

**MARYLAND DEPARTMENT OF THE ENVIRONMENT**

**AIR AND RADIATION ADMINISTRATION  
APPLICATION FOR A PERMIT TO CONSTRUCT**

**DOCKET #09-24**

COMPANY: Mountaire Farms of Delaware, Inc.  
LOCATION: 11761 Cordova Rd., Cordova, MD 21625  
APPLICATION: A grain drying and handling facility

<u>ITEM</u>	<u>DESCRIPTION</u>
1	Notice of Application and Opportunity to Request an Informational Meeting
2	Environmental Justice (EJ) Information - EJ Fact Sheet and MDE Score and Screening Report
3	Permit to Construct Application Forms – Forms 5, Equipment List, Emissions Calculations, Process Flow Diagram
4	Zoning Approval

**DEPARTMENT OF THE ENVIRONMENT  
AIR AND RADIATION ADMINISTRATION**

**NOTICE OF APPLICATION AND  
OPPORTUNITY TO REQUEST AN INFORMATIONAL MEETING**

The Maryland Department of the Environment, Air and Radiation Administration (ARA) received a permit-to-construct application from Mountaire Farms of Delaware, Inc. on July 19, 2024 for a grain drying and handling facility. The proposed installation is located at 11761 Cordova Rd., Cordova, MD 21625.

In accordance with HB 1200/Ch. 588 of 2022, the applicant provided an environmental justice (EJ) Score for the census tract in which the project is located using the MDE EJ Screening Tool. The EJ Score, expressed as a statewide percentile, was shown to be 42 which the Department has verified. This score considers three demographic indicators, minority population above 50%, poverty rate above 25% and limited English proficiency above 15%, to identify underserved communities. Multiple environmental health indicators are used to identify overburdened communities.

Copies of the application, the MDE EJ Screening Tool Report (which includes the score), and other supporting documents are available for public inspection on the Department's website at <https://mde.maryland.gov/programs/Permits/AirManagementPermits/Pages/index.aspx> (click on Docket Number 09-24). Any applicant-provided information regarding a description of the environmental and socioeconomic indicators contributing to that EJ score can also be found at the listed website. Such information has not yet been reviewed by the Department. A review of the submitted information will be conducted when the Department undertakes its technical review of all documents included in the application.

Pursuant to the Environment Article, Section 1-603, Annotated Code of Maryland, the Department will hold an informational meeting to discuss the application and the permit review process if the Department receives a written request for a meeting within 10 working days from the date of the second publication of this notice. A requested informational meeting will be held virtually using teleconference or internet-based conferencing technology unless a specific request for an in-person informational meeting is received. All requests for an informational meeting should be directed to the attention of Ms. Shannon Heafey, Air Quality Permits Program by email to [shannon.heafey@maryland.gov](mailto:shannon.heafey@maryland.gov) or by mail to the Air and Radiation Administration, 1800 Washington Boulevard, Baltimore, Maryland 21230.

Further information may be obtained by calling Ms. Shannon Heafey at 410-537-4433.

Christopher R. Hoagland, Director  
Air and Radiation Administration



# The Applicant's Guide to Environmental Justice and Permitting

## What You Need to Know

This fact sheet is designed to provide guidance to applicants on incorporating environmental justice screening requirements pursuant to House Bill 1200, effective October 1, 2022.

### What is Environmental Justice?

---

The concept behind the term environmental justice (EJ) is that regardless of race, color, national origin, or income, all Maryland residents and communities should have an equal opportunity to enjoy an enhanced quality of life. How to assess whether equal protection is being applied is the challenge.

Communities surrounded by a disproportionate number of polluting facilities puts residents at a higher risk for health problems from environmental exposures. It is important that residents who may be adversely affected by a proposed source be aware of the current environmental issues in their community in order to have meaningful involvement in the permitting process. Resources may be available from government and private entities to ensure that community health is not negatively impacted by a new source located in the community.

Extensive research has documented that health disparities exist between demographic groups in the United States, such as differences in mortality and morbidity associated with factors that include race/ethnicity, income, and educational attainment. House Bill 1200 adds to MDE's work incorporating diversity, equity and inclusion into our mission to help overburdened and underserved communities with environmental issues.

### What is House Bill 1200 and what does it require?

---

Effective October 1, 2022, House Bill 1200 requires a person applying for a permit from the Department under §1-601 of the Environment Article of the Annotated Code of Maryland or any permit requiring public notice and participation to include in the application an EJ Score for the census tract where the applicant is seeking the permit; requiring the Department, on receiving a certain permit application to review the EJ Score; and requiring notices to include information related to EJ Scores and generally relating to environmental permits and environmental justice screenings.

### What is a "Maryland EJ Tool"?

---

The term "Maryland EJ Tool" means a publicly available state mapping tool that allows users to: (1) explore layers of environmental justice concern; (2) determine an overall EJ score for census tracts in the state; and (3) view additional context layers relevant to an area. The MDE EJ Screening Tool is considered a Maryland EJ Tool.

### What is an "EJ Score"?

---

The term "EJ Score" means an overall evaluation of an area's environment and environmental justice indicators, as defined by MDE in regulation, including: (1) pollution burden exposure; (2) pollution burden environmental effects; (3) sensitive populations; and (4) socioeconomic factors.

The MDE EJ Screening Tool considers three demographic indicators, minority population above 50%, poverty rate above 25% and limited English proficiency above 15%, to identify underserved communities, and multiple environmental health indicators to identify overburdened communities. The tool uses these indicators to calculate a



Maryland  
Department of  
the Environment

# The Applicant's Guide to Environmental Justice and Permitting

## What You Need to Know

Final EJ Score Percentile, statewide. It is that score, linked to the census tract where the project is to be located, that needs to be reported to MDE as part of your permit application.

### What does the application require?

---

The link for the MDE EJ Screening Tool is located on the Department's website, [www.mde.maryland.gov](http://www.mde.maryland.gov). Click on the Environmental Justice header at the top of the Department's home page, then select EJ Screening Tool from the menu on the left. Click on Launch the EJ Screening Tool. After you open the tool, click okay on the opening screen. At the top right, please click the first button for the MDE Screening Report. Input the address of the proposed installation in the address bar. Click on the Report button. Once the report has been generated select the print icon and save it in a .pdf format.

The applicant needs to include the MDE Screening Report with the EJ Score from the MDE EJ Screening Tool as part of the permit application upon submission. An application will not be considered complete without the report.

The applicant is encouraged to provide the Department with a discussion about the environmental exposures in the community. This will provide pertinent information about how the applicant should proceed with engaging with the community. Residents of a community with a high indicator score and a high degree of environmental exposure should be afforded broader opportunities to participate in the permit process and understand the impacts a project seeking permit approval may have on them.

### Questions

---

For air quality permits, please call 410-537-3230.

For water permits, please call 410-537-4145.

For land permits pertaining to Solid Waste, please call 410-537-3098. For land permits pertaining to Oil Control, please call 410-537-3483.

For land permits pertaining to Animal Feeding Operations, please call 410-537-4423.

For land permits pertaining to Biosolids, please call 410-537-3403.

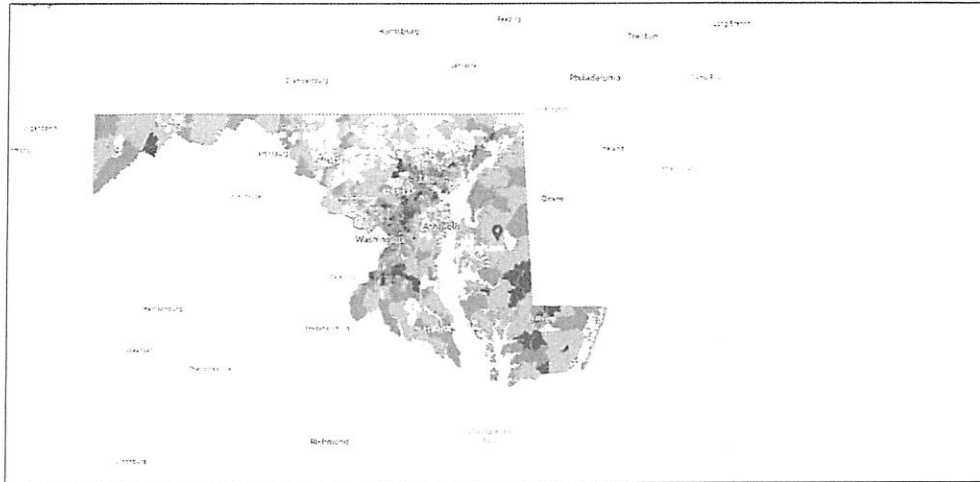


# MDE Screening Report

## Area of Interest (AOI) Information

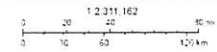
May 16 2024 14:24:07 Eastern Daylight Time

Tabloid ANSI B Landscape



MDE Fossil Fuel Score (Site score)

- 0% - 24.9th %ile
- 25% - 49.9th %ile
- 50% - 74.9th %ile
- 75% - 100th %ile



MDE GIS DATA GENERATED BY THE STATE OF MARYLAND  
DATE: 05/16/2024

Name	Count	Area(mi <sup>2</sup> )	Length(mi)
MDE Final EJ Score (%ile score)	1	N/A	N/A
Overburdened Communities Combined Score	1	N/A	N/A
Overburdened Pollution Environmental Score (%ile score)	1	N/A	N/A
Overburdened Exposure Score (%ile score)	1	N/A	N/A
Overburdened Sensitive Population (%ile score)	1	N/A	N/A
Socioeconomic/Demographic Score 2020 (Percentile score) (Underserved Community)	1	N/A	N/A
Air Emissions Facilities	0	N/A	N/A
Sulfur Dioxide (2010)	0	N/A	N/A
Ozone (2015)	1	N/A	N/A
Fine Particles (2012)	1	N/A	N/A
Biosolids FY 2020 and Current Permit Details	0	N/A	N/A
Biosolids FY2010 - 2014 Permit Details	0	N/A	N/A
Biosolids FY2009 Expired Permit Details	0	N/A	N/A
Biosolids FY 2020 and Current Permits Distribution By Acreage	1	N/A	N/A
Biosolids FY2015 - 2019 Permits Distribution By Acreage	1	N/A	N/A
Biosolids FY2010 - 2014 Permits Distribution By Acreage	1	N/A	N/A
Biosolids FY2009 Permits Expired Distribution By Acreage	1	N/A	N/A
Biosolids FY 2020 and Current Permit Distribution By Percent Coverage	1	N/A	N/A
Biosolids FY2015 - 2019 Permit Distribution By Percent Coverage	1	N/A	N/A
Biosolids FY2010 - 2014 Permit Distribution By Percent Coverage	1	N/A	N/A
Biosolids FY2009 Expired Permit Distribution By Percent Coverage	1	N/A	N/A
Concentrated Animal Feeding Operations (CAFOs)	0	N/A	N/A
Composting Facilities	0	N/A	N/A
Food Scrap Acceptors	0	N/A	N/A
Landfills	0	N/A	N/A
Correctional Facilities	0	N/A	N/A
Industrial Food Suppliers	0	N/A	N/A
Residential Colleges	0	N/A	N/A
Non-Residential Colleges	0	N/A	N/A
Hospitals	0	N/A	N/A
High Schools	0	N/A	N/A
Grocery Stores	0	N/A	N/A
10 Miles from Landfill	3	N/A	N/A
10 Miles from Composting Facility	0	N/A	N/A
General Composting Facilities Tier 2 (MD)	0	N/A	N/A
Commercial Anaerobic Digester (MD)	0	N/A	N/A
Out of State Facilities	0	N/A	N/A
30 mile buffer (Maryland)	1	N/A	N/A
30 Mile Buffer (Out of State)	0	N/A	N/A
Land Restoration Facilities	0	N/A	N/A
Determinations (points)	0	N/A	N/A
Determinations (areas)	0	N/A	N/A
Entities	0	N/A	N/A
Active Coal Mine Sites	0	N/A	N/A
Historic Mine Facilities	0	N/A	N/A

All Permitted Solid Waste Acceptance Facilities	0	N/A	N/A
Municipal Solid Waste Acceptance Facilities	0	N/A	N/A
Maryland Dam Locations	0	N/A	N/A
Maryland Pond Locations	0	N/A	N/A
Surface Water Intakes	0	N/A	N/A
Wastewater Discharge Facilities	0	N/A	N/A
Drinking Water	0	N/A	N/A
Clean Water	0	N/A	N/A

**MDE Final EJ Score (%ile score)**

#	Census tract Identifier	Geographic Area Name	Total Population	Final EJ Score Percent (for this tract)	Final EJ Score Percentile (Distribution across Maryland)	Area(mi²)
1	24041960100	Census Tract 9601, Talbot County, Maryland	3853	28.42	42.24	N/A

**Overburdened Communities Combined Score**

#	GEOID20	Geographic_Area_Name	TotalPop	Overburd_Exposure_Percent	Overburd_Exposure_Percentile	Overburd_Poll_Environment_Percent	Overburd_Poll_Environment_Percentile	Sensitive_Population_Percent
1	24041960100	Census Tract 9601, Talbot County, Maryland	3,853	36.30	5.19	2.87	16.95	86.27

#	Sensitive_Population_Percentile	OverburdenedAllPercent	OverburdenedAllPercentile	Area(mi²)
1	97.13	73.55	58.65	N/A

**Overburdened Pollution Environmental Score (%ile score)**

#	GEOID20	Geographic_Area_Name	RentalsOccupiedPercentage	Percentile	PercentRMP	PercentRMPEJ	PercentHazWaste	PercentHazWaste EJ
1	24041960100	Census Tract 9601, Talbot County, Maryland	10.84	45.66	4.93	6.83	0.33	2.17

#	PercentSuperFund NPL	PercentSuperFund NPLEJ	PercentHazWW	PercentHazWWEJ	BrownFPercent	Percentile_1	PercentPowerPlants	Percentile_12
1	1.67	3.09	0.00	0.00	8.02	99.86	0.00	0.00

#	PercentCAFOS	Percentile_12_13	PercentActiveMines	Percentile_12_13_14	PollutionEnvironmentalPercent	PollutionEnvironmentalPercentile	Area(mi²)
1	20.16	98.56	0.00	0.00	2.87	16.95	N/A

**Overburdened Exposure Score (%ile score)**

#	GEOID20	Geographic_Area_Name	Total_Pop	PercentNATA_Cancer	Percentile_NATA_Cancer	PercentNATA_Resp_HI	Percentile_NATA_Resp_HI	PercentNATA_Diesel
1	24041960100	Census Tract 9601, Talbot County, Maryland	3,853.00	40.00	4.41	60.00	7.33	13.33

#	Percentile_NATA_Diesel	PercentNATA_PM25	PercentileNATA_PM25	PercentOzone	PercentileOzone	PercentTraffic	PercentileTraffic	PercentTRI
1	3.54	78.43	2.56	93.00	9.18	0.34	2.17	5.26

#	PercentileTRI	PercentHazWasteLF	Percentile_HazWasteLF	PollutionExposurePercent	PollutionExposurePercentile	Area(mi²)
1	80.18	0.00	0.00	36.30	5.19	N/A

**Overburdened Sensitive Population (%ile score)**

#	GEOID20	Geographic_Area_Name	PerAstma	PercentileAst	PerMyo	PercentileMyo	PerLow	PercentileLow
1	24041960100	Census Tract 9601, Talbot County, Maryland	98.70	84.21	98.60	81.68	59.30	63.36

#	PercentBroad	PercentileBroad	PercentSens	PercentileSens	Area(mi²)
1	11.51	59.88	67.03	72.28	N/A

**Socioeconomic/Demographic Score 2020 (Percentile score) (Underserved Community)**

#	Census tract Identifier	Geographic Area Name	Total Population	Percent Poverty	Percent Minority	Percent Limited English Proficiency	Demographic Score (Percent for this tract)	Demographic Score (Percentile Distribution across Maryland)	Area(mi <sup>2</sup> )
1	24041960100	Census Tract 9601, Talbot County, Maryland	3,853	13.83	8.62	0.07	7.50	8.70	N/A

Ozone (2015)

#	STATEFP10	COUNTYFP10	COUNTYNS10	GEOID10	NAME10	Ozone NAA Area	8-Hr Ozone (2015) Designation	8-HR Ozone (2015) Classification	8-Hr Ozone (2015) Status	Area(mi <sup>2</sup> )
1	24	041	00592947	24041	Talbot	No Data	Attainment/Unclassifiable	No Data	No Data	N/A

Fine Particles (2012)

#	STATEFP10	COUNTYFP10	COUNTYNS10	GEOID10	NAME10	PM2.5 (2012) Status	Area(mi <sup>2</sup> )
1	24	041	00592947	24041	Talbot	Attainment/Unclassifiable	N/A

Biosolids FY 2020 and Current Permits Distribution By Acreage

#	County Name	FY2020andAfter	Area(mi <sup>2</sup> )
1	Talbot	2,395.40	N/A

Biosolids FY2015 - 2019 Permits Distribution By Acreage

#	County Name	FY2015to2019	Area(mi <sup>2</sup> )
1	Talbot	2,119.40	N/A

Biosolids FY2010 - 2014 Permits Distribution By Acreage

#	County Name	FY2010to2014	Area(mi <sup>2</sup> )
1	Talbot	3,884.10	N/A

Biosolids FY2009 Permits Expired Distribution By Acreage

#	County Name	FY2009	Area(mi <sup>2</sup> )
1	Talbot	No Data	N/A

Biosolids FY 2020 and Current Permit Distribution By Percent Coverage

#	County Name	FY2020andAfter	Area(mi <sup>2</sup> )
1	Talbot	2,395.40	N/A

Biosolids FY2015 - 2019 Permit Distribution By Percent Coverage

#	County Name	FY2015to2019	Area(mi <sup>2</sup> )
1	Talbot	2,119.40	N/A

Biosolids FY2010 - 2014 Permit Distribution By Percent Coverage

#	County Name	FY2010to2014	Area(mi <sup>2</sup> )
1	Talbot	3,884.10	N/A

Biosolids FY2009 Expired Permit Distribution By Percent Coverage

#	County Name	FY2009	Area(mi <sup>2</sup> )
1	Talbot	No Data	N/A

10 Miles from Landfill



#	County	Type	Facility_N	ADDRESS	FILL	SITE__ACRE	AI_No_	Owner_Type
1	CAROLINE	WMF	MidshoreIIRegional MunicipalLF	12236 River Road, Ridgely, MD 21660.	71.3	224.00	63,591.00	MES
2	TALBOT	WMF	Midshore Regional MunicipalLF	7341 Barkers Landing Road, Easton MD 21601.	67	140.00	11,369.00	MES
3	TALBOT	WTS	Midshore TransferStation	7341 Barkers Landing Road, Easton MD 21601.	0.5	140.00	11,369.00	MES

#	MD_GRID__E	PERMITNUMB	EXPIRATION	Area(mi²)
1	405 /113	2013-WMF-0608	2/3/2019, 7:00 PM	N/A
2	1080 /356	2015-WMF-0144	2/23/2020, 7:00 PM	N/A
3	1080 /356	2015-WTS-0549	5/10/2020, 8:00 PM	N/A

30 mile buffer (Maryland)

#	Facility_Name_1	Facility_Contact_1	Contact_Phone	Contact_Email_1	Contact_2	Contact_2_Phone	Contact_2_Email	URL	Area(mi²)
1	Twin Maples Compost Facility	Ryan Slack	(336) 207-9310	rslack@midatlantic corganic.com	No Data	No Data	No Data	<a href="https://midatlanticorganic.com/">https://midatlanticorganic.com/</a>	N/A



---

May 22, 2024

Maryland Department of the Environment  
Air Quality Permits Program  
Attn: Matthew Hafner  
1800 Washington Boulevard  
Baltimore, Maryland 21230

Reference: Mountaire Farms of Delaware Inc. – Cordova Grain Facility

Mr. Hafner:

Please find enclosed the application packet for our Cordova Grain Facility located at 11761 Cordova Road, Maryland which involves air permitting the facility properly. Mountaire purchased the facility in December of 2023 from Nagle's Farm Services.

The application includes all air operating equipment, best control technologies that will be constructed along with the facility air emissions. Air emissions were calculated on the worst-case scenario of the facility operating 24 hours a day, 7 days a week. Control technologies include applying mineral oil to all grains received and installing the Dust Control by Wings baffle system inside the receiving pit. All gravity and mechanical load outs will be equipped with a dust sock.

Grain throughput for the facility: 300,000

If there are any questions, feel free to reach out to me.

Regards,

*Kyle McConnell*

Kyle McConnell

Environmental Manager

Mountaire Farms

**Mountaire Farms of Delaware Inc. – Cordova Grain Facility**

**Equipment List**

***Grain Storage***

<b><i>Identification</i></b>	<b><i>No. of Bushels</i></b>
Tank 1	42,000
Tank 2	42,000
Tank 3	42,000
Tank 4	385,000
Tank 5	150,000
Tank 6	160,000
Tank 7	100,000
Tank 8	170,000
Tank 9	165,000
Tank 10	300,000
Tank 11	190,000
Ground Corn Piles (2 million & 200,000 bushels)	2,200,000
<b><i>Total Grain Storage</i></b>	<b><i>3,946,000</i></b>

***Wet Tanks***

<b><i>Identification</i></b>	<b><i>No. of Bushels</i></b>
Wet Tank 1	10,000
Wet Tank 2	10,000
Wet Tank 3	10,000
Wet Tank 4	10,000
Wet Tank 5	10,000
<b><i>Total Wet Grain Storage</i></b>	<b><i>50,000</i></b>

***Grain Dryer***

<b><i>Identification</i></b>	<b><i>No. of Bushels / Hour</i></b>
Grain Dryer 1 (Propane) (Brock Dryer)	3,500
Grain Dryer 2 (Propane) (Zimmerman Dryer)	1,512

### Grain Receiving Pit

<i>Identification</i>	<i>No. of Bushels / Hour</i>
Truck Receiving Pit 1	750-bushel capacity
Receiving Pit Drag	15,500

### Grain Elevator Legs

<i>Identification</i>	<i>No. of Bushels / Hour</i>
Receiving Leg	15,500
Wet Leg	6,000
Dry Leg	6,000

### Mechanical Loadouts

<i>Identification</i>	<i>No. of Bushels / Hour</i>
Receiving Leg Loadout	15,500
Wet Leg Loadout	6,000
Dry Leg Loadout	6,000
#10 incline tube screw loadout	7,500
#4 incline tube screw loadout	6,000
#8 incline tube screw loadout	5,500
#11 incline tube screw loadout	6,500
#9 incline tube screw loadout	5,500
#6 incline tube screw loadout	4,500
#5 incline tube screw loadout	4,500
#7 incline tube screw loadout	5,000

### Grain Turn Heads

<i>Identification</i>	<i>Type</i>
Turn Head 1	9-hole flat back turn head
Turn Head 2	8-hole flat back turn head
Turn Head 3	4-hole flat back turn head

### Gravity Loadouts

<i>Identification</i>	<i>No. of Bushels / Hour</i>
Gravity loadout tank 1	6,000
Gravity loadout tank 2	6,000
Gravity loadout tank 4	6,000
Gravity loadout tank 5	6,000
Gravity loadout tank 6	6,000
Gravity loadout tank 7	6,000
Gravity loadout tank 8	6,000
Gravity loadout tank 9	6,000
Gravity loadout tank 10	6,000
Gravity loadout tank 11	6,000
Gravity loadout wet tank 4	6,000

### Overhead Grain Transfer Drags

<i>Identification</i>	<i>No. of Bushels / Hour</i>
#8/4/10 top drag	15,000
Tank 8 top drag	16,000
#11 top drag	16,000
#6/9 top drag	6,000
#5/6 top drag	6,000
#2/5 top drag	5,000
#1/7 top drag	12,000

### Tunnel Drags

<i>Identification</i>	<i>No. of Bushels / Hour</i>
#4 tunnel drag	6,500
#11 tunnel drag	6,500
Wet #1/2 drag	5,500

## Tube Screws

<i>Identification</i>	<i>No. of Bushels / Hour</i>
Zimmerman dryer U trough screw	5,000
Brock dryer U trough screw	5,000
Dry leg U trough screw	5,000
#3 tube screw	2,500
#7 tube screw	4,000
#1 tube screw	2,500
#2 tube screw	2,500
#5 U trough tube screw	4,000
#6 U trough tube screw	4,000
#9 U trough tube screw	6,000
Wet #3 U trough screw	4,000
Wet #4/5 U trough screw	4,000

## Ground Corn Pile Storage Equipment

<i>Identification</i>	<i>No. of Bushels / Hour</i>
Load in Hamilton Belt System	10,000
Loadout Hamilton Belt System	10,000

Potential Emissions

Grain elevator potential emissions									
a	b	c	d	e	f	g	h	h	i
Activity	Maximum Capacity (tons/year)	PM Control Efficiency (% control)	PM Emission Factor (lb/ton)	PM Emissions (tons/year)	PM <sub>10</sub> Control Efficiency (% control)	PM <sub>10</sub> Emission Factor (lb/ton)	PM <sub>10</sub> Emissions (ton/year)	PM <sub>2.5</sub> Emission Factor (lb/ton)	PM <sub>2.5</sub> Emissions (ton/year)
Receiving	Truck straight	300,000.0	0.18	27.00		0.059	8.85	0.01	1.50
	Truck hopper	0.0	0.035	0.00		0.0078	0.00	0.0013	0.00
	Rail	0.0	0.032	0.00		0.0078	0.00	0.0013	0.00
Shipping	Barge unlead cont.	0.0	0.029	0.00		0.0073	0.00	0.0019	0.00
	Barge marine leg	0.0	0.15	0.00		0.038	0.00	0.005	0.00
	Ship	0.0	0.15	0.00		0.038	0.00	0.005	0.00
	Truck unspecified	300,000.0	0.086	12.90		0.029	4.35	0.0049	0.74
Loadout / Shipping	Railcar	0.0	0.027	0.00		0.0022	0.00	0.00037	0.00
	Barge	0.0	0.016	0.00		0.004	0.00	0.00055	0.00
Headhouse & Handling <sup>2</sup>	Ship	0.0	0.048	0.00		0.012	0.00	0.0022	0.00
		900,000.0	0.061	27.45		0.034	15.30	0.0058	2.61
Grain Cleaning <sup>3</sup>		0.0	0.375	0.00		0.095	0.00	0.016	0.00
		600,000.0	0.025	7.50		0.0063	1.89	0.0011	0.33
Storage Bin (vent)	Rack	0.0	3	0.00		0.75	0.00	0.13	0.00
	Rack (<50 mesh)	0.0	0.47	0.00		0.12	0.00	0.02	0.00
Grain Drying	Column	300,000.0	0.22	33.00		0.055	8.25	0.0094	1.41
<b>Total tons of emissions (excluding dryer combustion)</b>				<b>107.85</b>			<b>38.64</b>		<b>6.59</b>

Source unless otherwise noted: EPA AP-42 Chapter 9.9.1

Emissions with Control Efficiencies:

Grain elevator actual emissions										
Source unless otherwise noted: EPA AP-42 Chapter 9.9.1										
a	b	c	d	e	f	g	h	h	i	
Activity	Actual Throughput (tns/year)	PM Control Efficiency <sup>1</sup> (% control)	PM Emission Factor (lb/tn)	PM Emissions (tns/year)	PM <sub>10</sub> Control Efficiency <sup>1</sup> (% control)	PM <sub>10</sub> Emission Factor (lb/tn)	PM <sub>10</sub> Emissions (ton/year)	PM <sub>2.5</sub> Emission Factor (lb/tn)	PM <sub>2.5</sub> Emissions (ton/year)	
				$b^{*f}(1-c)/2000$			$b^{*g}(1-f)/2000$		$b^{*i}(1-f)/2000$	
Receiving	Truck straight	300,000.0	85%	0.18	4.05	85%	0.059	1.33	0.01	0.23
	Truck hopper		0%	0.035	0.00	0%	0.0078	0.00	0.0013	0.00
	Rail		0%	0.032	0.00	0%	0.0078	0.00	0.0013	0.00
Shipping	Barge unlead cont.		0%	0.029	0.00	0%	0.0073	0.00	0.0019	0.00
	Barge marine leg		0%	0.15	0.00	0%	0.038	0.00	0.005	0.00
	Ship		0%	0.15	0.00	0%	0.038	0.00	0.005	0.00
Loadout /	Truck unspecified	300,000.0	60%	0.086	5.16	60%	0.029	1.74	0.0049	0.29
	Railcar		0%	0.027	0.00	0%	0.0022	0.00	0.00037	0.00
	Barge		0%	0.016	0.00	0%	0.004	0.00	0.00055	0.00
Headhouse & Handling <sup>5</sup>	Ship		0%	0.048	0.00	0%	0.012	0.00	0.0022	0.00
		900,000.0	60%	0.061	10.98	60%	0.034	6.12	0.0058	1.04
			0%	0.375	0.00	0%	0.095	0.00	0.016	0.00
Storage Bin (vent)		600,000.0	60%	0.025	3.00	60%	0.0063	0.76	0.0011	0.13
	Rack		0%	3	0.00	0%	0.75	0.00	0.13	0.00
Grain Drying	Rack (<50 mesh)		0%	0.47	0.00	0%	0.12	0.00	0.02	0.00
	Column	300,000.0	60%	0.22	13.20	60%	0.055	3.30	0.0094	0.56
<b>Total tons emissions (excluding combustion from dryers)</b>				<b>36.39</b>			<b>13.24</b>		<b>2.26</b>	



**Propane potential and actual emissions**

Pollutant	a GWP <sup>1</sup>	b Dryer hourly propane usage (gal/hr) / (91500 Btu/gal) 723.50	c Actual propane burned (gal/yr) 29240.80	d Hours in a Year (hr/yr) (24 hrs/day * 365 days/yr) 8760	e Emission Factor (lb/gal) by pollutant	Potential Emissions (ton/yr) (b * d * e) / 2000	Actual Emissions (tons/yr) (c * e) / 2000

Criteria Air Pollutants							
PM							
PM10					0.0007	2.22	0.01
PM2.5					0.0007	2.22	0.01
SOX					0.00018	0.57	0.00
NOX					0.0130	41.20	0.19
VOC					0.0010	3.17	0.01
CO					0.0075	23.77	0.11
Lead					n/a		

Greenhouse Gas Emissions							
CO <sub>2</sub>	1				12.40	39287.94	181.26
CH <sub>4</sub>	25				0.0002017	0.6392	0.0029
N <sub>2</sub> O	298				0.0000202	0.0639	0.0003
GHG Total (CO <sub>2</sub> e) <sup>2</sup>						39322.97	181.42

Hazardous Air Pollutants							
Benzene					0.0000000772	0.0002	0.0000
Formaldehyde					0.0000028	0.0087	0.0000
Hexane					0.0000662	0.2098	0.0010
Naphthalene					0.0000002243	0.0001	0.0000
Toluene					0.000001250	0.0004	0.0000
Arsenic					0.0000000736	0.0000	0.0000
Beryllium					0.00000000441	0.0000	0.0000
Cadmium					0.0000000405	0.0001	0.0000
Chromium					0.0000000515	0.0002	0.0000
Cobalt					0.00000003089	0.0000	0.0000
Manganese					0.0000001398	0.0000	0.0000
Mercury					0.0000000956	0.0000	0.0000
Nickel					0.000000772	0.0002	0.0000
Selenium					0.00000000883	0.0000	0.0000
HAP total						0.2199	0.0010

Grain Dryer 1:

Source: 40 CFR 98, Subp. C, Table C-1 and C-2

Source: EPA AP-42 Chapter 1.4

**Propane potential and actual emissions**

Pollutant	a GWP <sup>1</sup>	b Dryer hourly propane usage (gal/hr) / (91500 Btu/gal) 182.01	c Actual propane burned (gal/yr) 29240.80	d Hours in a Year (hr/yr) 24 hrs/day * 365 days/yr 8760	e Emission Factor (lb/gal) by pollutant	Potential Emissions	Actual Emissions
						(ton/yr) (b * d * e) / 2000	(tons/yr) (c * e) / 2000
<p align="center"><b>Criteria Air Pollutants</b></p> <p align="center"><a href="#">Source: EPAAP-42 Chapter 1.5</a></p>							

<p align="center"><b>Criteria Air Pollutants</b></p> <p align="center"><a href="#">Source: EPAAP-42 Chapter 1.5</a></p>							
PM							
PM10					0.0007	0.56	0.01
PM2.5					0.0007	0.56	0.01
SOx					0.00018	0.14	0.00
NOx					0.0130	10.36	0.19
VOC					0.0010	0.80	0.01
CO					0.0075	5.98	0.11
Lead					n/a		

<p align="center"><b>Greenhouse Gas Emissions</b></p> <p align="center"><a href="#">Source: 40 CFR 98, Subp. C, Table C-1 and C-2</a></p>							
CO <sub>2</sub>	1				12.40	9883.71	181.26
CH <sub>4</sub>	25				0.0002017	0.1608	0.0029
N <sub>2</sub> O	298				0.0000202	0.0161	0.0003
					GHG Total (CO <sub>2</sub> e) <sup>2</sup>	<b>9892.52</b>	<b>181.42</b>

<p align="center"><b>Hazardous Air Pollutants</b></p> <p align="center"><a href="#">Source: EPAAP-42 Chapter 1.4</a></p>							
Benzene					0.0000000772	0.0001	0.0000
Formaldehyde					0.00000028	0.0022	0.0000
Hexane					0.0000662	0.0528	0.0010
Naphthalene					0.00000002243	0.0000	0.0000
Toluene					0.000001250	0.0001	0.0000
Arsenic					0.00000000736	0.0000	0.0000
Beryllium					0.000000000441	0.0000	0.0000
Cadmium					0.0000000405	0.0000	0.0000
Chromium					0.0000000515	0.0000	0.0000
Cobalt					0.00000003089	0.0000	0.0000
Manganese					0.0000001398	0.0000	0.0000
Mercury					0.0000000956	0.0000	0.0000
Nickel					0.0000000772	0.0001	0.0000
Selenium					0.00000000883	0.0000	0.0000
					HAP total	<b>0.0553</b>	<b>0.0010</b>

Grain Dryer 2:

**Facility Combined Emissions with Controls:**

Pollutant	Grain Elevator (ton/yr)	Feed Mill (ton/yr)	Natural Gas (ton/yr)	Propane (ton/yr)	Fugitive (ton/yr)	Actual Emissions (ton/yr)
<b>Criteria Air Pollutants</b>						
PM	36.39			0.02		36.41
PM10	13.24			0.02		13.26
PM2.5	2.26			0.02		2.28
SOx						0.00
NOx				0.38		0.38
VOC				0.02		0.02
CO				0.22		0.22
Lead						0.00
<b>Greenhouse Gas Emissions</b>						
CO <sub>2</sub>				181.26		181.26
CH <sub>4</sub>				0.00		0.0029
N <sub>2</sub> O				0.00		0.0003
GHG Total CO <sub>2</sub> e				181.42		181.42
<b>Hazardous Air Pollutants</b>						
Benzene				0.00		0.0000
Formaldehyde				0.00		0.0000
Hexane				0.00		0.0010
Naphthalene				0.00		0.0000
Toluene				0.00		0.0000
Asenic				0.00		0.0000
Beryllium				0.00		0.0000
Cadmium				0.00		0.0000
Chromium				0.00		0.0000
Cobalt				0.00		0.0000
Manganese				0.00		0.0000
Mercury				0.00		0.0000
Nickel				0.00		0.0000
Selenium				0.00		0.0000
HAP Indiv. Max				Hexane		0.0010
HAP total						0.0010



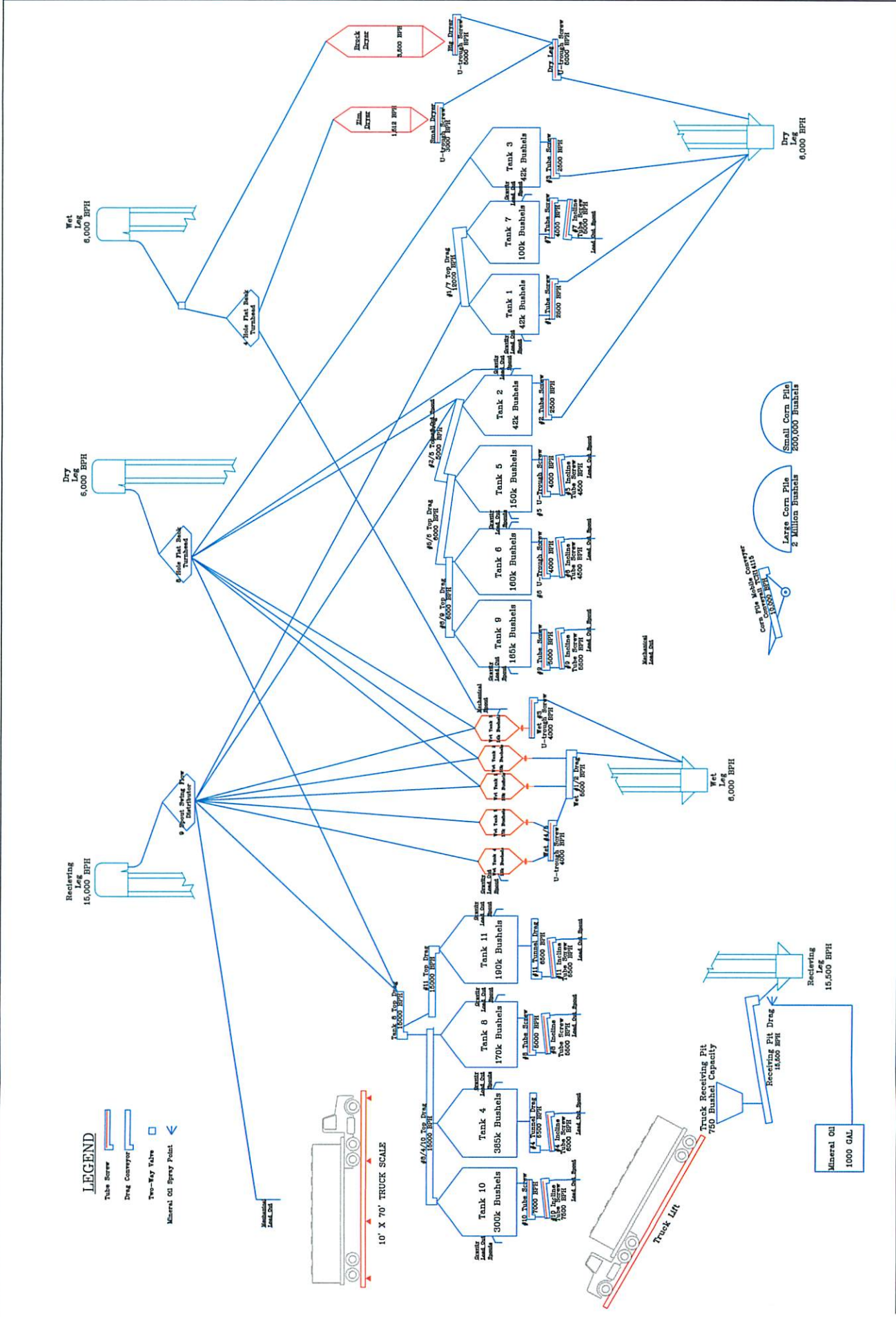
DATE: 2/19/24  
 REV: 5/21/24  
 DRAWN BY: HDU  
 REVISD BY: HDU

# MOUNTAIRE FARMS

## Cordova Process Flow Diagram

SCALE: XXXX  
 DRAWING # XXXX

SHEET  
**A-1**





## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Corn Pile Storage Equipment: Load-in Hamilton Belt System & Load-out Hamilton Belt System - 10,000 bph each	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.


**MARYLAND DEPARTMENT OF THE ENVIRONMENT**

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

**Air and Radiation Management Administration ▪ Air Quality Permits Program**

**APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT**

Permit to Construct       Registration Update       Initial Registration

<p><b>1A. Owner of Equipment/Company Name</b> Mountaire Farms of Delaware Inc.</p> <hr/> <p><b>Mailing Address</b> P.O. Box 1320 Street Address Millsboro                      Delaware                      19966 City                                      State                                      Zip</p> <p><b>Telephone Number</b> (302) 841-4629</p> <p><b>Signature</b> </p> <hr/> <p>Phillip Plylar - President Print Name and Title</p>	<p align="center"><b>DO NOT WRITE IN THIS BLOCK</b></p> <p align="center"><b>2. REGISTRATION NUMBER</b></p> <table style="width:100%; border: none;"> <tr> <td style="border: none;"><b>County No.</b></td> <td style="border: none;"><b>Premises No.</b></td> </tr> <tr> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:50%;"></td><td style="width:50%;"></td></tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> </td> </tr> <tr> <td style="border: none; text-align: center;">1-2</td> <td style="border: none; text-align: center;">3-6</td> </tr> <tr> <td style="border: none;"><b>Registration Class</b></td> <td style="border: none;"><b>Equipment No.</b></td> </tr> <tr> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:100%;"></td></tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> </td> </tr> <tr> <td style="border: none; text-align: center;">7</td> <td style="border: none; text-align: center;">8-11</td> </tr> <tr> <td style="border: none;"><b>Data Year</b></td> <td style="border: none;"><b>Application Date</b></td> </tr> <tr> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:50%;"></td><td style="width:50%;"></td></tr> </table> </td> <td style="border: none;"> <hr/> </td> </tr> <tr> <td style="border: none; text-align: center;">12-13</td> <td style="border: none;"></td> </tr> </table>	<b>County No.</b>	<b>Premises No.</b>	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:50%;"></td><td style="width:50%;"></td></tr> </table>			<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>					1-2	3-6	<b>Registration Class</b>	<b>Equipment No.</b>	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:100%;"></td></tr> </table>		<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>					7	8-11	<b>Data Year</b>	<b>Application Date</b>	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:50%;"></td><td style="width:50%;"></td></tr> </table>			<hr/>	12-13	
<b>County No.</b>	<b>Premises No.</b>																															
<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:50%;"></td><td style="width:50%;"></td></tr> </table>			<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>																													
1-2	3-6																															
<b>Registration Class</b>	<b>Equipment No.</b>																															
<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:100%;"></td></tr> </table>		<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>																														
7	8-11																															
<b>Data Year</b>	<b>Application Date</b>																															
<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:50%;"></td><td style="width:50%;"></td></tr> </table>			<hr/>																													
12-13																																
<p align="right" style="margin-right: 50px;"><u>6-3-2024</u></p> <p align="right">Date</p>																																
<p><b>1B. Equipment Location and Telephone Number (if different from above)</b> 11761 Cordova Road Street Number and Street Name</p> <hr/> <p>Cordova                      Maryland                      21625                      (302) 841-4629 City/Town                      State                      Zip                      Telephone Number</p> <p>Mountaire Farms of Delaware Inc. - Cordova Grain Facility Premises Name (if different from above)</p>																																
<p><b>3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)</b></p> <table style="width:100%; border: none;"> <tr> <td style="border: none;"><b>Status</b></td> <td style="border: none;"><b>New Construction Begun (MM/YY)</b></td> <td style="border: none;"><b>New Construction Completed (MM/YY)</b></td> <td style="border: none;"><b>Existing Initial Operation (MM/YY)</b></td> </tr> <tr> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:100%; text-align: center;">C</td></tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> </td> </tr> <tr> <td style="border: none; text-align: center;">15</td> <td style="border: none; text-align: center;">16-19</td> <td style="border: none; text-align: center;">20-23</td> <td style="border: none; text-align: center;">20-23</td> </tr> </table>		<b>Status</b>	<b>New Construction Begun (MM/YY)</b>	<b>New Construction Completed (MM/YY)</b>	<b>Existing Initial Operation (MM/YY)</b>	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:100%; text-align: center;">C</td></tr> </table>	C	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>					15	16-19	20-23	20-23						
<b>Status</b>	<b>New Construction Begun (MM/YY)</b>	<b>New Construction Completed (MM/YY)</b>	<b>Existing Initial Operation (MM/YY)</b>																													
<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:100%; text-align: center;">C</td></tr> </table>	C	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table>																				
C																																
15	16-19	20-23	20-23																													
<p><b>4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)</b> Hamilton Belt System - Load In and Load Out</p>																																
<p><b>5. Workmen's Compensation Coverage</b>      See attached.</p> <hr/> <p>Company _____ Binder/Policy Number _____ Expiration Date _____</p> <p><small>NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.</small></p>																																
<p><b>6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time</b> <u>2</u></p>																																
<p><b>6B. Number of Stack/Emission Points Associated with this Equipment</b> <u>2</u></p>																																

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other

Describe Mineral oil applied to all grains received. Dust sock attached to the loadout.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> 42-45
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS (Specify Type)	<input type="text"/> 66-1	ANNUAL AMOUNT CONSUMED (Specify Units of Measure)	OTHER FUEL (Specify Type)	<input type="text"/> 66-2	ANNUAL AMOUNT CONSUMED (Specify Units of Measure)
-------------------------------	---------------------------	--	------------------------------	---------------------------	--

1= Coke 2= COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 68-69	Hours per Day <input type="text"/> <input type="text"/> 70-71	Days Per Week <input type="text"/> 72	Days per Year <input type="text"/> <input type="text"/> 73-75
Seasonal Variation in Operation:						
No Variation <input type="checkbox"/> 76	Winter Percent <input type="text"/> <input type="text"/> 77-78	Spring Percent <input type="text"/> <input type="text"/> 79-80	Summer Percent <input type="text"/> <input type="text"/> 81-82	Fall Percent <input type="text"/> <input type="text"/> 83-84	(Total Seasons= 100%)	

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**



16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day

Particulate Matter <input type="text" value="See attached air emissions"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
99-104	105-110	111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
177-122	123-128	129-134

17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day

Particulate Matter <input type="text" value="See attached air emissions"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
135-139	140-144	145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
150-154	155-159	160-164

Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)

TSP <input type="checkbox"/>	SOX <input type="checkbox"/>	NOX <input type="checkbox"/>	CO <input type="checkbox"/>	VOC <input type="checkbox"/>	PM10 <input type="checkbox"/>
165	166	167	168	169	170

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date_____ By_____
Reviewed by Local Jurisdiction Date_____ By_____	Reviewed by State Date_____ By_____	

19. Inventory Date	Month/Year <input type="text"/> <input type="text"/> <input type="text"/>	Equipment Code <input type="text"/> <input type="text"/> <input type="text"/>	SCC Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	171-174	175-177	178-185

20. Annual Operating Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Maximum Design Hourly Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Permit to Operate Month <input type="text"/> <input type="text"/>	Transaction Date (MM/DD/YR) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
186-192	193-199	200-201	202-207

Staff Code <input type="text"/> <input type="text"/> <input type="text"/>	VOC Code <input type="text"/> <input type="text"/>	SIP Code <input type="text"/> <input type="text"/>	Regulation Code <input type="text"/> <input type="text"/> <input type="text"/>	Confidentiality <input type="checkbox"/>
208-210	211 212	213 214	215-218	219

Point Description <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Action <input type="checkbox"/>
220-238	239 A: Add C: Change



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc. - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Brock Grain Dryer (Dryer 1) 3,500 bph	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>NA</u> Form 5	No. <u>NA</u> Form 11
No. <u>NA</u> Form 5T	No. <u>NA</u> Form 41
No. <u>NA</u> Form 5EP	No. <u>NA</u> Form 42
No. <u>NA</u> Form 6	No. <u>NA</u> Form 44
No. <u>NA</u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.


MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
 (410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct  Registration Update  Initial Registration

<p><b>1A. Owner of Equipment/Company Name</b>                  Mountaire Farms of Delaware Inc.</p> <hr/> <p><b>Mailing Address</b>                  P.O. Box 1320                  Street Address                  Millsboro Delaware 19966                  City State Zip</p> <p><b>Telephone Number</b>                  (302 ) 841-4629</p> <p><b>Signature</b>  </p> <p>Phillip Plylar - President                  Print Name and Title</p>	<p style="text-align: center;"><b>DO NOT WRITE IN THIS BLOCK</b></p> <p style="text-align: center;"><b>2. REGISTRATION NUMBER</b></p> <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;"> <p><b>County No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">1-2</p> </td> <td style="width:50%; border: none;"> <p><b>Premises No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">3-6</p> </td> </tr> <tr> <td style="border: none;"> <p><b>Registration Class</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">7</p> </td> <td style="border: none;"> <p><b>Equipment No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">8-11</p> </td> </tr> <tr> <td style="border: none;"> <p><b>Data Year</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">12-13</p> </td> <td style="border: none;"> <p><b>Application Date</b></p> <p style="text-align: center;">6-3-2024</p> </td> </tr> </table>	<p><b>County No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">1-2</p>					<p><b>Premises No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">3-6</p>					<p><b>Registration Class</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">7</p>					<p><b>Equipment No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">8-11</p>					<p><b>Data Year</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">12-13</p>					<p><b>Application Date</b></p> <p style="text-align: center;">6-3-2024</p>
<p><b>County No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">1-2</p>					<p><b>Premises No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">3-6</p>																						
<p><b>Registration Class</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">7</p>					<p><b>Equipment No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">8-11</p>																						
<p><b>Data Year</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">12-13</p>					<p><b>Application Date</b></p> <p style="text-align: center;">6-3-2024</p>																						
<p><b>1B. Equipment Location and Telephone Number (if different from above)</b>                  11761 Cordova Road                  Street Number and Street Name</p> <p>Cordova Maryland 21625 (302 ) 841-4629                  City/Town State Zip Telephone Number</p> <p>Mountaire Farms of Delaware Inc. - Cordova Grain Facility                  Premises Name (if different from above)</p>																											
<p><b>3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)</b></p> <table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;"> <p><b>Status</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:20px; text-align: center;">C</td></tr> </table> <p style="text-align: center;">15</p> </td> <td style="width:25%; border: none;"> <p><b>New Construction Begun (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">16-19</p> </td> <td style="width:25%; border: none;"> <p><b>New Construction Completed (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">20-23</p> </td> <td style="width:25%; border: none;"> <p><b>Existing Initial Operation (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">20-23</p> </td> </tr> </table>		<p><b>Status</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:20px; text-align: center;">C</td></tr> </table> <p style="text-align: center;">15</p>	C	<p><b>New Construction Begun (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">16-19</p>					<p><b>New Construction Completed (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">20-23</p>					<p><b>Existing Initial Operation (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">20-23</p>													
<p><b>Status</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:20px; text-align: center;">C</td></tr> </table> <p style="text-align: center;">15</p>	C	<p><b>New Construction Begun (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">16-19</p>					<p><b>New Construction Completed (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">20-23</p>					<p><b>Existing Initial Operation (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p style="text-align: center;">20-23</p>															
C																											
<p><b>4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)</b>                  Brock Grain Dryer 3,500 bph - propane</p>																											
<p><b>5. Workmen's Compensation Coverage</b> See attached.                  Binder/Policy Number _____ Expiration Date _____                  Company _____</p> <p><small>NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.</small></p>																											
<p><b>6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time</b> <u>1</u></p> <p><b>6B. Number of Stack/Emission Points Associated with this Equipment</b> <u>1</u></p>																											

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other

Describe Mineral oil applied to all grains received.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS See attached air emmissions 42-45	GRADE <input type="text"/> 42-45
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	
OTHER FUELS (Specify Type) <input type="checkbox"/> ANNUAL AMOUNT CONSUMED 66-1 (Specify Units of Measure)		OTHER FUEL (Specify Type) <input type="checkbox"/> ANNUAL AMOUNT CONSUMED 66-2 (Specify Units of Measure)			

1=Coke 2=COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 68-69	Hours per Day <input type="text"/> <input type="text"/> 70-71	Days Per Week <input type="text"/> 72	Days per Year <input type="text"/> <input type="text"/> <input type="text"/> 73-75
Seasonal Variation in Operation:						
No Variation <input type="checkbox"/> 76	Winter Percent <input type="text"/> <input type="text"/> 77-78	Spring Percent <input type="text"/> <input type="text"/> 79-80	Summer Percent <input type="text"/> <input type="text"/> 81-82	Fall Percent <input type="text"/> <input type="text"/> 83-84	(Total Seasons= 100%)	

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur See attached air emissions 105-110	Oxides of Nitrogen See attached air emissions 111-116
Carbon Monoxide See attached air emissions 177-122	Volatile Organic Compounds See attached air emissions 123-128	PM-10 See attached air emissions 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur See attached air emissions 140-144	Oxides of Nitrogen See attached air emissions 145-149
Carbon Monoxide See attached air emissions 150-154	Volatile Organic Compounds See attached air emissions 155-159	PM-10 See attached air emissions 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="text" value="2"/> 165	SOX <input type="text" value="2"/> 166	NOX <input type="text" value="2"/> 167	CO <input type="text" value="2"/> 168	VOC <input type="text" value="2"/> 169	PM10 <input type="text" value="2"/> 170
--	--	--	---	--	---

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

<b>18. Date Rec'd. Local</b> _____	<b>Date Rec'd. State</b> _____	<b>Return to Local Jurisdiction</b> Date _____ By _____
<b>Reviewed by Local Jurisdiction</b> Date _____ By _____	<b>Reviewed by State</b> Date _____ By _____	

<b>19. Inventory Date</b> _____	<b>Month/Year</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	<b>Equipment Code</b> <input type="text"/> <input type="text"/> <input type="text"/> 175-177	<b>SCC Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
------------------------------------	---	--	---

<b>20. Annual Operating Rate</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	<b>Maximum Design Hourly Rate</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	<b>Permit to Operate Month</b> <input type="text"/> <input type="text"/> 200-201	<b>Transaction Date (MM/DD/YR)</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
--	---	--	--

<b>Staff Code</b> <input type="text"/> <input type="text"/> <input type="text"/> 208-210	<b>VOC Code</b> <input type="text"/> <input type="text"/> 211 212	<b>SIP Code</b> <input type="text"/> <input type="text"/> 213 214	<b>Regulation Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	<b>Confidentiality</b> <input type="text"/> 219
<b>Point Description</b> <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"/> 220-238				<b>Action</b> <input type="text"/> 239 A: Add C: Change



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc. - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Zimmerman Grain Dryer (Dryer 2) - 1,512 bph	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

**MARYLAND DEPARTMENT OF THE ENVIRONMENT**

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us


**Air and Radiation Management Administration ▪ Air Quality Permits Program**

**APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT**

Permit to Construct

Registration Update

Initial Registration

<p><b>1A. Owner of Equipment/Company Name</b> Mountaire Farms of Delaware Inc.</p> <hr/> <p><b>Mailing Address</b> P.O. Box 1320 Street Address Millsboro Delaware 19966 City State Zip</p> <p><b>Telephone Number</b> (302 ) 841-4629</p> <p><b>Signature</b> </p> <hr/> <p>Phillip Plylar - President Print Name and Title</p>	<p align="center"><b>DO NOT WRITE IN THIS BLOCK</b> <b>2. REGISTRATION NUMBER</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">County No.</td> <td style="width:50%; text-align: center;">Premises No.</td> </tr> <tr> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">1-2</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">3-6</p> </td> </tr> <tr> <td style="text-align: center;">Registration Class</td> <td style="text-align: center;">Equipment No.</td> </tr> <tr> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">7</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">8-11</p> </td> </tr> <tr> <td style="text-align: center;">Data Year</td> <td style="text-align: center;">Application Date</td> </tr> <tr> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">12-13</p> </td> <td align="center"> <p align="center">6-3-2024</p> </td> </tr> </table>	County No.	Premises No.	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">1-2</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">3-6</p>					Registration Class	Equipment No.	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">7</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">8-11</p>					Data Year	Application Date	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">12-13</p>					<p align="center">6-3-2024</p>
County No.	Premises No.																																
<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">1-2</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">3-6</p>																												
Registration Class	Equipment No.																																
<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">7</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">8-11</p>																												
Data Year	Application Date																																
<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">12-13</p>					<p align="center">6-3-2024</p>																												
<p><b>1B. Equipment Location and Telephone Number (if different from above)</b> 11761 Cordova Road Street Number and Street Name Cordova Maryland 21625 (302 ) 841-4629 City/Town State Zip Telephone Number Mountaire Farms of Delaware Inc. - Cordova Grain Facility Premises Name (if different from above)</p>																																	
<p><b>3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Status</th> <th style="width:25%;">New Construction Begun (MM/YY)</th> <th style="width:25%;">New Construction Completed (MM/YY)</th> <th style="width:35%;">Existing Initial Operation (MM/YY)</th> </tr> </thead> <tbody> <tr> <td align="center">C 15</td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">16-19</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p> </td> </tr> </tbody> </table>		Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)	C 15	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">16-19</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p>																
Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)																														
C 15	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">16-19</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p>																						
<p><b>4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)</b> Zimmerman Grain Dryer (Dryer 2) 1,500 bph - Propane</p>																																	
<p><b>5. Workmen's Compensation Coverage</b> See attached. Binder/Policy Number _____ Expiration Date _____ Company _____</p> <p><small>NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.</small></p>																																	
<p><b>6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time</b> <u>1</u></p>																																	
<p><b>6B. Number of Stack/Emission Points Associated with this Equipment</b> <u>1</u></p>																																	



**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other  
 Describe Mineral oil applied to all grains received.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> See attached air emissions
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS  ANNUAL AMOUNT CONSUMED OTHER FUEL  ANNUAL AMOUNT CONSUMED  
 (Specify Type) 66-1 (Specify Units of Measure) (Specify Type) 66-2 (Specify Units of Measure)  
 1=Coke 2= COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 70-71	Hours per Day <input type="text"/> <input type="text"/> 72	Days Per Week <input type="text"/> 73-75
--	---	---	---	--	--

Seasonal Variation in Operation:  
 No Variation  Winter Percent  Spring Percent  Summer Percent  Fall Percent   
 76 77-78 79-80 81-82 83-84 (Total Seasons= 100%)

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

13. Input Materials (for this equipment only)

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

14. Output Materials (for this equipment)

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

15. Waste Streams- Solid and Liquid

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur See attached air emissions 105-110	Oxides of Nitrogen See attached air emissions 111-116
Carbon Monoxide See attached air emissions 177-122	Volatile Organic Compounds See attached air emissions 123-128	PM-10 See attached air emissions 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur See attached air emissions 140-144	Oxides of Nitrogen See attached air emissions 145-149
Carbon Monoxide See attached air emissions 150-154	Volatile Organic Compounds See attached air emissions 155-159	PM-10 See attached air emissions 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP 2 165	SOX 2 166	NOX 2 167	CO 2 168	VOC 2 169	PM10 2 170
-----------------	-----------------	-----------------	----------------	-----------------	------------------

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date _____ By _____
Reviewed by Local Jurisdiction Date _____ By _____	Reviewed by State Date _____ By _____	

19. Inventory Date	Month/Year	Equipment Code	SCC Code
	[ ][ ][ ][ ] 171-174	[ ][ ][ ] 175-177	[ ][ ][ ][ ][ ][ ][ ][ ] 178-185

20. Annual Operating Rate	Maximum Design Hourly Rate	Permit to Operate Month	Transaction Date (MM/DD/YR)
[ ][ ][ ][ ][ ][ ] 186-192	[ ][ ][ ][ ][ ][ ][ ] 193-199	[ ][ ] 200-201	[ ][ ][ ][ ][ ][ ] 202-207

Staff Code [ ][ ][ ] 208-210	VOC Code [ ][ ] 211 212	SIP Code [ ][ ] 213 214	Regulation Code [ ][ ][ ][ ] 215-218	Confidentiality [ ] 219
Point Description [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ] 220-238				Action [ ] 239 A: Add C: Change



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc. - Cordova Grain Facility
PREMISES ADDRESS:	11761 Corodva Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Grain Elevator Legs (Receiving Leg 15,500 bph), Wet Leg (6,000 bph), Dry Leg (6,000 bph)	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct

Registration Update

Initial Registration

1A. Owner of Equipment/Company Name

Mountaire Farms of Delaware Inc.

Mailing Address

P.O. Box 1320

Street Address

Millsboro Delaware 19966

City State Zip

Telephone Number

(302) 841-4629

Signature

Phillip Plylar - President

Print Name and Title

6-3-2024

Date

**DO NOT WRITE IN THIS BLOCK**  
**2. REGISTRATION NUMBER**

County No.	Premises No.
<input type="text"/>	<input type="text"/>
1-2	3-6
Registration Class	Equipment No.
<input type="text"/>	<input type="text"/>
7	8-11
Data Year	Application Date
<input type="text"/>	<input type="text"/>
12-13	

1B. Equipment Location and Telephone Number (if different from above)

11761 Cordova Road

Street Number and Street Name

Cordova Maryland 21625 (302) 841-4629

City/Town State Zip Telephone Number

Mountaire Farms of Delaware Inc. - Cordova Grain Facility

Premises Name (if different from above)

3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)

Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)
C	<input type="text"/>	<input type="text"/>	<input type="text"/>
15	16-19	20-23	20-23

4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)

(1) grain receiving leg, (1) dry leg and (1) wet leg

5. Workmen's Compensation Coverage See attached.

Binder/Policy Number

Expiration Date

Company

NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.

6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time 3

6B. Number of Stack/Emission Points Associated with this Equipment None, totally enclosed.

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other  
 Describe Mineral oil applied to all grains received.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> 43-44
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS  ANNUAL AMOUNT CONSUMED OTHER FUEL  ANNUAL AMOUNT CONSUMED  
 (Specify Type) 66-1 (Specify Units of Measure) (Specify Type) 66-2 (Specify Units of Measure)  
 1=Coke 2= COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 70-71	Hours per Day <input type="text"/> <input type="text"/> 72	Days Per Week <input type="text"/> 73-75
--	---	---	---	--	--

Seasonal Variation in Operation:  
 No Variation  Winter Percent  Spring Percent  Summer Percent  Fall Percent   
 76 77-78 79-80 81-82 83-84 (Total Seasons= 100%)

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

--	--	--

86-88

Inside Diameter at Top

--	--	--

89-91

Exit Temperature (°F)

--	--	--	--

92-95

Exit Velocity (FT/SEC)

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 105-110	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 177-122	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 123-128	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 140-144	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 150-154	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 155-159	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="checkbox"/> 165	SOX <input type="checkbox"/> 166	NOX <input type="checkbox"/> 167	CO <input type="checkbox"/> 168	VOC <input type="checkbox"/> 169	PM10 <input type="checkbox"/> 170
--	--	--	---------------------------------------	--	---

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date _____ By _____
Reviewed by Local Jurisdiction Date _____ By _____	Reviewed by State Date _____ By _____	

19. Inventory Date	Month/Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	Equipment Code <input type="text"/> <input type="text"/> <input type="text"/> 175-177	SCC Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
--------------------	--	---	--

20. Annual Operating Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	Maximum Design Hourly Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	Permit to Operate Month <input type="text"/> <input type="text"/> 200-201	Transaction Date (MM/DD/YR) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
---	--	---	---

Staff Code <input type="text"/> <input type="text"/> <input type="text"/> 208-210	VOC Code <input type="text"/> <input type="text"/> 211 212	SIP Code <input type="text"/> <input type="text"/> 213 214	Regulation Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	Confidentiality <input type="checkbox"/> 219
Point Description <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"/> 220-238				Action <input type="checkbox"/> A: Add <input type="checkbox"/> C: Change 239





## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc. - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Grain Mechanical Load-outs - See attached ESA.	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.


**MARYLAND DEPARTMENT OF THE ENVIRONMENT**

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

**Air and Radiation Management Administration ▪ Air Quality Permits Program**

**APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT**

Permit to Construct       Registration Update       Initial Registration

<p><b>1A. Owner of Equipment/Company Name</b> Mountaire Farms of Delaware Inc.</p> <hr/> <p><b>Mailing Address</b> P.O. Box 1320 Street Address Millsboro                      Delaware                      19966 City                                      State                                      Zip</p> <p><b>Telephone Number</b> (302 ) 841-4629</p> <p><b>Signature</b> </p> <p>Phillip Plylar - President Print Name and Title</p>	<p align="center"><b>DO NOT WRITE IN THIS BLOCK</b> <b>2. REGISTRATION NUMBER</b></p> <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;"> <p><b>County No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">1-2</p> </td> <td style="width:50%; border: none;"> <p><b>Premises No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">3-6</p> </td> </tr> <tr> <td style="border: none;"> <p><b>Registration Class</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td></tr> </table> <p align="center">7</p> </td> <td style="border: none;"> <p><b>Equipment No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">8-11</p> </td> </tr> <tr> <td style="border: none;"> <p><b>Data Year</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">12-13</p> </td> <td style="border: none;"> <p><b>Application Date</b></p> <p align="center">6-3-2024</p> </td> </tr> </table>	<p><b>County No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">1-2</p>			<p><b>Premises No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">3-6</p>					<p><b>Registration Class</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td></tr> </table> <p align="center">7</p>		<p><b>Equipment No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">8-11</p>					<p><b>Data Year</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">12-13</p>			<p><b>Application Date</b></p> <p align="center">6-3-2024</p>
<p><b>County No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">1-2</p>			<p><b>Premises No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">3-6</p>																	
<p><b>Registration Class</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td></tr> </table> <p align="center">7</p>		<p><b>Equipment No.</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">8-11</p>																		
<p><b>Data Year</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">12-13</p>			<p><b>Application Date</b></p> <p align="center">6-3-2024</p>																	
<p><b>1B. Equipment Location and Telephone Number (if different from above)</b> 11761 Cordova Road Street Number and Street Name Cordova                      Maryland                      21625                      (302 ) 841-4629 City/Town                      State                      Zip                      Telephone Number</p> <p>Mountaire Farms of Delaware Inc. - Cordova Grain Facility Premises Name (if different from above)</p>																				
<p><b>3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)</b></p> <table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;"> <p><b>Status</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:20px; text-align: center;">C</td></tr> </table> <p align="center">15</p> </td> <td style="width:25%; border: none;"> <p><b>New Construction Begun (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">16-19</p> </td> <td style="width:25%; border: none;"> <p><b>New Construction Completed (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">20-23</p> </td> <td style="width:25%; border: none;"> <p><b>Existing Initial Operation (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">20-23</p> </td> </tr> </table>		<p><b>Status</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:20px; text-align: center;">C</td></tr> </table> <p align="center">15</p>	C	<p><b>New Construction Begun (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">16-19</p>					<p><b>New Construction Completed (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">20-23</p>					<p><b>Existing Initial Operation (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">20-23</p>						
<p><b>Status</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:20px; text-align: center;">C</td></tr> </table> <p align="center">15</p>	C	<p><b>New Construction Begun (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">16-19</p>					<p><b>New Construction Completed (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">20-23</p>					<p><b>Existing Initial Operation (MM/YY)</b></p> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td><td style="width:25%;"></td></tr> </table> <p align="center">20-23</p>								
C																				
<p><b>4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)</b> (11) mechanical loadouts - See attached ESA.</p>																				
<p><b>5. Workmen's Compensation Coverage</b>      See attached.</p> <p align="center">Binder/Policy Number                      Expiration Date</p> <p>Company _____</p> <p><small>NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.</small></p>																				
<p><b>6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time</b> <u>11</u></p>																				
<p><b>6B. Number of Stack/Emission Points Associated with this Equipment</b> <u>11</u></p>																				

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
  
 24-0

Simple/Multiple Cyclone	Spray/Adsorb Tower	Venturi Scrubber	Carbon Adsorber	Electrostatic Precipitator	Baghouse	Thermal/Catalytic Afterburner	Dry Scrubber
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24-1	24-2	24-3	24-4	24-5	24-6	24-7	24-8

Other

Describe Mineral oil applied to all grains received and dust socks installed on all discharge points.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> 43
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	
OTHER FUELS (Specify Type)	<input type="text"/> ANNUAL AMOUNT CONSUMED (Specify Units of Measure)	OTHER FUEL (Specify Type)	<input type="text"/> ANNUAL AMOUNT CONSUMED (Specify Units of Measure)		
66-1		66-2			
1= Coke 2= COG 3=BFG 4=Other					

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 69-70	Hours per Day <input type="text"/> <input type="text"/> 70-71	Days Per Week <input type="text"/> 72	Days per Year <input type="text"/> <input type="text"/> <input type="text"/> 73-75
Seasonal Variation in Operation:						
No Variation <input type="text"/> 76	Winter Percent <input type="text"/> <input type="text"/> 77-78	Spring Percent <input type="text"/> <input type="text"/> 79-80	Summer Percent <input type="text"/> <input type="text"/> 81-82	Fall Percent <input type="text"/> <input type="text"/> 83-84	(Total Seasons= 100%)	

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)  85

If not, then

Height Above Ground (FT)	Inside Diameter at Top	Exit Temperature (°F)	Exit Velocity (FT/SEC)
<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"/>
86-88	89-91	92-95	96-98

**NOTE:**  
 Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

13. Input Materials (for this equipment only)  
 Is any of this data to be considered confidential?  (Y or N)

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

14. Output Materials (for this equipment)  
 Process/Product Stream

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

15. Waste Streams- Solid and Liquid

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 105-110	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 177-122	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 123-128	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 140-144	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 150-154	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 155-159	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="text"/> 165	SOX <input type="text"/> 166	NOX <input type="text"/> 167	CO <input type="text"/> 168	VOC <input type="text"/> 169	PM10 <input type="text"/> 170
------------------------------------	------------------------------------	------------------------------------	-----------------------------------	------------------------------------	-------------------------------------

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date _____ By _____
Reviewed by Local Jurisdiction Date _____ By _____	Reviewed by State Date _____ By _____	

19. Inventory Date	Month/Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	Equipment Code <input type="text"/> <input type="text"/> <input type="text"/> 175-177	SCC Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
--------------------	--	---	---

20. Annual Operating Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	Maximum Design Hourly Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	Permit to Operate Month <input type="text"/> <input type="text"/> 200-201	Transaction Date (MM/DD/YR) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
---	--	---	---

Staff Code <input type="text"/> <input type="text"/> <input type="text"/> 208-210	VOC Code <input type="text"/> <input type="text"/> 211 212	SIP Code <input type="text"/> <input type="text"/> 213 214	Regulation Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	Confidentiality <input type="text"/> 219
Point Description <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"/> 220-238				Action <input type="text"/> 239 A: Add C: Change



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc. - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
(1) Grain Receiving Pit - 750 bushel capacity, (1) Grain Receiving Drag - 15,500 bph	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct

Registration Update

Initial Registration

1A. Owner of Equipment/Company Name

Mountaire Farms of Delaware Inc.

Mailing Address

P.O. Box 1320

Street Address

Millsboro Delaware 19966

City State Zip

Telephone Number

(302) 841-4629

Signature

Phillip Plylar - President

Print Name and Title

DO NOT WRITE IN THIS BLOCK  
2. REGISTRATION NUMBER

County No.

Grid for County No.

1-2

Premises No.

Grid for Premises No.

3-6

Registration Class Equipment No.

Grid for Registration Class

7

Grid for Equipment No.

8-11

Data Year

Grid for Data Year

12-13

Application Date

6-3-2024

Date

1B. Equipment Location and Telephone Number (if different from above)

11761 Cordova Road

Street Number and Street Name

Cordova Maryland 21625 (302) 841-4629

City/Town State Zip Telephone Number

Mountaire Farms of Delaware Inc. - Cordova Grain Facility

Premises Name (if different from above)

3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)

Table with 4 columns: Status, New Construction Begun (MM/YY), New Construction Completed (MM/YY), Existing Initial Operation (MM/YY). Row 1: C, 15, 16-19, 20-23, 20-23.

4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)

Grain receiving pit and receiving drag.

5. Workmen's Compensation Coverage See attached.

Binder/Policy Number

Expiration Date

Company

NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.

6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time 1

6B. Number of Stack/Emission Points Associated with this Equipment 1

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone	Spray/Adsorb Tower	Venturi Scrubber	Carbon Adsorber	Electrostatic Precipitator	Baghouse	Thermal/Catalytic Afterburner	Dry Scrubber
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24-1	24-2	24-3	24-4	24-5	24-6	24-7	24-8

Other  
 Describe Dust control by Wings Baffle System  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/>
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS  ANNUAL AMOUNT CONSUMED OTHER FUEL  ANNUAL AMOUNT CONSUMED  
 (Specify Type) 66-1 (Specify Units of Measure) (Specify Type) 66-2 (Specify Units of Measure)  
 1= Coke 2= COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 70-71	Hours per Day <input type="text"/> <input type="text"/> 72	Days Per Week <input type="text"/> 73-75
--	---	---	---	--	--

Seasonal Variation in Operation:  
 No Variation  Winter Percent  Spring Percent  Summer Percent  Fall Percent   
 76 77-78 79-80 81-82 83-84 (Total Seasons= 100%)



12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur 105-110	Oxides of Nitrogen 111-116
Carbon Monoxide 177-122	Volatile Organic Compounds 123-128	PM-10 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur 140-144	Oxides of Nitrogen 145-149
Carbon Monoxide 150-154	Volatile Organic Compounds 155-159	PM-10 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="checkbox"/> 165	SOX <input type="checkbox"/> 166	NOX <input type="checkbox"/> 167	CO <input type="checkbox"/> 168	VOC <input type="checkbox"/> 169	PM10 <input type="checkbox"/> 170
--	--	--	---------------------------------------	--	---

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date _____ By _____
Reviewed by Local Jurisdiction Date _____ By _____	Reviewed by State Date _____ By _____	

19. Inventory Date	Month/Year	Equipment Code	SCC Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	171-174	175-177	178-185

20. Annual Operating Rate	Maximum Design Hourly Rate	Permit to Operate Month	Transaction Date (MM/DD/YR)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
186-192	193-199	200-201	202-207

Staff Code <input type="text"/> 208-210	VOC Code <input type="text"/> 211 212	SIP Code <input type="text"/> 213 214	Regulation Code <input type="text"/> 215-218	Confidentiality <input type="checkbox"/> 219
Point Description <input type="text"/>				Action <input type="checkbox"/> A: Add C: Change 239
220-238				



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc. - Cordova Grain Facility
PREMISES ADDRESS:	11761 Corodva Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Grain Storage Bins	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.


**MARYLAND DEPARTMENT OF THE ENVIRONMENT**

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

**Air and Radiation Management Administration ▪ Air Quality Permits Program**

**APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT**

Permit to Construct       Registration Update       Initial Registration

<p><b>1A. Owner of Equipment/Company Name</b> Mountaire Farms of Delaware Inc.</p> <hr/> <p><b>Mailing Address</b> P.O. Box 1320 Street Address Millsboro                      Delaware                      19966 City                                      State                                      Zip</p> <p><b>Telephone Number</b> (302 ) 841-4629</p> <p><b>Signature</b> </p> <p>Phillip Plylar - President Print Name and Title</p>	<p align="center"><b>DO NOT WRITE IN THIS BLOCK</b></p> <p align="center"><b>2. REGISTRATION NUMBER</b></p> <table style="width:100%; border: none;"> <tr> <td style="border: none;">County No.</td> <td style="border: none;">Premises No.</td> </tr> <tr> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table> </td> </tr> <tr> <td style="border: none; text-align: center;">1-2</td> <td style="border: none; text-align: center;">3-6</td> </tr> <tr> <td style="border: none;">Registration Class</td> <td style="border: none;">Equipment No.</td> </tr> <tr> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%;"></td> </tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table> </td> </tr> <tr> <td style="border: none; text-align: center;">7</td> <td style="border: none; text-align: center;">8-11</td> </tr> <tr> <td style="border: none;">Data Year</td> <td style="border: none;">Application Date</td> </tr> <tr> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table> </td> <td style="border: none;"> <p align="center">6-3-2024</p> </td> </tr> <tr> <td style="border: none; text-align: center;">12-13</td> <td style="border: none;"></td> </tr> </table>	County No.	Premises No.	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>			<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					1-2	3-6	Registration Class	Equipment No.	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%;"></td> </tr> </table>		<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					7	8-11	Data Year	Application Date	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>			<p align="center">6-3-2024</p>	12-13	
County No.	Premises No.																															
<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>			<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>																													
1-2	3-6																															
Registration Class	Equipment No.																															
<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%;"></td> </tr> </table>		<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>																														
7	8-11																															
Data Year	Application Date																															
<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>			<p align="center">6-3-2024</p>																													
12-13																																
<p><b>1B. Equipment Location and Telephone Number (if different from above)</b> 11761 Cordova Road Street Number and Street Name Cordova                      Maryland                      21625                      (302 ) 841-4629 City/Town                      State                      Zip                      Telephone Number</p> <p>Mountaire Farms of Delaware Inc. - Cordova Grain Facility Premises Name (if different from above)</p>																																
<p><b>3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)</b></p> <table style="width:100%; border: none;"> <tr> <td style="border: none;">Status</td> <td style="border: none;">New Construction Begun (MM/YY)</td> <td style="border: none;">New Construction Completed (MM/YY)</td> <td style="border: none;">Existing Initial Operation (MM/YY)</td> </tr> <tr> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%; text-align: center;">C</td> </tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table> </td> <td style="border: none;"> <table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table> </td> </tr> <tr> <td style="border: none; text-align: center;">15</td> <td style="border: none; text-align: center;">16-19</td> <td style="border: none; text-align: center;">20-23</td> <td style="border: none; text-align: center;">20-23</td> </tr> </table>		Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%; text-align: center;">C</td> </tr> </table>	C	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					15	16-19	20-23	20-23						
Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)																													
<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%; text-align: center;">C</td> </tr> </table>	C	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>																				
C																																
15	16-19	20-23	20-23																													
<p><b>4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)</b> Grain Storage Tanks</p>																																
<p><b>5. Workmen's Compensation Coverage</b> See attached. Binder/Policy Number                      Expiration Date</p> <p>Company</p> <p><small>NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.</small></p>																																
<p><b>6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time</b> <u>11</u></p>																																
<p><b>6B. Number of Stack/Emission Points Associated with this Equipment</b> <u>Bin vents</u></p>																																

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other  
 Describe Mineral oil applied to all grains received.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> 43-44
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS  ANNUAL AMOUNT CONSUMED OTHER FUEL  ANNUAL AMOUNT CONSUMED  
 (Specify Type) 66-1 (Specify Units of Measure) (Specify Type) 66-2 (Specify Units of Measure)  
 1=Coke 2=COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 70-71	Hours per Day <input type="text"/> <input type="text"/> 72	Days Per Week <input type="text"/> 73-75
--	---	---	---	--	--

Seasonal Variation in Operation:  
 No Variation  Winter Percent  Spring Percent  Summer Percent  Fall Percent   
 76 77-78 79-80 81-82 83-84 (Total Seasons= 100%)

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

13. Input Materials (for this equipment only)

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

14. Output Materials (for this equipment)

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

15. Waste Streams- Solid and Liquid

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 105-110	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 177-122	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 123-128	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 140-144	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 150-154	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 155-159	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="checkbox"/> 165	SOX <input type="checkbox"/> 166	NOX <input type="checkbox"/> 167	CO <input type="checkbox"/> 168	VOC <input type="checkbox"/> 169	PM10 <input type="checkbox"/> 170
--	--	--	---------------------------------------	--	---

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

<b>18. Date Rec'd. Local</b> _____	<b>Date Rec'd. State</b> _____	<b>Return to Local Jurisdiction</b> Date _____ By _____
<b>Reviewed by Local Jurisdiction</b> Date _____ By _____	<b>Reviewed by State</b> Date _____ By _____	

<b>19. Inventory Date</b>	<b>Month/Year</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	<b>Equipment Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 175-177	<b>SCC Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
---------------------------	---	---	---

<b>20. Annual Operating Rate</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	<b>Maximum Design Hourly Rate</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	<b>Permit to Operate Month</b> <input type="text"/> <input type="text"/> 200-201	<b>Transaction Date (MM/DD/YR)</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
--	---	--	--

<b>Staff Code</b> <input type="text"/> <input type="text"/> <input type="text"/> 208-210	<b>VOC Code</b> <input type="text"/> <input type="text"/> 211 212	<b>SIP Code</b> <input type="text"/> <input type="text"/> 213 214	<b>Regulation Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	<b>Confidentiality</b> <input type="checkbox"/> 219
<b>Point Description</b> <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"/> 220-238				<b>Action</b> <input type="checkbox"/> A: Add <input type="checkbox"/> C: Change 239



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc.
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Gravity Loadouts	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.



MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct

Registration Update

Initial Registration

1A. Owner of Equipment/Company Name

Mountaire Farms of Delaware Inc.

Mailing Address

P.O. Box 1320

Street Address

Millsboro Delaware 19966

City State Zip

Telephone Number

(302 ) 841-4629

Signature

*Phillip Plylar*

Phillip Plylar - President

Print Name and Title

DO NOT WRITE IN THIS BLOCK  
2. REGISTRATION NUMBER

County No.

1-2

Premises No.

3-6

Registration Class Equipment No.

7

8-11

Data Year

12-13

Application Date

6-3-2024

Date

1B. Equipment Location and Telephone Number (if different from above)

11761 Cordova Road

Street Number and Street Name

Cordova Maryland 21625 (302 ) 841-4629

City/Town State Zip Telephone Number

Mountaire Farms of Delaware Inc. - Cordova Grain Facility

Premises Name (if different from above)

3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)

Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)
C	<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"/>
15	16-19	20-23	20-23

4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)

11 gravity tank loadouts @ 6,000 bph each

5. Workmen's Compensation Coverage

Company \_\_\_\_\_ Binder/Policy Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.

6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time 11

6B. Number of Stack/Emission Points Associated with this Equipment 11

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone	Spray/Adsorb Tower	Venturi Scrubber	Carbon Adsorber	Electrostatic Precipitator	Baghouse	Thermal/Catalytic Afterburner	Dry Scrubber
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24-1	24-2	24-3	24-4	24-5	24-6	24-7	24-8

Other

Describe Mineral oil applied to all grains received. Dust sock attached to the each emission point,  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS	SULFUR %	GRADE	NATURAL GAS-1000 FT <sup>3</sup>	LP GAS-100 GALLONS	GRADE
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
26-31	32-33	34	35-41	42-45	
COAL- TONS	SULFUR %	ASH%	WOOD-TONS	MOISTURE %	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
46-52	53-55	56-58	59-63	64-65	

OTHER FUELS	<input type="checkbox"/>	ANNUAL AMOUNT CONSUMED	OTHER FUEL	<input type="checkbox"/>	ANNUAL AMOUNT CONSUMED
(Specify Type)	66-1	(Specify Units of Measure)	(Specify Type)	66-2	(Specify Units of Measure)
1=Coke 2= COG 3=BFG 4=Other					

**11. Operating Schedule (for this Equipment)**

Continuous Operation	Batch Process	Hours per Batch	Batch per Week	Hours per Day	Days Per Week	Days per Year
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
67-1	67-2	68-69		70-71	72	73-75
Seasonal Variation in Operation:						
No Variation	Winter Percent	Spring Percent	Summer Percent	Fall Percent	(Total Seasons= 100%)	
<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>		
76	77-78	79-80	81-82	83-84		

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 105-110	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 177-122	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 123-128	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 140-144	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 150-154	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 155-159	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="checkbox"/> 165	SOX <input type="checkbox"/> 166	NOX <input type="checkbox"/> 167	CO <input type="checkbox"/> 168	VOC <input type="checkbox"/> 169	PM10 <input type="checkbox"/> 170
--	--	--	---------------------------------------	--	---

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date _____ By _____
Reviewed by Local Jurisdiction Date _____ By _____	Reviewed by State Date _____ By _____	

19. Inventory Date	Month/Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	Equipment Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 175-177	SCC Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
--------------------	--	--	--

20. Annual Operating Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	Maximum Design Hourly Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	Permit to Operate Month <input type="text"/> <input type="text"/> 200-201	Transaction Date (MM/DD/YR) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
---	--	---	---

Staff Code <input type="text"/> <input type="text"/> <input type="text"/> 208-210	VOC Code <input type="text"/> <input type="text"/> 211 212	SIP Code <input type="text"/> <input type="text"/> 213 214	Regulation Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	Confidentiality <input type="checkbox"/> 219
Point Description <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"/> 220-238				Action <input type="checkbox"/> A: Add <input type="checkbox"/> C: Change 239



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc. - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Overhead Grain Transfer Drags	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct

Registration Update

Initial Registration

1A. Owner of Equipment/Company Name

Mountaire Farms of Delaware Inc.

Mailing Address

P.O. Box 1320

Street Address

Millsboro Delaware 19966

City State Zip

Telephone Number

(302) 841-4629

Signature

Phillip Plylar - President

Print Name and Title

6-3-2024

Date

DO NOT WRITE IN THIS BLOCK  
2. REGISTRATION NUMBER

County No.

Registration number boxes for County No.

1-2

Premises No.

Registration number boxes for Premises No.

3-6

Registration Class Equipment No.

Registration number boxes for Registration Class

7

Registration number boxes for Equipment No.

8-11

Data Year

Registration number boxes for Data Year

12-13

Application Date

1B. Equipment Location and Telephone Number (if different from above)

11761 Cordova Road

Street Number and Street Name

Cordova Maryland 21625 (302) 841-4629

City/Town State Zip Telephone Number

Mountaire Farms of Delaware Inc. - Cordova Grain Facility

Premises Name (if different from above)

3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)

Status selection table with options: New Construction Begun (MM/YY), New Construction Completed (MM/YY), Existing Initial Operation (MM/YY). Selected status is C.

4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)  
Overhead Grain Transfer Drags

5. Workmen's Compensation Coverage See attached.  
Company Binder/Policy Number Expiration Date

NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.

6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time See attached EA.

6B. Number of Stack/Emission Points Associated with this Equipment None, totally enclosed.

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other  
 Describe Mineral oil applied to all grains received.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> 43-44
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS  ANNUAL AMOUNT CONSUMED OTHER FUEL  ANNUAL AMOUNT CONSUMED  
 (Specify Type) 66-1 (Specify Units of Measure) (Specify Type) 66-2 (Specify Units of Measure)  
 1=Coke 2= COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 70-71	Hours per Day <input type="text"/> <input type="text"/> 72	Days Per Week <input type="text"/> 73-75
--	---	---	---	--	--

Seasonal Variation in Operation:  
 No Variation  Winter Percent  Spring Percent  Summer Percent  Fall Percent   
 76 77-78 79-80 81-82 83-84 (Total Seasons= 100%)

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**



**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 105-110	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 177-122	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 123-128	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 140-144	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 150-154	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 155-159	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="checkbox"/> 165	SOX <input type="checkbox"/> 166	NOX <input type="checkbox"/> 167	CO <input type="checkbox"/> 168	VOC <input type="checkbox"/> 169	PM10 <input type="checkbox"/> 170
--	--	--	---------------------------------------	--	---

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date _____ By _____
Reviewed by Local Jurisdiction Date _____ By _____	Reviewed by State Date _____ By _____	

19. Inventory Date	Month/Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	Equipment Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 175-177	SCC Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
--------------------	--	--	--

20. Annual Operating Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	Maximum Design Hourly Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	Permit to Operate Month <input type="text"/> <input type="text"/> 200-201	Transaction Date (MM/DD/YR) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
---	--	---	---

Staff Code <input type="text"/> <input type="text"/> <input type="text"/> 208-210	VOC Code <input type="text"/> <input type="text"/> 211 212	SIP Code <input type="text"/> <input type="text"/> 213 214	Regulation Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	Confidentiality <input type="checkbox"/> 219
Point Description <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"/> 220-238				Action <input type="checkbox"/> A: Add <input type="checkbox"/> C: Change 239



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc. - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Grain Transfer Tube Screws	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.


**MARYLAND DEPARTMENT OF THE ENVIRONMENT**

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

**Air and Radiation Management Administration ▪ Air Quality Permits Program**

**APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT**

Permit to Construct       Registration Update       Initial Registration

<p><b>1A. Owner of Equipment/Company Name</b> Mountaire Farms of Delaware Inc.</p> <hr/> <p><b>Mailing Address</b> P.O. Box 1320 Street Address Millsboro DE 19966 City State Zip</p> <p><b>Telephone Number</b> (302 ) 841-4629</p> <p><b>Signature</b> </p> <hr/> <p>Phillip Plylar - President Print Name and Title</p>	<p align="center"><b>DO NOT WRITE IN THIS BLOCK</b></p> <p align="center"><b>2. REGISTRATION NUMBER</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">County No.</td> <td style="width:50%; text-align: center;">Premises No.</td> </tr> <tr> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">1-2</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">3-6</p> </td> </tr> <tr> <td style="text-align: center;">Registration Class</td> <td style="text-align: center;">Equipment No.</td> </tr> <tr> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:50%;"></td> <td style="width:50%;"></td> </tr> </table> <p align="center">7</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">8-11</p> </td> </tr> <tr> <td style="text-align: center;">Data Year</td> <td style="text-align: center;">Application Date</td> </tr> <tr> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:50%;"></td> <td style="width:50%;"></td> </tr> </table> <p align="center">12-13</p> </td> <td align="center"> <p align="center">6-3-2024</p> </td> </tr> </table>	County No.	Premises No.	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">1-2</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">3-6</p>					Registration Class	Equipment No.	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:50%;"></td> <td style="width:50%;"></td> </tr> </table> <p align="center">7</p>			<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">8-11</p>					Data Year	Application Date	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:50%;"></td> <td style="width:50%;"></td> </tr> </table> <p align="center">12-13</p>			<p align="center">6-3-2024</p>
County No.	Premises No.																												
<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">1-2</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">3-6</p>																								
Registration Class	Equipment No.																												
<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:50%;"></td> <td style="width:50%;"></td> </tr> </table> <p align="center">7</p>			<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">8-11</p>																										
Data Year	Application Date																												
<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:50%;"></td> <td style="width:50%;"></td> </tr> </table> <p align="center">12-13</p>			<p align="center">6-3-2024</p>																										
<p><b>1B. Equipment Location and Telephone Number (if different from above)</b> 11761 Cordova Road Street Number and Street Name Cordova Maryland 21625 (302 ) 841-4629 City/Town State Zip Telephone Number Mountaire Farms of Delaware Inc. - Cordova Grain Facility Premises Name (if different from above)</p>																													
<p><b>3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:25%;">Status</th> <th style="width:25%;">New Construction Begun (MM/YY)</th> <th style="width:25%;">New Construction Completed (MM/YY)</th> <th style="width:25%;">Existing Initial Operation (MM/YY)</th> </tr> </thead> <tbody> <tr> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:100%; text-align: center;">C</td> </tr> </table> <p align="center">15</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">16-19</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p> </td> <td align="center"> <table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p> </td> </tr> </tbody> </table>		Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:100%; text-align: center;">C</td> </tr> </table> <p align="center">15</p>	C	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">16-19</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p>											
Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)																										
<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:100%; text-align: center;">C</td> </tr> </table> <p align="center">15</p>	C	<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">16-19</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p>					<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> <td style="width:25%;"></td> </tr> </table> <p align="center">20-23</p>																	
C																													
<p><b>4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)</b> Tube transfer screws - see attached EA.</p>																													
<p><b>5. Workmen's Compensation Coverage</b> See attached. Company _____ Binder/Policy Number _____ Expiration Date _____</p> <p>NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.</p>																													
<p><b>6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time</b> <u>12</u></p>																													
<p><b>6B. Number of Stack/Emission Points Associated with this Equipment</b> <u>None, totally enclosed.</u></p>																													

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other  
 Describe Mineral oil applied to all grains received.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> 43-45
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS  ANNUAL AMOUNT CONSUMED OTHER FUEL  ANNUAL AMOUNT CONSUMED  
 (Specify Type) 66-1 (Specify Units of Measure) (Specify Type) 66-2 (Specify Units of Measure)  
 1= Coke 2= COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 70-71	Hours per Day <input type="text"/> <input type="text"/> 72	Days Per Week <input type="text"/> 73-75	Days per Year <input type="text"/> 76
--	---	---	---	--	--	---

Seasonal Variation in Operation:  
 No Variation  Winter Percent  Spring Percent  Summer Percent  Fall Percent   
 76 77-78 79-80 81-82 83-84 (Total Seasons= 100%)

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 105-110	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 177-122	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 123-128	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 140-144	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 150-154	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 155-159	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="checkbox"/> 165	SOX <input type="checkbox"/> 166	NOX <input type="checkbox"/> 167	CO <input type="checkbox"/> 168	VOC <input type="checkbox"/> 169	PM10 <input type="checkbox"/> 170
--	--	--	---------------------------------------	--	---

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date _____ By _____
Reviewed by Local Jurisdiction Date _____ By _____	Reviewed by State Date _____ By _____	

19. Inventory Date	Month/Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	Equipment Code <input type="text"/> <input type="text"/> <input type="text"/> 175-177	SCC Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
--------------------	--	---	--

20. Annual Operating Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	Maximum Design Hourly Rate <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	Permit to Operate Month <input type="text"/> <input type="text"/> 200-201	Transaction Date (MM/DD/YR) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
--	---	---	---

Staff Code <input type="text"/> <input type="text"/> <input type="text"/> 208-210	VOC Code <input type="text"/> <input type="text"/> 211 212	SIP Code <input type="text"/> <input type="text"/> 213 214	Regulation Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	Confidentiality <input type="checkbox"/> 219
Point Description <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"/> 220-238				Action <input type="checkbox"/> A: Add <input type="checkbox"/> C: Change 239



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Grain Tunnel Drags (2) 6,500 bph, (1) 5,500 bpd	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct  Registration Update  Initial Registration

1A. Owner of Equipment/Company Name

Mountaire Farms of Delaware Inc.

Mailing Address

P.O. Box 1320

Street Address

Millsboro Delaware 19966

City State Zip

Telephone Number

(302) 841-4629

Signature

*Phillip Plylar*

Phillip Plylar - President

Print Name and Title

DO NOT WRITE IN THIS BLOCK  
2. REGISTRATION NUMBER

County No.

1-2

Premises No.

3-6

Registration Class Equipment No.

7

8-11

Data Year

12-13

Application Date

6-3-2024

Date

1B. Equipment Location and Telephone Number (if different from above)

11761 Cordova Road

Street Number and Street Name

Cordova Maryland 21625 (302) 841-4629

City/Town State Zip Telephone Number

Mountaire Farms of Delaware Inc. - Cordova Grain Facility

Premises Name (if different from above)

3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)

Status

C

15

New Construction  
Begun (MM/YY)

16-19

New Construction  
Completed (MM/YY)

20-23

Existing Initial  
Operation (MM/YY)

20-23

4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)

Grain Tunnel Drags

5. Workmen's Compensation Coverage

Binder/Policy Number

Expiration Date

Company

NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.

6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time 3

6B. Number of Stack/Emission Points Associated with this Equipment None, totally enclosed.



**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other  
 Describe Mineral oil applied to all grains received.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> 43-44
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS  ANNUAL AMOUNT CONSUMED OTHER FUEL  ANNUAL AMOUNT CONSUMED  
 (Specify Type) 66-1 (Specify Units of Measure) (Specify Type) 66-2 (Specify Units of Measure)  
 1=Coke 2= COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 70-71	Hours per Day <input type="text"/> <input type="text"/> 72	Days Per Week <input type="text"/> 73-75
--	---	---	---	--	--

Seasonal Variation in Operation:  
 No Variation  Winter Percent  Spring Percent  Summer Percent  Fall Percent   
 76 77-78 79-80 81-82 83-84 (Total Seasons= 100%)

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)  85

If not, then

Height Above Ground (FT)	Inside Diameter at Top	Exit Temperature (°F)	Exit Velocity (FT/SEC)
<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"/>
86-88	89-91	92-95	96-98

**NOTE:**  
 Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

13. Input Materials (for this equipment only)  
 Is any of this data to be considered confidential?  (Y or N)

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

14. Output Materials (for this equipment)  
 Process/Product Stream

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

15. Waste Streams- Solid and Liquid

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter <input type="text" value="See attached air emissions"/> 99-104	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 105-110	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 177-122	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 123-128	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter <input type="text" value="See attached air emissions"/> 135-139	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 140-144	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 150-154	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 155-159	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="text"/> 165	SOX <input type="text"/> 166	NOX <input type="text"/> 167	CO <input type="text"/> 168	VOC <input type="text"/> 169	PM10 <input type="text"/> 170
------------------------------------	------------------------------------	------------------------------------	-----------------------------------	------------------------------------	-------------------------------------

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

<b>18. Date Rec'd. Local</b> _____	<b>Date Rec'd. State</b> _____	<b>Return to Local Jurisdiction</b> Date _____ By _____
<b>Reviewed by Local Jurisdiction</b> Date _____ By _____	<b>Reviewed by State</b> Date _____ By _____	

<b>19. Inventory Date</b>	<b>Month/Year</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	<b>Equipment Code</b> <input type="text"/> <input type="text"/> <input type="text"/> 175-177	<b>SCC Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
---------------------------	---	--	---

<b>20. Annual Operating Rate</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	<b>Maximum Design Hourly Rate</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	<b>Permit to Operate Month</b> <input type="text"/> <input type="text"/> 200-201	<b>Transaction Date (MM/DD/YR)</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
---	--	--	--

<b>Staff Code</b> <input type="text"/> <input type="text"/> <input type="text"/> 208-210	<b>VOC Code</b> <input type="text"/> <input type="text"/> 211 212	<b>SIP Code</b> <input type="text"/> <input type="text"/> 213 214	<b>Regulation Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	<b>Confidentiality</b> <input type="text"/> 219
<b>Point Description</b> <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"/> 220-238				<b>Action</b> <input type="text"/> A: Add <input type="text"/> C: Change 239



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
(3) Grain Turn Heads	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct

Registration Update

Initial Registration

1A. Owner of Equipment/Company Name

Mountaire Farms of Delaware Inc.

Mailing Address

P.O. Box 1320

Street Address

Millsboro Delaware 19966

City State Zip

Telephone Number

(302) 841-4629

Signature

*Phillip Plylar*

Phillip Plylar - President

Print Name and Title

DO NOT WRITE IN THIS BLOCK  
2. REGISTRATION NUMBER

County No.

1-2

Premises No.

3-6

Registration Class Equipment No.

7

8-11

Data Year

12-13

Application Date

6-3-2024

Date

1B. Equipment Location and Telephone Number (if different from above)

11761 Cordova Road

Street Number and Street Name

Cordova Maryland 21625 (302) 841-4629

City/Town State Zip Telephone Number

Mountaire Farms of Delaware Inc. - Cordova Grain Facility

Premises Name (if different from above)

3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)

Status	New Construction Begun (MM/YY)	New Construction Completed (MM/YY)	Existing Initial Operation (MM/YY)
C	<input type="text"/>	<input type="text"/>	<input type="text"/>
15	16-19	20-23	20-23

4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)

(1) 9 hole flat turnhead, (1) 8 hole flat turnhead (1) 4 hole flat turnhead.

5. Workmen's Compensation Coverage See attached.

Binder/Policy Number

Expiration Date

Company

NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.

6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time 3

6B. Number of Stack/Emission Points Associated with this Equipment None, totally enclosed.



**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None

24-0

Simple/Multiple Cyclone

24-1

Spray/Adsorb Tower

24-2

Venturi Scrubber

24-3

Carbon Adsorber

24-4

Electrostatic Precipitator

24-5

Baghouse

24-6

Thermal/Catalytic Afterburner

24-7

Dry Scrubber

24-8

Other

Describe Mineral oil applied to all grains received.

24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS

26-31

SULFUR %

32-33

GRADE

34

NATURAL GAS-1000 FT<sup>3</sup>

35-41

LP GAS-100 GALLONS

42-45

GRADE

COAL- TONS

46-52

SULFUR %

53-55

ASH%

56-58

WOOD-TONS

59-63

MOISTURE %

64-65

OTHER FUELS

ANNUAL AMOUNT CONSUMED

(Specify Type)

66-1

(Specify Units of Measure)

OTHER FUEL

ANNUAL AMOUNT CONSUMED

(Specify Type)

66-2

(Specify Units of Measure)

1=Coke 2=COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation

67-1

Batch Process

67-2

Hours per Batch

68-69

Batch per Week

Hours per Day

70-71

Days Per Week

72

Days per Year

73-75

Seasonal Variation in Operation:

No Variation

76

Winter Percent

77-78

Spring Percent

79-80

Summer Percent

81-82

Fall Percent

83-84

(Total Seasons= 100%)

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 99-104	Oxides of Sulfur  105-110	Oxides of Nitrogen  111-116
Carbon Monoxide  177-122	Volatile Organic Compounds  123-128	PM-10  129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter See attached air emissions 135-139	Oxides of Sulfur  140-144	Oxides of Nitrogen  145-149
Carbon Monoxide  150-154	Volatile Organic Compounds  155-159	PM-10  160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP  165	SOX  166	NOX  167	CO  168	VOC  169	PM10  170
----------------	----------------	----------------	---------------	----------------	-----------------

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

18. Date Rec'd. Local _____	Date Rec'd. State _____	Return to Local Jurisdiction Date _____ By _____
Reviewed by Local Jurisdiction Date _____ By _____	Reviewed by State Date _____ By _____	

19. Inventory Date _____	Month/Year ____	Equipment Code ____	SCC Code _____
	171-174	175-177	178-185

20. Annual Operating Rate _____	Maximum Design Hourly Rate _____	Permit to Operate Month ____	Transaction Date (MM/DD/YR) _____
186-192	193-199	200-201	202-207

Staff Code ____	VOC Code ____	SIP Code ____	Regulation Code ____	Confidentiality <input type="checkbox"/>
208-210	211 212	213 214	215-218	219
Point Description _____				Action <input type="checkbox"/> A: Add <input type="checkbox"/> C: Change
220-238				239





## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Wet Grain Tank Storage	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
 (410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct  Registration Update  Initial Registration

1A. Owner of Equipment/Company Name

Mountaire Farms of Delaware Inc.

Mailing Address

P.O. Box 1320

Street Address

Millsboro Delaware 19966

City State Zip

Telephone Number

(302) 841-4629

Signature



Phillip Plylar - President

Print Name and Title

DO NOT WRITE IN THIS BLOCK  
 2. REGISTRATION NUMBER

County No.

--	--

1-2

Premises No.

--	--	--	--

3-6

Registration Class Equipment No.

--

7

--	--	--	--

8-11

Data Year

--	--

12-13

Application Date

6-3-2024

Date

1B. Equipment Location and Telephone Number (if different from above)

11761 Cordova Road

Street Number and Street Name

Cordova Maryland 21625 (302) 841-4629

City/Town State Zip Telephone Number

Mountaire Farms of Delaware Inc. - Cordova Grain Facility

Premises Name (if different from above)

3. Status (A= New, B= Modification to Existing Equipment, C= Existing Equipment)

Status

C
---

15

New Construction  
 Begun (MM/YY)

--	--	--	--

16-19

New Construction  
 Completed (MM/YY)

--	--	--	--

20-23

Existing Initial  
 Operation (MM/YY)

--	--	--	--

20-23

4. Describe this Equipment: Make, Model, Features, Manufacturer (include Maximum Hourly Input Rate, etc.)

(5) Wet grain storage tanks @ 10,000 bushels each.

5. Workmen's Compensation Coverage See attached.

Binder/Policy Number

Expiration Date

Company

NOTE: Before a Permit to Construct may be issued by the Department, the applicant must provide the Department with proof of worker's compensation coverage as required under Section 1-202 of the Worker's Compensation Act.

6A. Number of Pieces of Identical Equipment Units to be Registered/Permitted at this Time 5

6B. Number of Stack/Emission Points Associated with this Equipment Bin vents

**7. Person Installing this Equipment (if different from Number 1 on Page 1)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Mailing Address/Street \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

**8. Major Activity, Product or Service of Company at this Location**

Grain Elevator - receives, dries and ships all grains.

**9. Control Devices Associated with this Equipment**

None  
  
 24-0

Simple/Multiple Cyclone <input type="checkbox"/> 24-1	Spray/Adsorb Tower <input type="checkbox"/> 24-2	Venturi Scrubber <input type="checkbox"/> 24-3	Carbon Adsorber <input type="checkbox"/> 24-4	Electrostatic Precipitator <input type="checkbox"/> 24-5	Baghouse <input type="checkbox"/> 24-6	Thermal/Catalytic Afterburner <input type="checkbox"/> 24-7	Dry Scrubber <input type="checkbox"/> 24-8
--	---	---	--	---	--	--	---

Other  
 Describe Mineral oil applied to all grains received.  
 24-9

**10. Annual Fuel Consumption for this Equipment**

OIL-1000 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 26-31	SULFUR % <input type="text"/> <input type="text"/> 32-33	GRADE <input type="text"/> 34	NATURAL GAS-1000 FT <sup>3</sup> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 35-41	LP GAS-100 GALLONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 42-45	GRADE <input type="text"/> 43
COAL- TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 46-52	SULFUR % <input type="text"/> <input type="text"/> 53-55	ASH% <input type="text"/> <input type="text"/> 56-58	WOOD-TONS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 59-63	MOISTURE % <input type="text"/> <input type="text"/> 64-65	

OTHER FUELS  ANNUAL AMOUNT CONSUMED OTHER FUEL  ANNUAL AMOUNT CONSUMED  
 (Specify Type) 66-1 (Specify Units of Measure) (Specify Type) 66-2 (Specify Units of Measure)  
 1=Coke 2= COG 3=BFG 4=Other

**11. Operating Schedule (for this Equipment)**

Continuous Operation <input type="checkbox"/> 67-1	Batch Process <input type="checkbox"/> 67-2	Hours per Batch <input type="text"/> <input type="text"/> 68-69	Batch per Week <input type="text"/> 70-71	Hours per Day <input type="text"/> <input type="text"/> 72	Days Per Week <input type="text"/> 73-75
--	---	---	---	--	--

Seasonal Variation in Operation:  
 No Variation  Winter Percent  Spring Percent  Summer Percent  Fall Percent   
 76 77-78 79-80 81-82 83-84 (Total Seasons= 100%)

12. Equivalent Stack Information- is Exhaust through Doors, Windows, etc. Only? (Y/N)

85

If not, then

Height Above Ground (FT)

Inside Diameter at Top

Exit Temperature (°F)

Exit Velocity (FT/SEC)

--	--	--

86-88

--	--	--

89-91

--	--	--	--

92-95

--	--	--

96-98

**NOTE:**

Attach a block diagram of process/process line, indicating new equipment as reported on this form and all existing equipment, including control devices and emission points.

**13. Input Materials (for this equipment only)**

Is any of this data to be considered confidential?  (Y or N)

**INPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	INPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**14. Output Materials (for this equipment)**

Process/Product Stream

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**15. Waste Streams- Solid and Liquid**

**OUTPUT RATE**

	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTPUT RATE		UNITS
				UNITS	PER YEAR	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

**TOTAL**

**16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter <input type="text" value="See attached air emissions"/> 99-104	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 105-110	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 111-116
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 177-122	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 123-128	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 129-134

**17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day**

Particulate Matter <input type="text" value="See attached air emissions"/> 135-139	Oxides of Sulfur <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 140-144	Oxides of Nitrogen <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 145-149
Carbon Monoxide <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 150-154	Volatile Organic Compounds <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 155-159	PM-10 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 160-164

**Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)**

TSP <input type="text"/> 165	SOX <input type="text"/> 166	NOX <input type="text"/> 167	CO <input type="text"/> 168	VOC <input type="text"/> 169	PM10 <input type="text"/> 170
------------------------------------	------------------------------------	------------------------------------	-----------------------------------	------------------------------------	-------------------------------------

**AIR AND RADIATION MANAGEMENT ADMINISTRATION USE ONLY**

<b>18. Date Rec'd. Local</b> _____	<b>Date Rec'd. State</b> _____	<b>Return to Local Jurisdiction</b> Date _____ By _____
<b>Reviewed by Local Jurisdiction</b> Date _____ By _____	<b>Reviewed by State</b> Date _____ By _____	

<b>19. Inventory Date</b> _____	<b>Month/Year</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 171-174	<b>Equipment Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 175-177	<b>SCC Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 178-185
------------------------------------	---	---	--

<b>20. Annual Operating Rate</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 186-192	<b>Maximum Design Hourly Rate</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 193-199	<b>Permit to Operate Month</b> <input type="text"/> <input type="text"/> 200-201	<b>Transaction Date (MM/DD/YR)</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 202-207
--	---	--	--

<b>Staff Code</b> <input type="text"/> <input type="text"/> <input type="text"/> 208-210	<b>VOC Code</b> <input type="text"/> <input type="text"/> 211 212	<b>SIP Code</b> <input type="text"/> <input type="text"/> 213 214	<b>Regulation Code</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 215-218	<b>Confidentiality</b> <input type="text"/> 219
<b>Point Description</b> <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"/> 220-238				<b>Action</b> <input type="text"/> 239 A: Add C: Change



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
(1) mineral oil dust suppression application system	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.


<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

Application for Permit to Construct  
Gas Cleaning or Emission Control Equipment

1. Owner of Installation Mountaire Farms of Delaware Inc.		Telephone No.	Date of Application 6-3-2024
2. Mailing Address P.O. Box 1320		City Millsboro	Zip Code 19966
		County Sussex, DE.	
3. Equipment Location 1176 Cordova Road		City/Town or P.O. Cordova	County Talbot
4. Signature of Owner or Operator 		Title President	Print or Type Name Phillip Plylar
5. Application Type:		Alteration <input type="checkbox"/>	New Construction <input checked="" type="checkbox"/>
6. Date Construction is to Start: TBD		Completion Date (Estimate):	
7. Type of Gas Cleaning or Emission Control Equipment:			
Simple Cyclone <input type="checkbox"/> Multiple Cyclone <input type="checkbox"/> Afterburner <input type="checkbox"/> Electrostatic Precipitator <input type="checkbox"/>			
Scrubber <input type="checkbox"/> _____ (type) Other <input type="checkbox"/> _____ (type)			
8. Gas Cleaning Equipment Manufacturer		Model No.	Collection Efficiency (Design Criteria)
9. Type of Equipment which Control Equipment is to Service: Mineral oil spray point will be located at the truck receiving grain elevator and will operate when receiving all grains.			
10. Stack Test to be Conducted: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> _____ (Stack Test to be Conducted By) _____ (Date)			
11. Cost of Equipment _____ Estimated Erection Cost _____			

**12. The Following Shall Be Design Criteria:**

	<u>INLET</u>	<u>OUTLET</u>
Gas Flow Rate	_____ ACFM*	_____ ACFM*
Gas Temperature	_____ °F	_____ °F
Gas Pressure	_____ INCHES W.G.	_____ INCHES W.G.
PRESSURE DROP _____		
Dust Loading	_____ GRAINS/ACFD**	_____ GRAINS/ACFD**
Moisture Content	_____ %	_____ %
OR		
Wet Bulb Temperature	_____ °F	_____ °F
Liquid Flow Rate (Wet Scrubber)	_____ GALLONS/MINUTE	
(WHEN SCRUBBER LIQUID OTHER THAN WATER INDICATE COMPOSITION OF SCRUBBING MEDIUM IN WEIGHT %)		
*= ACTUAL CUBIC FEET PER MINUTE		**= ACTUAL CUBIC FEET DRY

**WHEN APPLICATION INVOLVES THE REDUCTION OF GASEOUS POLLUTANTS, PROVIDE THE CONCENTRATION OF EACH POLLUTANT IN THE GAS STREAM IN VOLUME PERCENT. INCLUDE THE COMPOSITION OF THE GASES ENTERING THE CLEANING DEVICE AND THE COMPOSITION OF EXHAUSTED GASES BEING DISCHARGED INTO THE ATMOSPHERE. USE AVAILABLE SPACE IN ITEM 15 ON PAGE 3.**

**13. Particle Size Analysis**

<u>Size of Dust Particles Entering Cleaning Unit</u>	<u>% of Total Dust</u>	<u>% to be Collected</u>
0 to 10 Microns	_____	_____
10 to 44 Microns	_____	_____
Larger than 44 Microns	_____	_____

**14. For Afterburner Construction Only:**

Volume of Contaminated Air \_\_\_\_\_ CFM (DO NOT INCLUDE COMBUSTION AIR)

Gas Inlet Temperature \_\_\_\_\_ °F

Capacity of Afterburner \_\_\_\_\_ BTU/HR

Diameter (or area) of Afterburner Throat \_\_\_\_\_

Combustion Chamber \_\_\_\_\_ (diameter) \_\_\_\_\_ (length) Operating Temperature at Afterburner \_\_\_\_\_ °F

Retention Time of Gases \_\_\_\_\_



**15. Show Location of Dust Cleaning Equipment in the System. Draw or Sketch Flow Diagram Showing Emission Path from Source to Exhaust Point to Atmosphere.**

See attached PFD.

Date Received: Local \_\_\_\_\_ State \_\_\_\_\_

Acknowledgement Date: \_\_\_\_\_

By \_\_\_\_\_

Reviewed By:

Local \_\_\_\_\_

State \_\_\_\_\_

Returned to Local:

Date \_\_\_\_\_

By \_\_\_\_\_

Application Returned to Applicant:

Date \_\_\_\_\_

By \_\_\_\_\_

REGISTRATION NUMBER OF ASSOCIATED EQUIPMENT:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

PREMISES NUMBER:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

Emission Calculations Revised By \_\_\_\_\_ Date \_\_\_\_\_



## AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	Mountaire Farms of Delaware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	Mountaire Farms of Delaware Inc - Cordova Grain Facility
PREMISES ADDRESS:	11761 Cordova Road, Cordova, Maryland, 21625
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmccconnell@mountaire.com
DESCRIPTION OF EQUIPMENT OR PROCESS	
Dust Control by Wings Baffle System	

Application is hereby made to the Department of the Environment for a Permit to Construct for the following equipment or process as required by the State of Maryland Air Quality Regulation, COMAR 26.11.02.09.

Check each item that you have submitted as part of your application package.

- Application package cover letter describing the proposed project
- Complete application forms (Note the number of forms included or NA if not applicable.)
 

No. <u>  1  </u> Form 5	No. <u>  NA  </u> Form 11
No. <u>  NA  </u> Form 5T	No. <u>  NA  </u> Form 41
No. <u>  NA  </u> Form 5EP	No. <u>  NA  </u> Form 42
No. <u>  NA  </u> Form 6	No. <u>  NA  </u> Form 44
No. <u>  NA  </u> Form 10	
- Vendor/manufacturer specifications/guarantees
- Evidence of Workman's Compensation Insurance
- Process flow diagrams with emission points
- Site plan including the location of the proposed source and property boundary
- Material balance data and all emissions calculations
- Material Safety Data Sheets (MSDS) or equivalent information for materials processed and manufactured.
- Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission <sup>(1)</sup>
- Documentation that the proposed installation complies with local zoning and land use requirements <sup>(2)</sup>

<sup>(1)</sup> Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

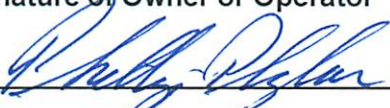
<sup>(2)</sup> Required for applications subject to Expanded Public Participation Requirements.

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Blvd ▪ Baltimore, Maryland 21230  
(410) 537-3230 ▪ 1-800-633-6101 ▪ www.mde.state.md.us

Air and Radiation Management Administration ▪ Air Quality Permits Program

Application for Permit to Construct  
Gas Cleaning or Emission Control Equipment

1. Owner of Installation Mountaire Farms of Delaware Inc.		Telephone No. (302) 841-4629	Date of Application 6-3-2024
2. Mailing Address P.O. Box 1320		City Millsboro	Zip Code 19966
		County Sussex, DE.	
3. Equipment Location 11761 Cordova Road		City/Town or P.O. Cordova	County Talbot
4. Signature of Owner or Operator 		Title President	Print or Type Name Phillip Plylar
5. Application Type:		Alteration <input type="checkbox"/>	New Construction <input checked="" type="checkbox"/>
6. Date Construction is to Start: TBD		Completion Date (Estimate):	
7. Type of Gas Cleaning or Emission Control Equipment:			
Simple Cyclone <input type="checkbox"/> Multiple Cyclone <input type="checkbox"/> Afterburner <input type="checkbox"/> Electrostatic Precipitator <input type="checkbox"/>			
Scrubber <input type="checkbox"/> _____ (type) Other <input type="checkbox"/> _____ (type)			
8. Gas Cleaning Equipment Manufacturer		Model No.	Collection Efficiency (Design Criteria)
9. Type of Equipment which Control Equipment is to Service: Dust control baffle system will be installed in the grain truck receiving pit.			
10. Stack Test to be Conducted:			
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> _____ (Date)			
(Stack Test to be Conducted By)			
11. Cost of Equipment _____			
Estimated Erection Cost _____			

**12. The Following Shall Be Design Criteria:**

	<u>INLET</u>	<u>OUTLET</u>
Gas Flow Rate	_____ ACFM*	_____ ACFM*
Gas Temperature	_____ °F	_____ °F
Gas Pressure	_____ INCHES W.G.	_____ INCHES W.G.
PRESSURE DROP _____		
Dust Loading	_____ GRAINS/ACFD**	_____ GRAINS/ACFD**
Moisture Content	_____ %	_____ %
OR		
Wet Bulb Temperature	_____ °F	_____ °F
Liquid Flow Rate (Wet Scrubber)	_____ GALLONS/MINUTE	
(WHEN SCRUBBER LIQUID OTHER THAN WATER INDICATE COMPOSITION OF SCRUBBING MEDIUM IN WEIGHT %)		
* = ACTUAL CUBIC FEET PER MINUTE		** = ACTUAL CUBIC FEET DRY

**WHEN APPLICATION INVOLVES THE REDUCTION OF GASEOUS POLLUTANTS, PROVIDE THE CONCENTRATION OF EACH POLLUTANT IN THE GAS STREAM IN VOLUME PERCENT. INCLUDE THE COMPOSITION OF THE GASES ENTERING THE CLEANING DEVICE AND THE COMPOSITION OF EXHAUSTED GASES BEING DISCHARGED INTO THE ATMOSPHERE. USE AVAILABLE SPACE IN ITEM 15 ON PAGE 3.**

**13. Particle Size Analysis**

<u>Size of Dust Particles Entering Cleaning Unit</u>	<u>% of Total Dust</u>	<u>% to be Collected</u>
0 to 10 Microns	_____	_____
10 to 44 Microns	_____	_____
Larger than 44 Microns	_____	_____

**14. For Afterburner Construction Only:**

Volume of Contaminated Air \_\_\_\_\_ CFM (DO NOT INCLUDE COMBUSTION AIR)

Gas Inlet Temperature \_\_\_\_\_ °F

Capacity of Afterburner \_\_\_\_\_ BTU/HR

Diameter (or area) of Afterburner Throat \_\_\_\_\_

Combustion Chamber \_\_\_\_\_ (diameter) \_\_\_\_\_ (length) Operating Temperature at Afterburner \_\_\_\_\_ °F

Retention Time of Gases \_\_\_\_\_

**15. Show Location of Dust Cleaning Equipment in the System. Draw or Sketch Flow Diagram Showing Emission Path from Source to Exhaust Point to Atmosphere.**

See attached PFD.

Date Received: Local \_\_\_\_\_ State \_\_\_\_\_

Acknowledgement Date: \_\_\_\_\_

By \_\_\_\_\_

Reviewed By:

Local \_\_\_\_\_

State \_\_\_\_\_

Returned to Local:

Date \_\_\_\_\_

By \_\_\_\_\_

Application Returned to Applicant:

Date \_\_\_\_\_

By \_\_\_\_\_

REGISTRATION NUMBER OF ASSOCIATED EQUIPMENT:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

PREMISES NUMBER:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

Emission Calculations Revised By \_\_\_\_\_ Date \_\_\_\_\_



**Talbot County Planning and Zoning Department**  
**215 Bay Street, Suite 2**  
**Easton, Maryland 21601**

Phone: 410-770-8030  
edeflaux@talbotcountymd.gov

FAX: 410-770-8043  
TTY: 410-822-8735

July 1, 2024

Kyle McConnell  
Environmental Manager – Eastern Shore  
Mountaire Farms  
(302) 841-4629

c/o Mountaire Farms of Delaware Inc.  
P.O. Box 1320  
Millsboro, DE 19966

Subject: Zoning Verification for the properties of Mountaire Farms:

1. 11761 Cordova Road  
Cordova, MD 21625  
Tax Map 11, Grid 12, Parcel 47  
Tax Account # 147316
2. 14209 Old Wye Mills Road  
Wye Mills, MD 21679  
Map 1, Grid 10, Parcel 7  
Tax Account # 156064

In response to your request for information regarding the above-referenced properties, I have researched our files and present the following:

1. The Cordova property is in the Village Mixed (VM) zoning district and is currently compliant with all zoning standards. The land use category is Agricultural Support Businesses and Services (*Talbot County Code §190-25.2 (Table IV-1) Table of Land Uses*). This property operates under the *Grain Processing, Drying, and Storage (wholesale commercial)* use permitted only by a Special Exception from the Board of Appeals in the VM zoning district. The property has been operating as this use since at



least the 1950's. The first Special Exception was granted in 1994 to construct a new 60' diameter storage tank (80' Height) and replace in-kind the existing tank with a 48' diameter tank (Appeal No. 927). In the year 2000, a modification to the existing Special Exception was granted by the Board to construct one (1) additional grain bin (Appeal No. 1123). In 2022, the Board approved another modification to the Special Exception to allow for the construction of an additional grain tank (SPEX-22-4).

2. The existing zoning for the property in Wye Mills is Village Hamlet (VH) and Critical Area Overlay (CAO). There are currently no outstanding zoning issues for this facility. The land use category is Agricultural Support Businesses and Services. This property operates under the *Grain Processing, Drying, and Storage (wholesale commercial)* use permitted only by a Special Exception from the Board of Appeals in the VH zoning district. The property was first granted a Special Exception for grain storage in 1977 (Appeal No. 237), to allow two grain storage tanks, in addition to a tank that existed since 1948. In 1979, the Board of Appeals granted a modification to the Special Exception (Appeal No. 357) to construct an additional two (2) grain storage tanks. At this time, the Board also granted a height variance of the 40' maximum height. Only one of the two approved tanks were constructed in the allotted time frame. In 1983, the property owner was again granted a Special Exception modification, and variance of the 40' height restriction, to construct an additional grain tank (Appeal No. 496). The Nagel company purchased the property in 1994. In 1995, the Board granted a modification to the Special Exception to construct two additional grain storage tanks and granted a variance for reduction of the 200' setback (Appeal No. 947). The applicant never constructed the approved tanks. In 1997, the applicant again requested a modification to the Special Exception to construct two (2) grain storage tanks and for a variance of the 200' setback. The Board, again, granted the request (Appeal No. 1036). In 1999, the Board granted a modification to the Special Exception to construct three (3) additional grain storage tanks (Appeal No. 1092). In 2015, the Board granted a modification of the Special Exception to approve six (6) grain storage tanks, one (1) grain dryer, and granted eight (8) setback variances necessary to construct the grain tanks (Appeal No. 14-1625). The *Talbot County Code* was amended in 2018, modifying setback requirements in the VH zoning district. As modified, "New or expanded structures shall maintain the minimum setback from lot lines of the existing structures on the same property." In 2023, the Board approved variances and a modification of the Special Exception to permit the construction of two (2) grain tanks at heights of 134.23' and 115.5' where the maximum height of 100' is a supplemental standard for a storage structure (SPEX-23-2). The office building on the property was destroyed by fire in December of 2023. The temporary office is permitted with a temporary use certificate (U-23-15). The demolition of the damaged building is currently underway (DEMO-24-13). This office has not yet received a building permit application for the replacement building.

The commonly owned properties adjacent to the subject property in Wye Mills are zoned Village Hamlet (VH), are in the Critical Area Overlay (CAO), and the land use category is Residential. All four dwellings are proposed to be demolished and removed and have demolition permits applied for as follows:

155068	28685 Queen Anne Hwy, Wye Mills, MD	0001	0010	0025	DEMO-24-16
155483	28681 Queen Anne Hwy, Wye Mills, MD	0001	0010	0005	DEMO-24-18
145100	28663 Queen Anne Hwy, Wye Mills, MD	0001	0010	0045	DEMO-24-20
145119	28665 Queen Anne Hwy, Wye Mills, MD	0001	0010	0042	DEMO-24-17

The standard setbacks of the parcels in the VH and VM are as follows:

Front	25'
Side	10'
Rear	25'
State Highway	50' (All parcels front on State Highways, Rt. 662, 309 or 404)

This information was researched on July 1, 2024, by the undersigned, per request and as a public service. The undersigned certifies that the above information contained herein is believed to be accurate and is based upon, or relates to, the information supplied by the requestor. The Authority assumes no liability for errors and omissions. All information was obtained from public records, which may be inspected during regular business hours.

Please contact me if you have any questions.

Sincerely,



Andrew Nixon  
Talbot County Planning and Zoning