Court Bakersfield, CA 93308
			TYPE OF HEAR	ING	<u> </u>	FEES (No	n-Ref	<u>undable)</u>
varia	ance at \$2	2.75 per pour	nd on the excess	Variance ance e ar Variance riance Variance Variance Variance e ariance e ess emissions s emissions	dule of Progre <u>s fee</u> will be emitted durir	\$1 \$1 \$1 \$1 \$5 \$5 \$1 \$1 \$1 \$1 \$1 \$1	arianc	0 0 0 0 0 0 0 0 0
A.	NAME OF I	FACILITY:						
	PHYSICAL ADDRESS OF FACILITY:							
	CITY:							
	NAME OF I	PERSON FILLI	NG OUT PETITION					
	TELEPHON	NE:		E-MAIL:	<u> </u>			
	NAME OF I	PERSON AUTH	IORIZED TO RECE	IVE NOTICES:				
	MAILING A	DDRESS:						
	CITY:						ZIP CC	DDE:
	TELEPHON							
В.	TYPE OF E	ENTITY (Check	One)					
	☐ LLC	· :						
		nership						f officers, if a corporation; n control, if other entity.
		ooration		-	(Attach add			·
					(/ แสดา สนน		J.J., II I	100404)
	Othe	er Entity						
NAMI	E		TITLE			ADDR	RESS	

In accordance with State Law, the District will provide assistance to small businesses in preparing and filing the petition for the hearing. Small business has the same meaning as defined in the Small Business Administration, except that no stationary source which is a major source can be a small business.

Bakersfield	Fresno	☐ Modesto
Describe the type of	business conducted at your fac	ility.
equipment is used fo	equipment or activity that is the r, and why it is necessary to the oformation necessary to describ	e operation of your facility.
equipment is used fo Include all pertinent i fuels burned, raw ma volatile organic comp		e operation of your facility. be the activity including: luced, true vapor pressure of a flow charts, fuel systems, and
equipment is used fo Include all pertinent i fuels burned, raw ma volatile organic comp	r, and why it is necessary to the nformation necessary to describ terials processed, product prod ounds, site diagrams, material	e operation of your facility. be the activity including: luced, true vapor pressure of a flow charts, fuel systems, and
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version(s).			ate the condi		ase list the c
List all Distr	ict Rule numbers	, including sub	osections, for	which you ar	e requesting
	ict Rule numbers otection and <u>expl</u>				

5.	Why is it beyond your reasonable control to comply with the rule(s) and/or permit condition(s)?					
6.	What would be the harm to your business if the variance were not granted? Include business closure, economic losses in dollar amounts, breach of contracts, hardships on customers, employee lay-offs, loss of market share to competitors, etc.					
7.	What date, and under what circumstances, did your facility first become aware that it would not be in compliance?					
8.	What actions have you taken since that time to achieve compliance?					

		Actual	ssions that will occur.	Total Estimate
Pollutant	Pollutant Limit	Emissions		Excess Emissi
VOC			Excess emissions	
NOx			are those that are in excess of the	
			rules or permit	
CO			conditions or otherwise lawfully	
SOx			allowed	
PM ₁₀				
PM _{2.5}				
Show all ca	pacity level anticipat alculations and prov excess emissions.		% or emission factors u	ised in

	cplain how you can reduce or mitigate excess emissions during the variance period uch as shutting equipment down or reducing production to offset excess emissions
	there are excessive hazardous or toxic emissions, attach a health risk assessment ad receptor modeling data.
du tes	an you monitor or quantify emission levels from the subject equipment or activity uring the variance period and make such records available to the District? Sousts, engineering tests, or portable emission analyzers can be utilized.
	<u> </u>
Ind be	ow do you intend to achieve compliance with the rules or permit conditions? clude a detailed description of any equipment to be installed and/or modifications to made, a listing of the dates by which the actions will be completed, and an estimathe total cost, if available.

16.	State the dates you are requesting the variance to begin and end (the end date should be the date you expect to achieve compliance with the rules, regulations, and permit conditions). Please overestimate the time needed to allow for any contingencies.
	Begin variance: End variance:
17.	Please state if you need special time designations. For example: "We need 15 non-consecutive days between such and such date."
18.	If a variance, or series of variances, is to extend beyond one year, <u>you must attach</u> a <i>Schedule of Increments of Progress</i> pursuant to Rule 5050 – <i>Compliance Schedule</i> which must specify certain dates or milestones to be met in achieving compliance.
19.	List the names of any District personnel who are familiar with the facility (inspectors, permit engineers, etc.) or with whom facility representatives have had contact concerning this variance petition, or any related NOV or NTC.
	on information and belief formed after reasonable inquiry, the statements and ation in the document are true, accurate, and complete:
Date:	*Signature:
	Title:
	Print Name:
*must b	ne signed by a responsible official if petitioner is a Title V source
District color illegib return	riginal petition in this format, and any attachments must be submitted to the ct. Any attachments that are extraordinarily difficult to reproduce, such as full photographs, must be submitted as six copies. Petitions which are incomplete, le, submitted in the wrong format, or without the necessary filing fee will be ed. If you need assistance completing this petition and/or developing a liance schedule, contact the Compliance Department in your region.
	Northern Region Office Central Region Office Southern Region Office (209) 557-6440 (559) 230-5950 (661) 392-5540

You may hand deliver, mail, or email this petition to variance@valleyair.org