#### MARYLAND DEPARTMENT OF THE ENVIRONMENT

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

#### **DOCKET #10-24**

COMPANY: Mountaire Farms of Delaware, Inc.

LOCATION: 14209 Wye Mills Rd., Wye Mills, MD 21679

APPLICATION: A grain drying and handling facility

<u>ITEM</u>	DESCRIPTION
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

## MARYLAND 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 14209 Wye Mills Rd., Wye Mills, MD 21679.

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 10-24). 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 inperson 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 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



#### 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. 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.



# Area of Interest (AOI) Information

May 13 2024 15:57:14 Eastern Daylight Time





USE OF DRIT YOU EN DA

#### Summary

Name	Count	Area(mi²)	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	1	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

0	N/A	N/A
0	N/A	N/A
	0 0 0 0 0 0	0 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_Exposu re_Percent	Overburd_Exposu re_Percentile	Overburd_Poll_En viro_Percent	Overburd_Poll_En viro_Percentile	Sensitive_Populati on_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	RentalsOccupiedP re79Percent	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	PercentPowerPlan ts	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	PollutionEnvironment alPercent	PollnEnvironmentalP ercentile	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_Po	ор	PercentNATA_Can cer	Percentile_NATA_ Cancer	Perce	ntNATA_Res p_HI	Percentile_N Resp_H		PercentNATA_Dies
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_PM: 5	PercentileNa M25	ATA_P	PercentOzone	PercentileOzone	Per	centTraffic	PercentileT	raffic	PercentTRI
1	3.54	78.43	2.56		93.00	9.18	0.34		2.17		5.26
#	PercentileTRI	Percenti	lazWasteLF	Perc	entile_HazWasteLF	PollutionExposureF	Percen	DRYANGGAMOS COM PROGRAMS	oosurePercen ile		Area(mi²)
	00.10	0.00		0.00		00.00		5.40			-

#	PercentileTRI	PercentHazWasteLF	Percentile_HazWasteLF	PollutionExposurePercen t	PollutionExposurePercen tile	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

#	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 acoss Maryland)	Area(mi²)
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(mi²)
1	24	041	00592947	24041	Talbot	No Data	Attainment/Unc lassifiable	No Data	No Data	N/A

#### Fine Particles (2012)

	#	STATEFP10	COUNTYFP10	COUNTYNS10	GEOID10	NAME10	PM2.5 (2012) Status	Area(mi²)
1		24	041	00592947	24041	Talbot	Attainment/Unclassifia ble	N/A

#### Biosolids FY 2020 and Current Permits Distribution By Acreage

#	County Name	FY2020andAfter	Area(mi²)
1	Talbot	2,395.40	N/A

#### Biosolids FY2015 - 2019 Permits Distribution By Acreage

#	County Name	FY2015to2019	Area(mi²)
1	Talbot	2,119.40	N/A

#### Biosolids FY2010 - 2014 Permits Distribution By Acreage

#	County Name	FY2010to2014	Area(mi²)
1	Talbot	3,884.10	N/A

#### Biosolids FY2009 Permits Expired Distribution By Acreage

#	County Name	FY2009	Area(mi²)
1	Talbot	No Data	N/A

#### Biosolids FY 2020 and Current Permit Distribution By Percent Coverage

#	County Name	FY2020andAfter	Area(mi²)	
1	Talbot	2,395.40	N/A	

#### Biosolids FY2015 - 2019 Permit Distribution By Percent Coverage

#	County Name	FY2015to2019	Area(mi²)
1	Talbot	2,119.40	N/A

#### Biosolids FY2010 - 2014 Permit Distribution By Percent Coverage

	#	County Name	FY2010to2014	Area(mi²)
1	1	Talbot	3,884.10	N/A

#### Biosolids FY2009 Expired Permit Distribution By Percent Coverage

	#	County Name	FY2009	Area(mi²)
ſ	1	Talbot	No Data	N/A

#### 10 Miles from Landfill

#	County	Туре	Facility_N	ADDRESS	FILL	SITE_ACRE	AI_No_	Owner_Type
1	QUEEN ANNE'S	WRF	Baker RubbleLandfill	501 4-H Park Road, Queenstown MD 21658.	15.9	18.50	37,443.00	PRI

#	MD_GRIDE	PERMITNUMB	EXPIRATION	Area(mi²)
1	1046 /429	2013-WRF-0622	4/23/2018, 8:00 PM	N/A

#### 30 mile buffer (Maryland)

#	Facility_Name_1	Facility_Contact _1	Contact_Phone	Contact_Email_ 1	Contact_2	Contact_2_Phon	Contact_2_Emai	URL	Area(mi²)
1	Twin Maples Compost Facility	Ryan Slack	(336) 207-9310	rslack@midatlanti corganic.com	No Data	No Data	No Data	https://midatlantic organic.com/	N/A

© MDE



May 13, 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. – Wye Mills Grain Facility

Mr. Hafner:

Please find enclosed the application packet for our Wye Mills Grain Facility 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. Additionally, all gravity and mechanical load outs will have a dust sock on them.

The annual throughput for the facility will be: 600,000 tons of grain.

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

Regards,

Kyle McCornell

Kyle McConnell

Environmental Manager

Mountaire Farms

#### Mountaire Farms of Delaware Inc. – Preston Grain Facility

#### **Equipment List**

#### **West Side**

#### **Grain Storage**

Identification	No. of Bushels
Tank 11	37,000
Tank 12	37,000
Tank 13	43,000
Tank 14	80,000
Tank 15	95,000
Tank 16	95,000
Tank 17	95,000
Tank 18	95,000
Total Grain Storage (West Side)	577,000

#### **Wet Tanks**

Identification	No. of Bushels	
Wet Tank 1	30,000	
Wet Tank 2	20,000	
Wet Tank 3	30,000	
Wet Tank 4	10,000	
Wet Tank 5	5,000	
Wet Tank 6	5,000	
Total Wet Grain Storage (West Side)	100,000	

#### **Grain Dryers**

Identification	No. of Bushels / Hour
Grain Dryer 1 (Propane)	6,000
Grain Dryer 2 (Propane)	2,500

#### **Truck Receiving Pit**

Identification	No. of Bushels
Truck Receiving Pit 1 (West Side)	750-bushel capacity
Receiving Pit Drag	18,000
Truck Receiving Pit 2 (West Side)	Permanently out of service

#### **Grain Elevator Legs**

Identification	No. of Bushels / Hour
Grain Receiving Leg – Leg 1	18,000
Wet Grain Leg – Wet Leg 2	10,000
Dry Grain Leg – Dry Leg 3	10,000
Leg 4	5,000
Loadout Leg 5	5,000

#### **Grain Turn Heads**

Identification	Туре
Turn Head 1	6-hole flat back turn head
Turn Head 2	6-hole flat back turn head
Turn Head 3	7-hole flat back turn head

#### **Overhead Grain Transfer Drags**

Identification	No. of Bushels / Hour
#11/12/13/14	6,000
#15/16	15,000
#17	15,000

#### Drags

Identification	No. of Bushels / Hour
Small Dryer Drag	5,000
Reversible Dryer Drag	8,000
#17/18 Reversible Drag	5,000

Wet #2/4 Drag	10,000
Wet #1 Drag	8,500
Wet #3 Drag	5,000

#### **Mechanical Load Outs**

Identification	No. of Bushels / Hour
(1) Leg 4	5,000
(2) Wet Leg 2	10,000
(2) Wet Leg 3	10,000
(3) Wet Leg 2	10,000
(3) Wet Leg 3	10,000
(4) Leg 4	5,000

#### **Tube Transfer / Loadout Screws**

Identification	No. of Bushels / Hour
#5 U Trough Screw	2,500
#6 U Trough Screw	2,500
#11 U Trough Screw	4,000
#12/13 U Trough Screw	4,000
#14 U Trough Screw	3,000
#15 U Trough Screw	3,500
#16 U Trough Screw	3,500

#### **Gravity Loadouts**

Identification	No. of Bushels / Hour
Tank 15	6,000
Tank 16	6,000
Tank 17	6,000
Tank 18	6,000

# Mountaire Farms of Delaware Inc. – Preston Grain Facility Equipment List

#### **East Side**

#### **Truck Receiving Pit**

Identification	No. of Bushels
Truck Receiving Pit 1 (East Side)	750-bushel capacity
Receiving Pit Drag #3	8,000

#### **Grain Elevator Legs**

Identification	No. of Bushels / Hour
Grain Receiving Leg – Leg 6	8,500
Elevator Leg 7	10,000

#### **Grain Turn Heads**

Identification	Туре
Turn Head 4	5-hole flat back turn head
Turn Head 6	3-hole flat back turn head

#### **Overhead Grain Transfer Drags**

Identification	No. of Bushels / Hour
Top Drag #1	16,500
#19 Top Drag	8,500
#19/20 Top Drag	8,500
#21/22/23 Top Drag	8,500
Main Reversible Top Drag	25,000
#24 Top Drag	25,000
#25 Top Drag	25,000
#26 Top Drag	25,000

#### Drags

Identification	No. of Bushels / Hour
#19/20 drag	5,000
#21/22/23 drag	5,000
#21 drag	5,000
#24 drag	5,000
#25 drag	5,000
#26 drag	5,000

#### **Grain Storage**

Identification	No. of Bushels
Tank 19	165,000
Tank 20	165,000
Tank 21	165,000
Tank 22	165,000
Tank 23	165,000
Tank 24	400,000
Tank 25	400,000
Tank 26	450,000
Shipping Container Load Out Tank 1	5,000
Shipping container Load Out Tank 2	5,000
Ground Pile Storage	1,500,000
Total Grain Storage (East Side)	3,585,000

#### **Mechanical Load Outs**

Identification	No. of Bushels / Hour
Shipping Container Belt Loadout	10,000
Shipping Container Screw Loadout x 2	6,000 bph, each
Leg 6	8,500

#### **Gravity Loadouts**

Identification	No. of Bushels / Hour
Tank 19	6,000
Tank 20	6,000
Tank 21	6,000
Tank 22	6,000
Tank 23	6,000
Tank 24	6,000
Tank 25	6,000
Tank 26	6,000

### **Tube Transfer / Loadout Screws**

Identification	No. of Bushels / Hour
#19 Tube Screw	5,000
#20 Tube Screw	5,000
#21 Tube Screw	5,000
#22 Tube Screw	5,000
#23 Tube Screw	5,000
Loadout 1&2 U-Trough Screw (Right and Left)	8,000

#### **Ground Corn Pile Storage Equipment**

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

#### **Facility Potential Emissions:**

1317		77.28			21570		9	gdyercontasti	Total tarsaferissians (excluding dyer can hustian)	Total torsofe
282	00094	1650	aces		ക്ക	022		ത്തേത്തര	Cdum	
αω	002	αω	970		000	047		ΩΟ	Rack (-stonest)	GainDyirg
αω	013	αω	220		000	3		00	Rak	
066	00011	378	00063		1500	0025		1,200,0000	6	Starge Bin(vert)
αω	aois	000	0005		000	0375		ΩΟ		Gain Ceaning 3
522	acces	3060	0034		5490	0.061		1,800,00000	arding	Hadrase&Harding
αω	00022	αω	0012		000	0048		00	Sip	
αω	acces	000	0004	0%	000	0016	0%	00	Bage	Sipping
αω	QQQQQY	αω	00022	ę	000	0027	8	ΩΟ	Raicar	Loatht/
1.47	GCCOD	870	0000		2580	0086		ഞ്ഞാ	Truckurspecified	
αω	0005	000	0038		000	075		QO	Sip	
οω	0005	000	0038		000	0.15		ΩΟ	Bagenairekg	
αω	GCOD	αω	00073		000	0029		QO	Bageurbadoort	{ !
αω	acors	000	00078		000	0022		QO	湿	D
ΩΩ	acons	αω	0,0078		αω	0005		QO	Truckhapper	
300	001	17.70	OCED O		5400	0.18		ഞ്ഞാ	Truckstraigt	
מסבילו אומ		ыдат			pd2000			ഞ്ഞേയാ		
(tan/sear)	(lbta)	(tar/year)	(lbfar)	(%cartrd)	(laskyeer)	(lbta)	(%artrd)	(ന്മാട്യക്കു)	Activity	8
Enissions	Factor	Enissians	Fado:	Efficiency	<b>HVIETISBICTS</b>	Fado	Bliderby	Capacity		
HW <sub>5</sub>	FM₂, Enission	HW <sub>0</sub>	FM <sub>ω</sub> Eπissiαn	FM <sub>6</sub> Carted		<b>PVIErission</b>	<b>HVICantrol</b>	Maximum		
_	ד	ד	9	ſ	Φ	Ω	O	σ	מ	
420 apter 991	Sureutesdhwiserded EAAP42Opper991	œurlessdhaw	<u>Su</u>					ssions	Grain elevator potential emissions	Grain elevato

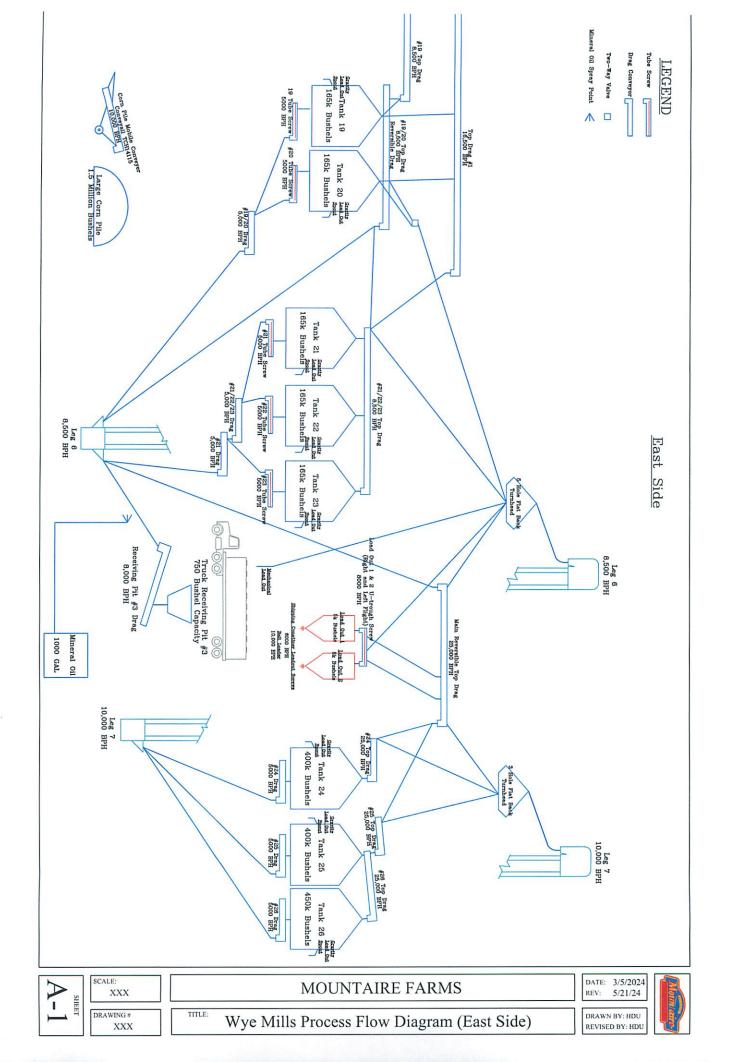
#### **Actual Air Emissions with Control Efficiencies:**

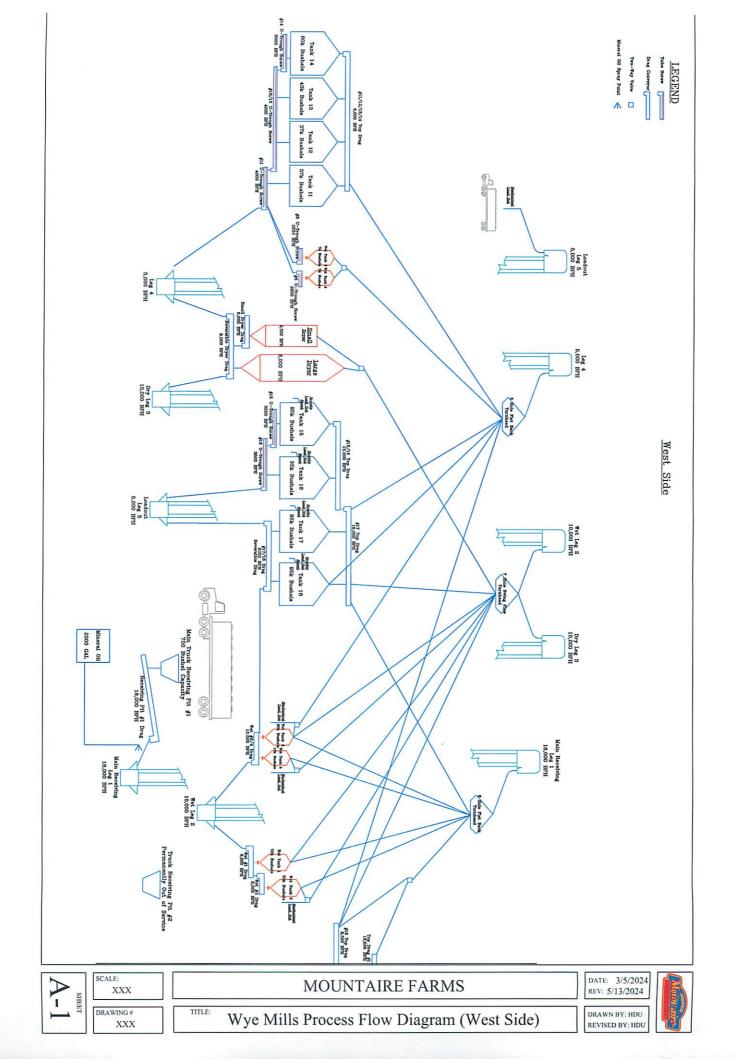
Tdal tarsenissians (edular gan busion for mayes)	Glum 600,000 60%	GeinDyirg Rack(-somest) 0%	Rack 0%	SageBn(vert) 1,200,0000 60%	Gandearing 0%	Hadrase&Harding 1,800,000 60%	Sip 0%	Stipping Barge 0%	Leacht/ Railcar 0%	Tindkursperified 600,0000 60%	Stip 0%	Bagenairekg 0%	Bageuroadcort 0%	Rail 0%	Tirudk (1933)20 0%	Tinuk straight 600,0000 88%		(tars/ser) (%cartd)	Activity Throughput Efficiency	Adual RVICarted	D C
	022	047	w	0025	03/5	0061	0048	0016	0027	0086	0.15	0.15	0000	0032	0035	0.18		(lbtar)	Fador	RVEnission	a.
7278	2640	000	000	600	000	21.96	000	000	000	1032	000	000	000	000	000	810	ba(1-c)/2000	(ന്മാർക്കു)	HVIETIBBOTS		Ф
	60%	0%	0%	60%	0%	60%	0%	0%	0%	60%	0%	0%	0%	0%	0%	88%		(%artid)	Elliderby	FM <sub>b</sub> Cantrol	-
	aces	072	075	ooos	0005	0034	0012	0004	00022	0029	0038	acces	00073	8000	8/000	OCES		(lbtar)	Fador	FM <sub>o</sub> Enission	9
2649	680	000	000	151	000	1521	000	000	000	348	000	000	000	000	000	266	bg(14)200	(tan/sear)	Enissions	PMP 0	ъ
	00094	900	013	00011	0016	occes	00022	comes	OCCUSE	GKODO	0005	0005	GOODS	OCOTS	OCOTS	001		(lbtar)	Fador	FM25 Enission	5
452	1.13	000	000	026	000	209	000	000	000	Q59	000	000	000	000	000	0.45	שהלוא/אמס	(tankear)	Enissians	FM <sub>25</sub>	

	а	b	С	d	е		
Pollutant	GWP <sup>1</sup>	Dryer hourly propane usage	Actual propane burned	Hours in a Year	Emission Factor	Potential Emissions	Actual Emissions
		(gal/hr)	(gal/yr)	(hr/yr)	(lb/gal)	(ton/yr)	(tons/yr)
		(Btu/hr) / (91500 Btu/gal)		24 hrs/day * 365 days/yr		(b * d * e) / 2000	(c*e)/2000
		723.50	38138.80	8760	by pollutant		
Criteria Air Po	llutants					Source:	EPA AP-42 Chapter 1.5
PM					0.0007	2.22	0.01
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	0.25
voc					0.0010	3.17	0.02
co					0.0075	23.77	0.14
Lead					n/a		
Greenhouse C	as Emis	sions				Source: 40 CFR 98, Sub	p. C, Table C-1 and C-2
CO <sub>2</sub>	1				12.40	39287.94	236.42
CH₄	25				0.0002017	0.6392	0.0038
N <sub>2</sub> O	298				0.0000202	0.0639	0.0004
				GHG Total (CO <sub>2</sub> e) <sup>2</sup>		39322.97	236.63
Hazardous Air	Pollutar	its				Source:	EPA AP-42 Chapter 1.4
Benzene					0.0000000772	0.0002	0.0000
Formaldehyde					0.0000028	0.0087	0.0001
Hexane				i	0.0000662	0.2098	0.0013
Naphthalene					0.00000002243	0.0001	0.0000
Toluene					0.000001250	0.0004	0.0000
Arsenic					0.0000000736	0.0000	0.0000
Beryllium					0.000000000441	0.0000	0.0000
Cadmium					0.000000405	0.0001	0.0000
Chromium					0.000000515	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	0.0013

Propane pote	ntial and	actual emissions					
	а	b	С	d	е		
Pollutant	GWP <sup>1</sup>	Dryer hourly propane usage	Actual propane burned	Hours in a Year	Emission Factor	Potential Emissions	Actual Emissions
		(gal/hr) (Btu/hr) / (91500 Btu/gal)	(gal/yr)	(hr/yr) 24 hrs/day * 365 days/yr	(lb/gal)	(ton/yr)	(tons/yr)
		150.82	38138.80	8760	by pollutant	(b * d * e) / 2000	(c * e) / 2000
riteria Air Po	llutants	100.02	00100.00	0100	Бу ролиция	Source:	EPA AP-42 Chapter 1
PM					0.0007	0.46	0.01
PM10				Ì	0.0007	0.46	0.01
. PM2.5					0.0007	0.46	0.01
SOx					0.00018	0.12	0.00
NOx				i	0.0130	8.59	0.25
voc					0.0010	0.66	0.02
СО					0.0075	4.95	0.14
Lead					n/a		
Freenhouse (	Gas Emis	sions				Source: 40 CFR 98, Sub	p. C, Table C-1 and C
CO <sub>2</sub>	1				12.40	8189.93	236.42
CH₄	25				0.0002017	0.1333	0.0038
N <sub>2</sub> O	298				0.0000202	0.0133	0.0004
				GHG Total (CO <sub>2</sub> e) <sup>2</sup>		8197.24	236.63
lazardous Air	Pollutar	nts				Source:	EPA AP-42 Chapter 1
Benzene					0.000000772	0.0001	0.0000
Formaldehyde					0.0000028	0.0018	0.0001
Hexane					0.0000662	0.0437	0.0013
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					0.000000000883	0.0000	0.0000
	THE PARTY NAMED IN COLUMN TO SERVICE AND ADDRESS OF THE PARTY NAMED IN			HAP total		0.0458	0.0013

Pollutant	Grain Elevator	Feed Mill	Natural Gas	Propane	Fugitive	Actual Emissions	
	(ton/yr)	(ton/yr)	(ton/yr)	(ton/yr)	(ton/yr)	(ton/yr)	
Criteria Air Pollut	ants						
PM	72.78			0.03		72.81	
PM10	26.49			0.03		26.52	
PM2.5	4.52			0.03		4.55	
SOx						0.00	
NOx				0.75		0.75	
VOC				0.06		0.06	
СО				0.42		0.42	
Lead	1					0.00	
Greenhouse Gas	Emissions						
CO <sub>2</sub>				236.42		472.84	
CH₄				0.00		0.0076	
N₂O				0.00		0.0080	
GHG Total CO₂e				236.63		473.26	
Hazardous Air Po	llutants						
Benzene				0.00		0.0000	
Formaldehyde				0.00		0.0001	
Hexane				0.00		0.0026	
Naphthalene				0.00		0.0000	
Toluene				0.00		0.0000	
Arsenic				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					0.0026	
HAP total						0.0027	







#### **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 2/29/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER. AND THE CERTIFICATE HOLDER.

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on

this certificate does not confer ri	ghts to the certificate holder in lieu of s	uch endorseme	nt(s).		
PRODUCER		CONTACT NAME:	Cheri Johnson		
Stephens Insurance, LLC	•	PHONE (A/C, No. Ext):	(501)377-6319	FAX (A/C, No):	
111 Center Street, Suite 100 Little Rock, AR 72201	•	E-MAIL ADDRESS:	cheri.johnson@stephens		_
			INSURER(S) AFFORDING COVER	RAGE	NAIC#
www.stephensinsurance.com		INSURER A : Har	tford Fire Insurance Compar	ny	19682
INSURED		INSURER B : Pro	perty & Casualty Insurance	Co. of Hartford	34690
Mountaire Farms Inc. P. O. Box 710		INSURER C : Nav	42307		
Selbyville DE 19975		INSURER D : Twit	n City Fire Insurance Compa	iny	29459
•		INSURER E :			
		INSURER F:			
COVERAGES	CERTIFICATE NUMBER: 78865374		REVISION	NUMBER:	
THIS IS TO CERTIFY THAT THE PO	LICIES OF INSURANCE LISTED BELOW HA	VE BEEN ISSUE	TO THE INSURED NAMED	ABOVE FOR THE P	OLICY PERIOD

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR		TYPE OF INSURANCE	ADDLS	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	'S
D	7	COMMERCIAL GENERAL LIABILITY			38ECSS71202	3/1/2024	3/1/2025	EACH OCCURRENCE	\$1,000,000
i		CLAIMS-MADE / OCCUR			\$1,000,000 Limit excess			DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
l	✓	Contractual			of \$1,000,000 SIR			MED EXP (Any one person)	\$ 10,000
l	1	\$1,000,000 SIR	l 1					PERSONAL & ADV INJURY	\$1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
		POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$4,000,000
		OTHER:							\$
Α	AUT	OMOBILE LIABILITY			38CSES71201	3/1/2024	3/1/2025	COMBINED SINGLE LIMIT (Ea accident)	\$5,000,000
i	$\angle$	ANY AUTO			\$250,000. Deductible			BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
l	<b>√</b>	AUTOS ONLY  NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
С	<b>\</b>	UMBRELLA LIAB / OCCUR			CH23UMRZ07CYGIV	3/1/2024	3/1/2025	EACH OCCURRENCE	\$5,000,000
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$5,000,000
		DED ✓ RETENTION \$10,000							\$
В		KERS COMPENSATION EMPLOYERS' LIABILITY			38WNS71200	3/1/2024	3/1/2025	✓ PER OTH- STATUTE ER	
İ	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A		\$500,000. Deductible			E.L. EACH ACCIDENT	\$1,000,000
	(Man	datory in NH)	"'^					E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000
DE60	POIDT	ION OF OPERATIONS ( LOCATIONS / VEHICL	ES IAC	CORD	101 Additional Demarks Schodule, may be	a attached if mor	e enace le requir	ed)	

CERTIFICATE HOLDER	CANCELLATION
Verification of Coverage	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  Stan Payne

© 1988-2015 ACORD CORPORATION. All rights reserved.



# 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 Wye Mills Grain Facility
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountaire.com
DES	SCRIPTION OF EQUIPMENT OR PROCESS
	Facility 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.

$\boxtimes$	Application package cover letter describing the proposed project						
$\boxtimes$	Complete application forms (Note the number of forms included or NA if no applicable.)	ot					
	No.       1       Form 5       No.       NA       Form 11         No.       NA       Form 5T       No.       NA       Form 41         No.       NA       Form 5EP       No.       NA       Form 42         No.       NA       Form 6       No.       NA       Form 44         No.       NA       Form 10						
	Vendor/manufacturer specifications/guarantees						
$\boxtimes$	Evidence of Workman's Compensation Insurance						
$\boxtimes$	Process flow diagrams with emission points						
$\boxtimes$	Site plan including the location of the proposed source and property boundary						
$\boxtimes$	Material balance data and all emissions calculations						
	Material Safety Data Sheets (MSDS) or equivalent information for material processed and manufactured.	S					
	Certificate of Public Convenience and Necessity (CPCN) waiver document from the Public Service Commission (1)	ation					
	Documentation that the proposed installation complies with local zoning an use requirements <sup>(2)</sup>	d land					
	(1) Required for emergency and non-emergency generators installed on or af	ter					

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 I

		Initial Registration
1A. Owner of Equipment/Company Name	9	DO NOT WRITE IN THIS BLOCK
Mountaire Farms of Delaware Inc Wye N		2. REGISTRATION NUMBER
Mailing Address		
P.O. Box 1320		County No. Premises No.
Street Address		
Millsboro Delaware	19966	1-2 3-6
City State	Zip	Registration Class Equipment No.
	SSS.* 1	
Telephone Number		7 8-11
( <u>302</u> ) <u>841-4629</u>		Data Year
Signature / M O /		Committee of the commit
Signature		
4 miles White		12-13 Application Date
Phillip Plylar - President		5-22-2024 Date
Print Name and Title		Date
1B. Equipment Location and Telephone	Number (if different from	om above)
14209 Old Wye Mills Road	Transact (in uniforcite in	o a o.,
Street Number and Street Name		
147 1491		
VVve Mills Marviai	nd 21	679 / 302 \ 841-4629
Wye Mills Marylar City/Town State		679 (302) 841-4629 Zip Telephone Number
City/Town State		
City/Town State  Mountaire Farms of Delaware Inc W		
City/Town State  Mountaire Farms of Delaware Inc W  Premises Name (if different from above)	ye Mills Grain Facility	Zip Telephone Number
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex	/ye Mills Grain Facility cisting Equipment, C= I	Zip Telephone Number  Existing Equipment)
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction	/ye Mills Grain Facility cisting Equipment, C= I New Construction	Telephone Number  Existing Equipment)  Existing Initial
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex	/ye Mills Grain Facility cisting Equipment, C= I	Telephone Number  Existing Equipment)  Existing Initial
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction	/ye Mills Grain Facility cisting Equipment, C= I New Construction	Telephone Number  Existing Equipment)  Existing Initial
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction	/ye Mills Grain Facility cisting Equipment, C= I New Construction	Telephone Number  Existing Equipment)  Existing Initial
Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Status Begun (MM/YY) C 15 16-19	/ye Mills Grain Facility  isting Equipment, C= I  New Construction  Completed (MM/Y)  20-23	Existing Equipment)  Existing Initial  Y)  Operation (MM/YY)  20-23
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Begun (MM/YY)  C 15 16-19  4. Describe this Equipment: Make, Model	/ye Mills Grain Facility  isting Equipment, C= I  New Construction  Completed (MM/Y)  20-23	Existing Equipment)  Existing Initial  Y)  Operation (MM/YY)  20-23
Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Status Begun (MM/YY) C 15 16-19	/ye Mills Grain Facility  isting Equipment, C= I  New Construction  Completed (MM/Y)  20-23  , Features, Manufacturer	Existing Equipment)  Existing Initial  Y)  Operation (MM/YY)  20-23
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Begun (MM/YY)  C 15 16-19  4. Describe this Equipment: Make, Model	/ye Mills Grain Facility  isting Equipment, C= I  New Construction  Completed (MM/Y)  20-23  , Features, Manufacturer  See attached.	Existing Equipment) Existing Initial Y) Operation (MM/YY) 20-23  (include Maximum Hourly Input Rate, etc.)
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Begun (MM/YY)  C 15  4. Describe this Equipment: Make, Model Facility Grain Drags  5. Workmen's Compensation Coverage	/ye Mills Grain Facility  isting Equipment, C= I  New Construction  Completed (MM/Y)  20-23  , Features, Manufacturer	Existing Equipment)  Existing Initial  Y)  Operation (MM/YY)  20-23
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Begun (MM/YY)  C 15  4. Describe this Equipment: Make, Model Facility Grain Drags  5. Workmen's Compensation Coverage  Company NOTE: Before a Permit to Construct may be issue	/ye Mills Grain Facility  Existing Equipment, C= I New Construction Completed (MM/Y) 20-23  In Features, Manufacturer  See attached.  Binder/Policy Number  Binded by the Department, the ap	Existing Equipment) Existing Initial Operation (MM/YY) 20-23 (include Maximum Hourly Input Rate, etc.)  Expiration Date Oplicant must provide the Department with proof of
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Begun (MM/YY)  C 15  4. Describe this Equipment: Make, Model Facility Grain Drags  5. Workmen's Compensation Coverage  Company NOTE: Before a Permit to Construct may be issue	/ye Mills Grain Facility  Existing Equipment, C= I New Construction Completed (MM/Y) 20-23  In Features, Manufacturer  See attached.  Binder/Policy Number  Binded by the Department, the ap	Existing Equipment) Existing Initial Operation (MM/YY) 20-23 (include Maximum Hourly Input Rate, etc.)
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Begun (MM/YY)  C 15  4. Describe this Equipment: Make, Model Facility Grain Drags  5. Workmen's Compensation Coverage  Company NOTE: Before a Permit to Construct may be issue worker's compensation coverage as	/ye Mills Grain Facility  Existing Equipment, C= I New Construction Completed (MM/Y) 20-23  In Features, Manufacturer  See attached.  Binder/Policy Number  Binder/Policy Number  Binder Section 1-20	Existing Equipment)  Existing Initial Operation (MM/YY)  20-23  (include Maximum Hourly Input Rate, etc.)  Expiration Date plicant must provide the Department with proof of 2 of the Worker's Compensation Act.
City/Town State  Mountaire Farms of Delaware Inc W Premises Name (if different from above)  3. Status (A= New, B= Modification to Ex New Construction Begun (MM/YY)  C 15  4. Describe this Equipment: Make, Model Facility Grain Drags  5. Workmen's Compensation Coverage  Company NOTE: Before a Permit to Construct may be issue	/ye Mills Grain Facility  Existing Equipment, C= I New Construction Completed (MM/Y) 20-23  In Features, Manufacturer  See attached.  Binder/Policy Number  The design of the Department, the application of the Policy Number  The required under Section 1-2006  The ment Units to be Register.	Existing Equipment) Existing Initial Operation (MM/YY) 20-23  (include Maximum Hourly Input Rate, etc.)  Expiration Date Oplicant must provide the Department with proof of 2 of the Worker's Compensation Act.  Stered/Permitted at this Time 13

7. Person Installing this Equipment (if different from Number 1 on Page 1)  NameTitle
Company
Mailing Address/Street
City/TownState
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None
24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry
Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber
24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
Describe Mineral oil applied to all grains recevied.  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
26-31 32-33 34 35-41 42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE %
46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year
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%)
76 77-78 79-80 81-82 83-84

Form Number: 5 Rev. 9/27/2002 TTY Users 1-800-735-2258

12. Equivalent Stack Innforma	tion- is Exhaust through [	oors, Windows	s, etc. On	ly? (Y/N)	
				85	
If not, then Height Avove Grou	nd (FT) Inside Diameter at To	p Exit Tempe	rature (°F)	Exit Velocity (I	FT/SEC)
90.00					
86-88	89-91	92-	95	96-98	
	NOTE:				
Attach a block diagram of pr	ocess/process line, indica	iting new equip	ment as	reported on this	form
and all existing	equipment, including con	trol devices and	l emissio	n points.	
42 Innut Metarials (for this are	viewant auto)				
13. Input Materials (for this equals any of this data to be co	neidered confidential?	(Y or N)			
is any or this data to be co	iisidered comidential?	(1 O(14)	INPI	T RATE	
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8. 9.					<u> </u>
TOTAL	<u> </u>			-	l
IOIAL					
44 6 4 488 4 1 4 4 11 1					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
14. Output Materials (for this e	auipment)				
14. Output Materials (for this e Process/Product Stream	quipment)				
Process/Product Stream				PUT RATE	
Process/Product Stream  NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTF UNITS	PUT RATE PER YEAR	UNITS
Process/Product Stream  NAME  1.		PER HOUR			UNITS
Process/Product Stream  NAME  1. 2.		PER HOUR			UNITS
NAME  1. 2. 3.		PER HOUR			UNITS
NAME  1. 2. 3. 4.		PER HOUR			UNITS
NAME  1. 2. 3. 4. 5.		PER HOUR			UNITS
NAME  1. 2. 3. 4.		PER HOUR			UNITS
NAME  1. 2. 3. 4. 5. 6.		PER HOUR			UNITS
NAME  1. 2. 3. 4. 5. 6. 7.		PER HOUR			UNITS
NAME  1. 2. 3. 4. 5. 6. 7.		PER HOUR			UNITS
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9. TOTAL	CAS NO. (IF APPLICABLE)	PER HOUR			UNITS
NAME  1. 2. 3. 4. 5. 6. 7. 8.	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9. TOTAL	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9. TOTAL  15. Waste Streams - Solid and I	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9. TOTAL	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9. TOTAL  15. Waste Streams - Solid and I	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL   15. Waste Streams - Solid and I   NAME   1.   2.	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL   15. Waste Streams - Solid and I   NAME   1.   2.   3.	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9. TOTAL  15. Waste Streams - Solid and I  NAME  1. 2. 3. 4. 5. 6.	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL   1.   2.   3.   4.   5.   6.   7.   7.   7.   7.   7.   7.   7	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL   15. Waste Streams - Solid and I   NAME   1.   2.   3.   4.   5.   6.   7.   8.   5.   6.   7.   8.   8.   9.   7.   8.   9.   7.   8.   9.   7.   8.   9.   9.   9.   9.   9.   9.   9	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL   1.   2.   3.   4.   5.   6.   7.   7.   7.   7.   7.   7.   7	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR	

Form Number: 5 Rev. 9/27/2002

16. Total Stack Emissions (for this	equipment only) in Pounds	s Per Operating Day
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen
99-104	105-110	111-116
Carbon Monoxide	Volatile Organic Compounds	PM-10
177-122	123-128	129-134
17. Total Fugitive Emissions (for the	nis equipment only) in Pour	nds Per Operating Day
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen
See attached air emmissions	140-144	145-149
Carbon Monoxide	Volatile Organic Compounds	PM-10
150-154	155-159	160-164
Method Used to Determine Emission	ons (1= Estimate 2= E	mission Factor 3= Stack Test 4= Other)
TSP SOX	NOX CO	VOC PM10
165 166	167 168	169 170
AIR AND RADIAT	TION MANAGEMENT ADMIN	IISTRATION USE ONLY
18. Date Rec'd. Local Date		turn to Local Jurisdiction
Reviewed by Local Jurisdic		ed by State
19. Inventory Date Month/Ye	ear Equipment Code	SCC Code
171-17	4 175-177	178-185
20. Annual	Maximum Design Per	mit to Operate I ransaction Date
Operating Rate	Hourly Rate	Month (MM/DD/YR)
186-192	193-199	200-201 202-207
Staff Code VOC Code	SIP Code Regul	ation Code Confidentiality
	on oode Regul	
208-210 211 212		215-218 219
208-210 211 212		

Form Number: 5

Rev. 9/27/2002 TTY Users 1-800-735-2258



# 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 Wye Mills Grain Facility
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountaire.com
DES	CRIPTION OF EQUIPMENT OR PROCESS
	Grain Elevator Legs

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	ceach item that you have submitted as part of	your application package.
	Application package cover letter describing the	ne proposed project
$\boxtimes$	Complete application forms (Note the numbe applicable.)	r of forms included or NA if not
	No. NA Form 5T I	No. NA Form 11 No. NA Form 41 No. NA Form 42 No. NA Form 44
$\boxtimes$	Vendor/manufacturer specifications/guarante	es
$\boxtimes$	Evidence of Workman's Compensation Insur-	ance
$\boxtimes$	Process flow diagrams with emission points	
$\boxtimes$	Site plan including the location of the propose	ed source and property boundary
$\boxtimes$	Material balance data and all emissions calcu	ulations
	Material Safety Data Sheets (MSDS) or equiverprocessed and manufactured.	valent information for materials
	Certificate of Public Convenience and Neces from the Public Service Commission (1)	sity (CPCN) waiver documentation
	Documentation that the proposed installation use requirements <sup>(2)</sup>	complies with local zoning and land
	(1) Required for emergency and non-emerge 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 Undate Initial Registration

7 5111111 10 0011311 1101		mida registration =
1A. Owner of Equipment/Company Name	9	DO NOT WRITE IN THIS BLOCK
Mountaire Farms of Delaware Inc.		2. REGISTRATION NUMBER
Mailing Address		County No. Premises No.
P.O. Box 1320		County No. Premises No.
Street Address		
MIllsboro Delaware	19966	1-2 3-6
City State	Zip	Registration Class Equipment No.
Telephone Number		
(302 ) 841-4629		7 8-11
(302 ) 041-4029		Data Year
Signature / / M o a /		
		10.10
4 Mily The far		12-13 Application Date
Phillip Plylar - President		5-22-24 Date
Print Name and Title		Date
1B. Equipment Location and Telephone	Number (if different fro	om above)
14209 Old Wye Mills Road	(1	
Street Number and Street Name		
Wye Mills Marylar	nd 21	679 (302 )841-4629
City/Town State		Zip Telephone Number
Mountaire Farms of Delaware Inc W	ye Mills Grain Facility	
Premises Name (if different from above)		
3. Status (A= New, B= Modification to Ex	isting Equipment, C= I	Existing Equipment)
New Construction	New Construction	•
Status Begun (MM/YY)	Completed (MM/Y)	() Operation (MM/YY)
15 16-19	20-23	20-23
4.5		
<ol> <li>Describe this Equipment: Make, Model, Multiple grain elevator legs - See attahced ESA</li> </ol>		(include Maximum Hourly Input Rate, etc.)
Multiple grain elevator legs - See attanced ESA		
5. Workmen's Compensation Coverage	See attached.	
	Binder/Policy Number	Expiration Date
CompanyNOTE: Refore a Permit to Construct may be issue	ed by the Department, the ap	olicant must provide the Department with proof of
worker's compensation coverage as		
6A Number of Bioges of Identical Equipme	nont Unito to ha Daria	torod/Parmittad at this Time 7
6A. Number of Pieces of Identical Equipment	nent onits to be kegis	tereu/Permitteu at tills Tillle
6B. Number of Stack/Emission Points As		Name totally applead
6B. Number of Stack/Emission Points As	sociated with this Equ	lipment None, totally enclosed.

7. Person Installing this Equipment (if different from Number 1 on Page 1)  NameTitle
Company
Mailing Address/Street
City/TownStateTelephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
, , , , , , , , , , , , , , , , , , , ,
9. Control Devices Associated with this Equipment
None
24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber
24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
Describe All grain elevator legs are totally enclosed units. Mineral will be applied to all grains received.
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
26-31 32-33 34 35-41 42 <b>-4</b> 5
COAL-TONS SULFUR % ASH% WOOD-TONS MOISTURE %
46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year
Commission Parent Second Process Floating per Parent Parent Per Pa
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%)
76 77-78 79-80 81-82 83-84

Form Number: 5 Rev. 9/27/2002 TTY Users 1-800-735-2258

Page 2 of 4
Recycled Paper

12. Equivalent Stack Innforma	tion- is Exhaust through D	oors, Windows	s, etc. Onl	y? (Y/N)	
If not, then Height Avove Grou	nd (FT) Inside Diameter at To	op Exit Tempe	raturo (°E)	85 Exit Velocity (	ET/SEC)
Teight Avove Grou		DP EXIL Tempe	Talule ( F)	Exit velocity (	1/320)
86-88	89-91	92-	95	96-98	
	NOTE:				
Attach a block diagram of pr		atina new eauip	ment as r	eported on this	form
	equipment, including cont				
12 Input Matarials (for this ag	uinmont only)				
13. Input Materials (for this eq Is any of this data to be co		(Y or N)			
			INPU	T RATE	
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.					
2.					
3. 4.			<u> </u>		
5.					
6.			<del></del>		<del> </del>
7.					
8.					
9.				-	
TOTAL			<u> </u>		
14. Output Materials (for this e Process/Product Stream	quipment)				
Process/Product Stream			OUTE	PUT RATE	
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.					
2.					
3.					<u></u>
4.				<u> </u>	
5. 6.			<u> </u>		
7.					
8.			<del> </del>		
9.					-
TOTAL		<del></del>	1		
4-14 ( 6)	• • •				
15. Waste Streams- Solid and I	Liquia		OUTE	UT RATE	
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.	(				
2.				····	
3.					
4.					
5.			<b> </b>		
6. 7.					
8.			<del>                                     </del>		
9.	-		<del>  </del>		<del>                                     </del>
TOTAL	<u> </u>		Ll		<u> </u>
1 V 1 // L					

Form Number: 5 Rev. 9/27/2002

Page 3 of 4
Recycled Paper

		Per Operating Day
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen
See attached air emmissions		
99-104	105-110	111-116
Carbon Monoxide	Volatile Organic Compounds	PM-10
177-122	123-128	129-134
17. Total Fugitive Emissions (for the	nis equipment only) in Pound	s Per Operating Day
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen
See attached air emmissions	140-144	145-149
Carbon Monoxide	Volatile Organic Compounds	PM-10
150-154	155-159	160-164
Method Used to Determine Emission	ons (1= Estimate 2= Em	ission Factor 3= Stack Test 4= Other)
TSP SOX	NOX CO	VOC PM10
165 166	167 168	169 170
AIR AND RADIAT	TION MANAGEMENT ADMINIS	STRATION USE ONLY
18. Date Rec'd. Local Date	Rec'd. State Retur	rn to Local Jurisdiction
		Ву
Reviewed by Local Jurisdic	Date_	Ву
	tion Reviewed  Date  Date	by State
19. Inventory Date Month/Ye	tion Reviewed Date_ Date_ Ear Equipment Code	by State  SCC Code
19. Inventory Date Month/Ye	tion Reviewed Date_ ear Equipment Code 4 175-177 Maximum Design Perm	by State  SCC Code  178-185  It to Operate I ransaction Date
19. Inventory Date Month/Ye	tion Reviewed Date Par Equipment Code 175-177	by State  SCC Code  178-185
19. Inventory Date Month/Ye	tion Reviewed Date_ ear Equipment Code 4 175-177 Maximum Design Perm	by State  SCC Code  178-185  It to Operate I ransaction Date
19. Inventory Date Month/Ye  Transport    Transport    Month/Ye  Transport    Trans	tion Reviewed Date  Ear Equipment Code  4 175-177  Maximum Design Perm Hourly Rate  193-199	by State  SCC Code  178-185  It to Operate I ransaction Date  Month (MM/DD/YR)
19. Inventory Date	tion Reviewed Date  Par Equipment Code  4 175-177  Maximum Design Perm Hourly Rate  193-199  SIP Code Regulate	by State  SCC Code  178-185  It to Operate I ransaction Date Month (MM/DD/YR)  200-201 202-207
19. Inventory Date   Month/Ye	tion Reviewed Date  Par Equipment Code  4 175-177  Maximum Design Perm Hourly Rate  193-199  SIP Code Regulate	SCC Code  SCC Code  178-185  It to Operate I ransaction Date Month (MM/DD/YR)  200-201 202-207  Cion Code Confidentiality

Form Number: 5

Rev. 9/27/2002 TTY Users 1-800-735-2258



(2)

# 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 Wye Mills Grain Facility
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountaire.com
DES	CRIPTION OF EQUIPMENT OR PROCESS
(	2) Two Grain Dryers, 1@ 6,000 BPH, 1 @2,500 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.

$\boxtimes$	Application package cover letter describing the proposed project
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)
	No.         1'         Form 5         No.         NA         Form 11           No.         NA         Form 5T         No.         NA         Form 41           No.         NA         Form 5EP         No.         NA         Form 42           No.         NA         Form 6         No.         NA         Form 44           No.         NA         Form 10
	Vendor/manufacturer specifications/guarantees
$\boxtimes$	Evidence of Workman's Compensation Insurance
$\boxtimes$	Process flow diagrams with emission points
$\boxtimes$	Site plan including the location of the proposed source and property boundary
$\boxtimes$	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 $^{(2)}$
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

Required for applications subject to Expanded Public Participation Requirements.

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 Undate Initial Registration Initial Registration

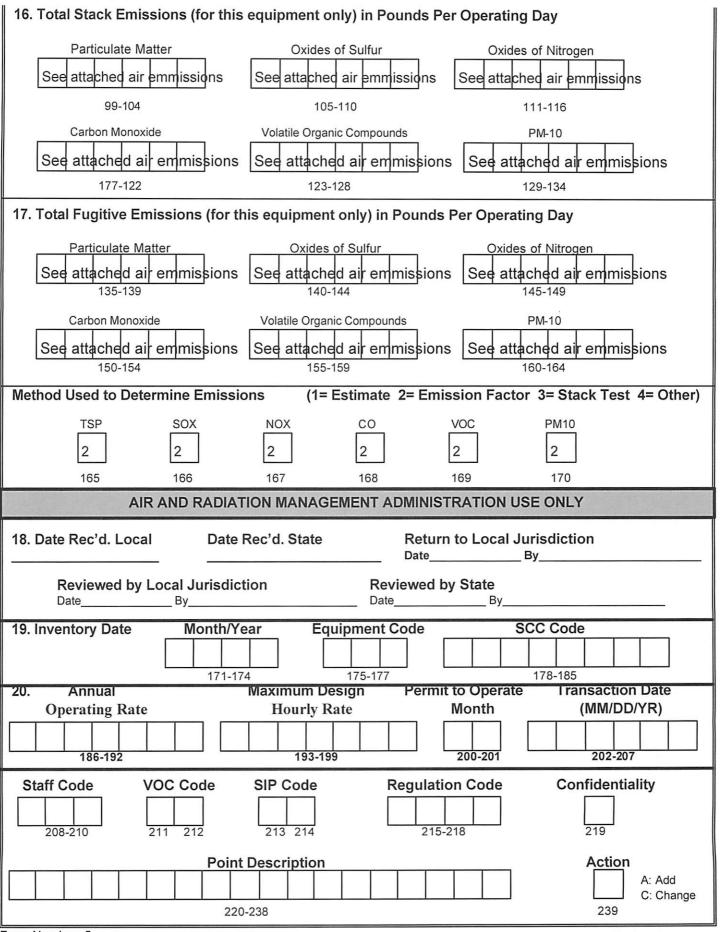
1A. Owner of Equipr	nent/Company Name		DO NOT WRITE	IN THIS BLOCK
Mountaire Farms of D	Delaware Inc Wye M	ills Grain Facility	2. REGISTRA	TION NUMBER
Mailing Address			County No.	Premises No.
P.O. Box 1320				
Street Address				
Millsboro	Delaware	19966	1-2	3-6
City	State	Zip	Registration Class	Equipment No.
Telephone Numb	er			
(302 ) 841-	4629		Data Year	8-11
			Data Year	
Signature	1010			
While	It les		12-13	Application Date
	2			
Phillip Plylar - Pr	esident		5-22-24 Date	
Print Name and Title			Date	
1B. Equipment Loca	tion and Telephone I	Number (if different	from above)	
14209 Old Wye I	Mills Road			
Street Number and S	Street Name			
Wye Mills	Marylan	d 2	21679 (302)	841-4629
City/Town	State		Zip Telep	841-4629 hone Number
Mountaire Farms	of Delaware Inc Wy	e Mills Grain Facility		
Premises Name (if di	(3)			
2 Status (A - Now P	- Modification to Evi	cting Equipment C	= Existing Equipment)	
	New Construction	New Construction		n Initial
Status	Begun (MM/YY)	Completed (MM/		
С	J			
15	16-19	20-23	20	0-23
			er (include Maximum Hou	urly Input Rate, etc.)
(1) one grain dryer max	throughput = 6,000 BPH	I, (1) grain dryer max th	roughput (2,500 BPH)	
5. Workmen's Comp	ensation Coverage	See attached.		
		Binder/Policy Number	E	Expiration Date
Company NOTE: Before a Permit	to Construct may be issue	d by the Department, the	applicant must provide the De	partment with proof of
			202 of the Worker's Compensa	
6A. Number of Piece	s of Identical Equipm	nent Units to be Reg	jistered/Permitted at th	is Time2
6B. Number of Stack	/Emission Points Ass	sociated with this E	quipment <u></u>	

Form Number: 5 Rev. 9/27/2002

7. Person Installing this Equipment (if different from Number 1 on Page 1)  Name
Company
Mailing Address/Street
City/Town State Telephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None
24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry
Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber
24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
X Describe Mineral oil applied to all grains recevied.
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
See attached air emmissions
26-31 32-33 34 35-41 42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE %
46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year
Continuous Operation Batch Fidess Flours per Batch Batch Per Week Flours per Bay Bays Fer Week Bays per Fear
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%)
76 77-78 79-80 81-82 83-84

Form Number: 5 Rev. 9/27/2002

12. Equivalent Stack Innformation- is Exhaust through Doors, Windows, etc. Only? (Y/N)						
If not, then Height Avove Grou	and (ET) Incide Diameter at To	. F. # T		85		
Height Avove Grou	Ind (FT) Inside Diameter at To	p Exit Tempe	rature (°F)	Exit Velocity (I	F1/SEC)	
	1 1 1 1				İ	
86-88	89-91	92-	95	96-98		
Attack a block diamon of m	NOTE:	4.			_	
Attach a block diagram of pr	ocess/process line, indicated in the confidence of the confidence	iting new equip	ment as	reported on this	form	
and an existing	equipment, including con-	iroi devices and	ı emissio	n points.		
13. Input Materials (for this eq	uipment only)					
ls any of this data to be co		(Y or N)				
				TRATE		
1. NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS	
2.						
3.					ļ	
4.						
5.						
6.						
7.						
8.						
9.						
TOTAL						
14. Output Materials (for this e	equinment)	· · · · · · · · · · · · · · · · · · ·	<del></del>			
Process/Product Stream	-quipmont/					
Process/Product Stream				PUT RATE		
Process/Product Stream  NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTF UNITS	PUT RATE PER YEAR	UNITS	
Process/Product Stream  NAME  1.		PER HOUR			UNITS	
Process/Product Stream  NAME  1. 2.		PER HOUR			UNITS	
NAME  1. 2. 3.		PER HOUR			UNITS	
Process/Product Stream  NAME  1. 2.		PER HOUR			UNITS	
NAME  1. 2. 3. 4.		PER HOUR			UNITS	
NAME  1. 2. 3. 4. 5.		PER HOUR			UNITS	
NAME  1. 2. 3. 4. 5. 6. 7.		PER HOUR			UNITS	
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9.		PER HOUR			UNITS	
NAME  1. 2. 3. 4. 5. 6. 7.		PER HOUR			UNITS	
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9. TOTAL	CAS NO. (IF APPLICABLE)	PER HOUR			UNITS	
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9.	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS		UNITS	
NAME  1. 2. 3. 4. 5. 6. 7. 8. 9. TOTAL	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS	
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   NAME   NAME   1.   NAME	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   NAME   1.   2.     1.   2.     1.   2.     1.   2.     1.   2.     1.   1.	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.     NAME   1.   2.   3.     3.	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   1.   2.   3.   4.   4.   4.   5.   6.   7.   8.   9.   TOTAL   15. Waste Streams - Solid and I   NAME   1.   2.   3.   4.   4.   4.   4.   4.   4.   4	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     1.   2.   3.   4.   5.   6.   7.   7.   7.   7.   7.   7.   7	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   1.   2.   3.   4.   4.   4.   5.   6.   7.   8.   9.   TOTAL   15. Waste Streams - Solid and I   NAME   1.   2.   3.   4.   4.   4.   4.   4.   4.   4	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR		
NAME   1.   2.   3.   4.   5.   6.   NAME   1.   2.   1.   2.   3.   4.   1.   2.   3.   4.   4.   5.   6.   1.   2.   3.   4.   5.   6.   6.   7.   8.   9.   TOTAL	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   5.   6.   7.   6.   7.   6.   7.   6.   7.   7	CAS NO. (IF APPLICABLE)		OUTF	PER YEAR		



Form Number: 5 Rev. 9/27/2002



(2)

# 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 Wye Mills Grain Facility			
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679			
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				
Load In Hamilton	Belt System (10,000 BPH) - Load Out Hamilton System (10,000 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.

$\boxtimes$	Application package cover letter describing the proposed project					
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)					
	No.         1         Form 5         No.         NA         Form 11           No.         NA         Form 5T         No.         NA         Form 41           No.         NA         Form 5EP         No.         NA         Form 42           No.         NA         Form 6         No.         NA         Form 44           No.         NA         Form 10					
	Vendor/manufacturer specifications/guarantees					
$\boxtimes$	Evidence of Workman's Compensation Insurance					
$\boxtimes$	Process flow diagrams with emission points					
$\boxtimes$	Site plan including the location of the proposed source and property boundary					
$\boxtimes$	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 $^{(2)}$					
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.					

Required for applications subject to Expanded Public Participation Requirements.

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 Undate Initial Registration Initial Registra

		regionation optime	- muai registrate	
1A. Owner of Equipment				IN THIS BLOCK
Mountaire Farms of Delay	ware inc vvye ivi	ills Grain Facility	_ Z. REGISTRA	TION NUMBER
Mailing Address P.O. Box 1320			County No.	Premises No.
Street Address				
Milisboro	Delaware	19966	1-2	3-6
City	State	Zip	Registration Class	
Telephone Number	- Cuito	,		
(302 ) 841-462	9		7	8-11
()			— Data Year	
Signature	011		12-13	Application Date
- Milley !	Jalan -			Application Date
Phillip Plylar - Presid	ent		5-22-24 Date	
Print Name and Title			Date	
1B. Equipment Location 14209 Old Wye Mills Street Number and Street	Road	Number (if differen	t from above)	
Muo Millo	Mandan	od.	21679 (302)	8/1 /620
Wye Mills City/Town	Marylan State	lu	Zip (302 )	841-4629 hone Number
City/Town	State		Zip Telep	none Number
Mountaire Farms of D	Delaware Inc Wy	e Mills Grain Facility	/	
Premises Name (if differen	nt from above)			
3. Status (A= New, B= Mo	odification to Exi	sting Equipment, C		g Initial
	un (MM/YY)	Completed (MM		
Status Deg				
[C				
15	16-19	20-23		0-23
4. Describe this Equipmon		Features, Manufactu	ırer (include Maximum Ho	urly Input Rate, etc.)
5. Workmen's Compensa	ation Coverage	See attached.		
		Binder/Policy Number		Expiration Date
			applicant must provide the De -202 of the Worker's Compens	
6A. Number of Pieces of	Identical Equipn	nent Units to be Re	gistered/Permitted at th	is Time2
		1 2 1 20 20 020 020 C		
6B. Number of Stack/Em	ission Points As	sociated with this I	=quipment <u>+</u>	

Form Number: 5 Rev. 9/27/2002

7. Person Installing this Equipment (if different from Number 1 on Page 1)  NameTitle
Company
Mailing Address/Street
8. Major Activity, Product or Service of Company at this Location
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None
24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry
Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber
24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
X   Describe Mineral oil applied to all grains recevied. Dust sock attached to the loadout.
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
26-31 32-33 34 35-41 42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE %
46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year
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%)
76         77-78         79-80         81-82         83-84

Form Number: 5 Rev. 9/27/2002

12. Equivalent Stack Innformation- is Exhaust through Doors, Windows, etc. Only? (Y/N)							
If not, then Height Avove Grou	nd (FT) Inside Diameter at To	p Exit Tempe	ratura (°E)	85 Exit Velocity (	ET/CEC\		
Theight Avove Grou	ma (1 1) maide Diameter at 10			Exit velocity (	F 1/3EC)		
86-88	89-91	92-9	95	96-98			
NOTE:							
Attach a block diagram of pr		iting new equip	ment as ı	eported on this	s form		
and all existing	equipment, including cont	rol devices and	l emissio	n points.			
12 Input Matarials (for this age	inment only)						
13. Input Materials (for this equals any of this data to be co		(Y or N)					
			INPU	T RATE			
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS		
1.							
3.							
4.					<u> </u>		
5.							
6.				·			
7.							
8.							
9.					L		
TOTAL							
14. Output Materials (for this equipment)							
14. Output Materials (for this e	auipment)						
14. Output Materials (for this e Process/Product Stream	quipment)						
Process/Product Stream		DED HOUR		PUT RATE	l limite		
Process/Product Stream  NAME	quipment)  CAS NO. (IF APPLICABLE)	PER HOUR	OUTF UNITS	PUT RATE PER YEAR	UNITS		
Process/Product Stream  NAME  1.		PER HOUR			UNITS		
Process/Product Stream  NAME		PER HOUR			UNITS		
Process/Product Stream  NAME  1. 2.		PER HOUR			UNITS		
NAME  1. 2. 3. 4. 5.		PER HOUR			UNITS		
NAME  1. 2. 3. 4. 5. 6.		PER HOUR			UNITS		
NAME   1.   2.   3.   4.   5.   6.   7.		PER HOUR			UNITS		
NAME   1.   2.   3.   4.   5.   6.   7.   8.		PER HOUR			UNITS		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.		PER HOUR			UNITS		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL	CAS NO. (IF APPLICABLE)	PER HOUR			UNITS		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL   15. Waste Streams - Solid and	CAS NO. (IF APPLICABLE)		UNITS	PER YEAR			
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS		
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   NAME   1.   2.   1.   2.	CAS NO. (IF APPLICABLE)		UNITS	PER YEAR			
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.     1.   2.   3.     1.   2.   3.     3.     1.   2.   3.     3.     1.   2.   3.     3.     1.     1.   1.   1.	CAS NO. (IF APPLICABLE)		UNITS	PER YEAR			
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   1.   2.   3.   4.   4.   4.   4.   4.   4.   4	CAS NO. (IF APPLICABLE)		UNITS	PER YEAR			
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   5.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   5.   5.	CAS NO. (IF APPLICABLE)		UNITS	PER YEAR			
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   5.   6.   6.   7.   8.   9.   Total     NAME   1.   2.   3.   4.   5.   6.   6.   6.	CAS NO. (IF APPLICABLE)		UNITS	PER YEAR			
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   5.   6.   7.   6.   7.   6.   7.   7.   7	CAS NO. (IF APPLICABLE)		UNITS	PER YEAR			
NAME   1.   2.   3.   4.   5.   6.   7.   8.   9.   TOTAL     NAME   1.   2.   3.   4.   5.   6.   6.   7.   8.   9.   Total     NAME   1.   2.   3.   4.   5.   6.   6.   6.	CAS NO. (IF APPLICABLE)		UNITS	PER YEAR			

Form Number: 5 Rev. 9/27/2002

	16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day							
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen						
See attached air emmissions								
99-104	105-110	111-116						
Carbon Monoxide	Volatile Organic Compounds	PM-10						
177-122	123-128	129-134						
17. Total Fugitive Emissions (for the	is equipment only) in Pounds	s Per Operating Day						
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen						
135-139	140-144	145-149						
Carbon Monoxide	Volatile Organic Compounds	PM-10						
150-154	155-159	160-164						
Method Used to Determine Emissio	ns (1= Estimate 2= Em	ission Factor 3= Stack Test 4= Other)						
TSP SOX	NOX CO	VOC PM10						
165 166	167 168	169 170						
AIR AND RADIATI	ON MANAGEMENT ADMINIS	STRATION USE ONLY						
18. Date Rec'd. Local Date R		rn to Local Jurisdiction						
Reviewed by Local Jurisdiction Reviewed by State								
Reviewed by Local Jurisdicti	ion Reviewed Date	by State						
	Date							
19. Inventory Date Month/Ye	ar Equipment Code	SCC Code						
19. Inventory Date	ar Equipment Code  175-177  Maximum Design Perm	SCC Code  178-185  It to Operate I ransaction Date						
19. Inventory Date Month/Ye	ar Equipment Code  175-177	SCC Code  178-185						
19. Inventory Date	ar Equipment Code  175-177  Maximum Design Perm	SCC Code  178-185  It to Operate I ransaction Date						
19. Inventory Date Month/Ye  171-174  20. Annual Operating Rate	ar Equipment Code  175-177  Maximum Design Perm Hourly Rate  193-199	SCC Code    178-185  It to Operate   I ransaction Date   Month   (MM/DD/YR)						
19. Inventory Date Month/Ye  171-174  20. Annual Operating Rate  186-192	ar Equipment Code  175-177  Maximum Design Perm Hourly Rate  193-199  SIP Code Regulat	SCC Code    178-185  It to Operate   Iransaction Date   Month   (MM/DD/YR)    200-201   202-207						
19. Inventory Date Month/Ye  171-174  20. Annual Operating Rate  Staff Code VOC Code  208-210  211  212	ar Equipment Code  175-177  Maximum Design Perm Hourly Rate  193-199  SIP Code Regulat	SCC Code    178-185   It to Operate   Iransaction Date   Month   (MM/DD/YR)   200-201   202-207   Cion Code   Confidentiality						

Form Number: 5 Rev. 9/27/2002



# 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 Wye Mills Grain Facility				
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679				
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					
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.

$\boxtimes$	Application package cover letter describing the proposed project					
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)					
	No.       1       Form 5       No.       N/A       Form 11         No.       N/A       Form 5T       No.       N/A       Form 41         No.       N/A       Form 5EP       No.       N/A       Form 42         No.       N/A       Form 6       No.       N/A       Form 44         No.       N/A       Form 10					
	Vendor/manufacturer specifications/guarantees					
$\boxtimes$	Evidence of Workman's Compensation Insurance					
$\boxtimes$	Process flow diagrams with emission points					
$\boxtimes$	Site plan including the location of the proposed source and property boundary					
$\boxtimes$	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 $^{(2)}$					
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more					

Required for applications subject to Expanded Public Participation Requirements.

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 EQUIP	MENT
--	------

Initial Registration
DO NOT WRITE IN THIS BLOCK  2. REGISTRATION NUMBER
County No. Premises No.
1-2 3-6
egistration Class Equipment No.
7 8-11
Data Year
12-13 Application Date
5'-22-24 Date
Date
above)
(302) 841-4629
( 302 ) 841-4629 Telephone Number
( 302 ) 841-4629 Telephone Number
( 302 ) 841-4629 Telephone Number
ting Equipment)
eting Equipment) Existing Initial
ting Equipment)
Existing Equipment)  Existing Initial  Operation (MM/YY)
eting Equipment) Existing Initial
Existing Equipment)  Existing Initial  Operation (MM/YY)
Existing Initial Operation (MM/YY) 20-23  Slude Maximum Hourly Input Rate, etc.)
Existing Initial Operation (MM/YY) 20-23  Slude Maximum Hourly Input Rate, etc.)
Existing Initial Operation (MM/YY) 20-23  Clude Maximum Hourly Input Rate, etc.)  Expiration Date  Int must provide the Department with proof of
E

7. Person Installing this Equipment (if different from Number 1 on Page 1)  Name
Company
Mailing Address/Street_
City/TownStateTelephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None 24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry Scrubber    Cyclone
Other  X Describe Mineral oil applied to all grains recevied.  24-9
10. Annual Fuel Consumption for this Equipment
OIL-1000 GALLONS         SULFUR % GRADE         NATURAL GAS-1000 FT³         LP GAS-100 GALLONS GRADE           26-31         32-33         34         35-41         42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE % 46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year  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%)
76 77-78 79-80 81-82 83-84 (Total ocasons = 10076)

12. Equivalent Stack Innforma	tion- is Exhaust through <b>D</b>	oors, Windows	, etc. On	ly? (Y/N)	
If not, then Height Avove Grou	nd (FT) Inside Diameter at To	p Exit Tempe	ratura (°E)	85 Exit Velocity (I	ET/CEC)
Theight Avove Clou		DE EXIL Temper	ature ( F)	Exit velocity (i	
				[ ] }	İ
86-88	89-91	92-9	95	96-98	<u> </u>
	NOTE:			<del></del>	**-
Attach a block diagram of pr		itina new equip	ment as i	reported on this	form
and all existing	equipment, including cont	rol devices and	emissio	n points.	
42 Imput Matarials (for this are			·		
13. Input Materials (for this equals any of this data to be co		(Y or N)			
is any or ans data to be co			INPU	T RATE	
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.					
2.		N			
3.					
5.					
6.					
7.					
8.					
9.					
TOTAL					
14. Output Materials (for this e	quinment)				-
Process/Product Stream	quipment				
				PUT RATE	
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1. 2.					ļ
3.					
4.					
5.					
6.	-				
7.					
8.					
9.					
TOTAL					
15. Waste Streams- Solid and I	Liauid				
	-			PUT RATE	
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
2.					
3.					
4.					<del> </del>
5.	· · · · · · · · · · · · · · · · · · ·				
6.					
7.					
8.					
9.					
TOTAL					

Form Number: 5 Rev. 9/27/2002

16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day			
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen	
See attached air emmissions			
99-104	105-110	111-116	
Carbon Monoxide	Volatile Organic Compounds	PM-10	
177-122	123-128	129-134	
17. Total Fugitive Emissions (for th	is equipment only) in Pound	ls Per Operating Day	
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen	
See attached air emmissions	140-144	145-149	
Carbon Monoxide	Volatile Organic Compounds	PM-10	
150-154  Method Used to Determine Emission	155-159	nission Factor 3= Stack Test 4= Other)	
	A CO ON THE DESIGNATION OF THE PROPERTY OF THE	·	
TSP SOX	NOX CO	VOC PM10	
165 166	167 168	169 170	
AIR AND RADIAT	ION MANAGEMENT ADMINI	STRATION USE ONLY	
18. Date Rec'd. Local Date F		ırn to Local Jurisdiction	
Reviewed by Local Jurisdict	ion Reviewed		
19. Inventory Date Month/Ye	ar Equipment Code	SCC Code	
171-174	4 175-177	178-185	
20. Annual	Maximum Design Pern	nit to Operate Transaction Date	
Operating Rate	Hourly Rate	Month (MM/DD/YR)	
186-192	193-199	200-201 202-207	
Staff Code VOC Code	SIP Code Regula	tion Code Confidentiality	
208-210 211 212	213 214 21	5-218 219	
Point	Description	Action	
		A: Add	

Page 4 of 4 Recycled Paper



(2)

# 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 Wye Mills Grain Facility
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountaite.com
DES	CRIPTION OF EQUIPMENT OR PROCESS
	Gravity Grain 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.

$\boxtimes$	Application package cover letter describing the proposed project		
$\boxtimes$	Complete application forms (Note the nur applicable.)	nber of forms included or NA if not	
	No. 1 Form 5 No. NA Form 5T No. NA Form 5EP No. NA Form 6 No. NA Form 10	No. NA Form 11 No. NA Form 41 No. NA Form 42 No. NA Form 44	
	Vendor/manufacturer specifications/guara	antees	
$\boxtimes$	Evidence of Workman's Compensation In	surance	
$\boxtimes$	Process flow diagrams with emission poin	nts	
$\boxtimes$	Site plan including the location of the prop	posed source and property boundary	
$\boxtimes$	Material balance data and all emissions of	alculations	
$\boxtimes$	Material Safety Data Sheets (MSDS) or e processed and manufactured.	quivalent information for materials	
	Certificate of Public Convenience and Ne from the Public Service Commission (1)	cessity (CPCN) waiver documentation	
	Documentation that the proposed installatuse requirements (2)	tion complies with local zoning and land	
	(1) Required for emergency and non-emergency 1, 2001 and rated at 2001 kW or m	ergency generators installed on or after ore.	

Required for applications subject to Expanded Public Participation Requirements.

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	):	DO NOT WRITE	IN THIS BLOCK
Mountaire Farms of Delware Inc.			TION NUMBER
Mailing Address		County No.	Premises No.
P.O. Box 1320		County No.	T Tellinges No.
Street Address			
MIllsboro Delaware	19966	1-2	3-6
City State	Zip	Registration Class	Equipment No.
Telephone Number			
(302 ) 841-4629		7 Data Year	8-11
2:		Data Teal	
Signature			
Mally Holen	_	12-13	Application Date
Phillip Plylar - President		F-22-21	
Print Name and Title	· · · · · · · · · · · · · · · · · · ·	5-22-24 Date	2
1B. Equipment Location and Telephone I 14209 Old Wye Mills Road	Number (if different fro		
Street Number and Street Name			
Wye Mills Marylan	11 11 11 11 11		841-4629
City/Town State	Z	Zip Telep	hone Number
Mountaire Farms of Delaware Inc Wy	ye Mills Grain Facility		
Premises Name (if different from above)			
3. Status (A= New, B= Modification to Eximate New Construction Begun (MM/YY)  C 15 16-19	New Construction Completed (MM/Y)	Existin Operation	g Initial n (MM/YY) 0-23
4. Describe this Equipment: Make, Model, Gravity grain loadouts	Features, Manufacturer	(include Maximum Ho	urly Input Rate, etc.)
5. Workmen's Compensation Coverage	See attached.		
	Binder/Policy Number		Expiration Date
Company			
6A. Number of Pieces of Identical Equipm	nent Units to be Regis	tered/Permitted at th	is Time <u>12</u>
6B. Number of Stack/Emission Points As	sociated with this Equ	ıipment <u>12</u>	

7. Person Installing this Equipment (if different from Number 1 on Page 1)  NameTitle
Company
Mailing Address/Street
City/TownStateTelephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber  24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other    X   Describe   Mineral oil applied to all grains received. Dust sock attached to the loadout. Dust socks attached to all load out points.  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  26-31 32-33 34 35-41 42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE % 46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year  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%)  76 77-78 79-80 81-82 83-84

Page 2 of 4
Recycled Paper

12. Equivalent Stack Innformation- is Exhaust through Doors, Windows, etc. Only? (Y/N)						
					85	J
If not, then	Height Avove Groun	d (FT) Inside Diameter at	Top Exit Tem	perature (°F)	Exit Velocity (	ET/SEC)
					<u> </u>	
			] [			
	86-88	89-91	9	2-95	96-98	3
		NOTE		-		
Attach a bloo	ck diagram of pro	cess/process line, indi	cating new equ	ipment as i	reported on this	s form
<u> </u>	and all existing e	quipment, including co	entrol devices a	nd emissio	n points.	
13. Input Mater	rials (for this equ	ipment only)				
		sidered confidential?	(Y or N)			
l NA	AME	L CAS NO /IE ADDI ICADI E		<u>INPU</u>   UNITS	T RATE	LIMITO
1.	- NIC	CAS NO. (IF APPLICABLE	) PER HOUR	UNITS	PER YEAR	UNITS
2.	<u>-</u> .					
3.						
4. 5.						
6.						1
7.						
8.						
9.						
TOTAL						
14. Output Mat	terials (for this ed	juipment)	<del></del>			
	roduct Stream					
l NA	AME i	CAS NO. (IF APPLICABLE	)   PER HOUR	UNITS	PER YEAR	UNITS
1.	NIFILE.	OAO NO. (II AI I LIOADEE	, renoun	Ottito	1 EIV I EAIV	00
2.						
3.						
4. 5.						
6.						
7.						
8.						
9. TOTAL						
IOIAL			·			
15. Waste Strea	ams- Solid and L	iquid				
	NAME I	CACNO /IE ADDI ICADI E	\   BED HOUR	OUTE UNITS	PER YEAR	UNITS
1. NA	\ME	CAS NO. (IF APPLICABLE	PER HOUR	UNITS	PERTEAR	0.41.3
2.	-					
3.						
4.				<del>                                     </del>		1
5. 6.						1
7.				<b></b>		1
8.						
9.						
TOTAL						

16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day	
Particulate Matter Oxides of Sulfur Oxides of Nitrogen	
See attached air emmissions	
99-104 105-110 111-116	
Carbon Monoxide Volatile Organic Compounds PM-10	
177-122 123-128 129-134	
17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day	
Particulate Matter Oxides of Sulfur Oxides of Nitrogen	
See attached air emmissions 140-144 145-149	
Carbon Monoxide Volatile Organic Compounds PM-10	
150-154 155-159 160-164	
Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)	
TSP SOX NOX CO VOC PM10	
165 166 167 168 169 170	200
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 Reviewed by State	
DateBy DateBy	h
19. Inventory Date Month/Year Equipment Code SCC Code	
20. Annual Maximum Design Permit to Operate Transaction Date	-
Operating Rate Hourly Rate Month (MM/DD/YR)	
186-192 193-199 200-201 202-207	
Staff Code VOC Code SIP Code Regulation Code Confidentiality	٦
208-210 211 212 213 214 215-218 219	
Point Description Action	

Form Number: 5

Rev. 9/27/2002 TTY Users 1-800-735-2258



# 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 Wye Mills Grain Facility
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountaire.com
DES	CRIPTION OF EQUIPMENT OR PROCESS
	Grain Mechanical Load-outs

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.

$\bowtie$	Application package cover letter describing the proposed project		
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)		
	No.       1       Form 5       No.       NA       Form 11         No.       NA       Form 5T       No.       NA       Form 41         No.       NA       Form 5EP       No.       NA       Form 42         No.       NA       Form 6       No.       NA       Form 44         No.       NA       Form 10		
	Vendor/manufacturer specifications/guarantees		
$\boxtimes$	Evidence of Workman's Compensation Insurance		
$\boxtimes$	Process flow diagrams with emission points		
$\boxtimes$	Site plan including the location of the proposed source and property boundary		
$\boxtimes$	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 $^{(2)}$		
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.		
	(2) Required for applications subject to Expanded Public Participation Requirements.		

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 Up	date ☐ Initial Registration ☐
1A. Owner of Equipment/Company Name Mountaie Farms of Delaware Inc.	DO NOT WRITE IN THIS BLOCK  2. REGISTRATION NUMBER
Mailing Address P.O. Box 1320 Street Address	County No. Premises No.
MIllsboro Delaware 19966 City State Zip	1-2 3-6 Registration Class Equipment No.
Telephone Number (_302) _841-4629	7 B-11 Data Year
Signature William Walden	12-13 Application Date
Phillip Plylar - President	5-22-24
Print Name and Title	Date
1B. Equipment Location and Telephone Number (if diff 14209 Old Wye Mills Road	erent from above)
Street Number and Street Name	
14209 Old Wye Mills Road	
City/Town State	Zip Telephone Number
Mountaire Farms of Delaware Inc Wye Mills Grain F Premises Name (if different from above)	acility
3. Status (A= New, B= Modification to Existing Equipment New Construction New Construction Status Begun (MM/YY) Completed  C 15 16-19 20-	etruction Existing Initial (MM/YY) Operation (MM/YY)
4. Describe this Equipment: Make, Model, Features, Manu Mechanical Grain Loadouts (Leg 5, 6, 4, 2,3, Shipping Container	
5. Workmen's Compensation Coverage See attached.	
Binder/Policy Nun Company	nber Expiration Date
NOTE: Before a Permit to Construct may be issued by the Departme worker's compensation coverage as required under Sec	
6A. Number of Pieces of Identical Equipment Units to b	e Registered/Permitted at this Time 9
6B. Number of Stack/Emission Points Associated with	his Equipment <sup>9</sup>

7. Person Installing this Equipment (if different from Number 1 on Page 1)  Name
Company
Mailing Address/Street
City/TownStateTelephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None
24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry
Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber
24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
X Describe Mineral oil applied to all grains recevied. Dust sock attached to the loadout.
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
OIL-1000 GALLONS SULFUR % GRADE NATURAL GAS-1000 FT <sup>3</sup> LP GAS-100 GALLONS GRADE
26-31 32-33 34 35-41 42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE %
46-52 53-55 56-58 59-63 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
12 Coke 22 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
Continuous Operation Batch Flocess Flours per Batch Batch Per Week Flours per Days Fer Week Days per Fear
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%)
76 77-78 79-80 81-82 83-84

Form Number: 5 Rev. 9/27/2002

12. Equivalent Stack Innformation- is Exhaust through Doors, Windows, etc. Only? (Y/N)					
				LJ 85	
If not, then Height Avove Gro	und (FT) Inside Diameter at To	op Exit Temper	rature (°F)	Exit Velocity (F	T/SEC)
66-88	J	92-9		96-98	
30-00		92-3		90-90	
Attach a block diagram of p	NOTE:	ating now oquin	mont oc	onartad on this	form
	equipment, including conf				IOIIII
13. Input Materials (for this ed	uipment only)				
Is any of this data to be co		(Y or N)			
				TRATE	
NAME 1.	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
2.					
3.					
4.					
5. 6.					
7.					
8.	<del>- </del>				
9.					
TOTAL					
14. Output Materials (for this	equinment)				
Process/Product Stream	equipment)				
		•		UT RATE	
1. NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
2.					
3.					
4.					
5.					
6. 7.					
8.					
9.					
TOTAL	1				
15. Waste Streams - Solid and	Liquid				
	-			UT RATE	
NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.					
3.					
4.					
5.		_			
6.					
7. 8.			<b></b>		
9.					
TOTAL			<u> </u>		

16. Total Stack Emissions (for this	s equipment only) in Pounds	s Per Operating Day
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen
See attached air emmissions		
99-104	105-110	111-116
Carbon Monoxide	Volatile Organic Compounds	PM-10
177-122	123-128	129-134
17. Total Fugitive Emissions (for t	his equipment only) in Poun	nds Per Operating Day
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen
See attached air emmissions	140-144	145-149
Carbon Monoxide	Volatile Organic Compounds	PM-10
150-154	155-159	160-164
Method Used to Determine Emissi	ions (1= Estimate 2= E	mission Factor 3= Stack Test 4= Other)
TSP SOX	NOX CO	VOC PM10
165 166	167 168	169 170
AIR AND RADIA	TION MANAGEMENT ADMIN	IISTRATION USE ONLY
18. Date Rec'd. Local Date		turn to Local Jurisdiction
Reviewed by Local Jurisdic	ction Reviewe	ed by State
19. Inventory Date Month/Y	ear Equipment Code	SCC Code
171-1	74 175-177	178-185
20. Annual	Maximum Design Per	mit to Operate I ransaction Date
Operating Rate	Hourly Rate	Month (MM/DD/YR)
186-192	193-199	200-201 202-207
Staff Code VOC Code	SIP Code Regul	ation Code Confidentiality
208-210 211 212		
200-210 211 212	213 214 2	215-218 219
	213 214 2 t Description	Action

Form Number: 5

Rev. 9/27/2002 TTY Users 1-800-735-2258



### AIR QUALITY PERMIT TO CONSTRUCT **APPLICATION CHECKLIST**

	OWNER OF EQUIPMENT/PROCESS
COMPANY NAME:	Mountaire Farms of Delware Inc.
COMPANY ADDRESS:	29106 John J Williams Highway, Millsboro, Delaware, 19966
	LOCATION OF EQUIPMENT/PROCESS
PREMISES NAME:	Mountaire Farms of Delaware Inc Wye Mills Grain Facility
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountaire.com
DES	CRIPTION 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.

$\boxtimes$	Application package cover letter describing the proposed project		
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)		
	No. NA Form 5 No. NA Form 5EP No. NA Form 6 No. NA Form 10	No. NA Form 11 No. NA Form 41 No. NA Form 42 No. NA Form 44	
	Vendor/manufacturer specifications/guaran	tees	
$\boxtimes$	Evidence of Workman's Compensation Ins	urance	
$\boxtimes$	Process flow diagrams with emission points	S	
$\boxtimes$	Site plan including the location of the proposed source and property boundary		
$\boxtimes$	Material balance data and all emissions ca	lculations	
	Material Safety Data Sheets (MSDS) or eq processed and manufactured.	uivalent information for materials	
	Certificate of Public Convenience and Nece from the Public Service Commission (1)	essity (CPCN) waiver documentation	
	Documentation that the proposed installation complies with local zoning and land use requirements (2)		
	(1) Required for emergency and non-emer October 1, 2001 and rated at 2001 kW or mo		
	(2) Paguired for applications subject to Eve	panded Public Participation Requirements	

Required for applications subject to Expanded Public Participation Requirements.

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

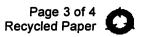
### APPLICATION FOR PROCESSING/MANUFACTURING EQUIPMENT

Permit to Construct	Registration Update	Initial Registratio	n 🖵
1A. Owner of Equipment/Company Name Mountaire Farms of Delaware Inc.	е		IN THIS BLOCK TION NUMBER
Mailing Address P.O. Box 1320		County No.	Premises No.
Street Address			
MIllsboro Delaware	19966	1-2	3-6
City State	Zip	Registration Class	Equipment No.
Telephone Number			
(302 ) 841-4629		7	8-11
002		Data Year	
Signature			
11/100001		10.10	Application Date
4 Milles Char		12-13	Application Date
Phillip Plylar - President		5- 22 - 24 Date	
Print Name and Title		Date	
1B. Equipment Location and Telephone	Number (if different fro	om above)	
14209 Old Wye Mills Road	Training (in amorone in	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Street Number and Street Name			
Wye Mills Maryla	nd 216	679 (302)	841-4629
City/Town State			none Number
		ip relept	ione ivamber
Mountaire Farms of Delaware Inc W	ye Mills Grain Facility		
Premises Name (if different from above)			
3. Status (A= New, B= Modification to Ex	risting Equipment C= F	Existing Equipment)	
New Construction	New Construction	Existing	nitial
Status Begun (MM/YY)	Completed (MM/YY		
		1 it	
C	20-23		<u> </u> )-23
10-19	20-23	20	7-25
4. Describe this Equipment: Make, Model	, Features, Manufacturer	(include Maximum Hou	ırly Input Rate, etc.)
Overhead Grain Transfer Drags			
F. Manharania Camananatian Camanana	See attached.		
5. Workmen's Compensation Coverage_	Binder/Policy Number		Expiration Date
Company			
NOTE: Before a Permit to Construct may be issu worker's compensation coverage as			
worker's compensation coverage as	required under Section 1-202	of the vvolker's Compensa	MOIT ACL.
6A. Number of Pieces of Identical Equip	ment Units to be Regist	tered/Permitted at thi	s Time 18
6B. Number of Stack/Emission Points As	ssociated with this Equ	ipment None, totally	enciosea.

7. Person Installing this Equipment (if different from Number 1 on Page 1)  NameTitle
Company
Mailing Address/Street
City/Town State Telephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None
24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry
Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber
24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
Describe Mineral oil applied to all grains recevied.
40. A moved Fixed Consumption for this Fixed many
10. Annual Fuel Consumption for this Equipment OIL-1000 GALLONS SULFUR % GRADE NATURAL GAS-1000 FT <sup>3</sup> LP GAS-100 GALLONS GRADE
OIL-1000 GALLONS SULFUR % GRADE NATURAL GAS-1000 FT <sup>3</sup> LP GAS-100 GALLONS GRADE
26-31 32-33 34 35-41 42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE %
46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year
67-1 67-2 68-69 70-71 72 73-75
Seasonal Variation in Operation: No <u>Varia</u> tion Winter Percent Spring Percent Summer Percent Fall Percent (Total Seasons= 100%)
76 77-78 79-80 81-82 83-84

Form Number: 5 Rev. 9/27/2002

12. Equivalent Stack Innformation- is Exhaust through Doors, Windows, etc. Only? (Y/N)						
					 85	
If not, then	Height Avove Grour	nd (FT) Inside Diameter at To	p Exit Temper	ature (°F)	Exit Velocity (F	T/SEC)
ii iiot, tiicii	Theight Avove Groun				Exit Velocity (I	
	86-88	89-91	92-9	95	96-98	
		NOTE:			<del></del>	
Attach a bl	ock diagram of pre	ocess/process line, indica	atina new equip	ment as ı	eported on this	form
		equipment, including conf				
40.4						
	terials (for this equ	ipment only) isidered confidential?	(Y or N)			
is ally of	uns data to be cor	isidered confidential?	(1 01 14)	INPU	T RATE	
1	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.						
2.						
3.						
4.						
5. 6.		****				
7.						
8.						
9.						
TOTAL		<b></b>				
	aterials (for this e	quipment)				
Process	/Product Stream			OUT	DUT DATE	
1	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PUT RATE PER YEAR	UNITS
1.		( ) ( )				
2.						
3.						
4.						
5.						
7.						
8.	<del></del>					
9.						
TOTAL						
	<u> </u>					
15. Waste Str	eams-Solid and L	iquid		OUT	NIT DATE	
	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PUT RATE PER YEAR	UNITS
<b>.</b> 1.	NAME .	OAO NO. (II AI I LIOADEL)	TENTIOON	011110	TENTEAN	011110
2.						
3.						
4.						
5.						
6.						
<b>8</b> .						
9.						
TOTAL						<u> </u>
IVIAL					·	



16. Total Stack Emissions (for this equipment only) in Pounds Per Operating Day	
Particulate Matter Oxides of Sulfur Oxides of Nitrogen	
See attached air emmissions	
99-104 105-110 111-116	
Carbon Monoxide Volatile Organic Compounds PM-10	
177-122 123-128 129-134	
17. Total Fugitive Emissions (for this equipment only) in Pounds Per Operating Day	
Particulate Matter Oxides of Sulfur Oxides of Nitrogen	
See attached air emmissions 140-144 145-149	
Carbon Monoxide Volatile Organic Compounds PM-10	
150-154 155-159 160-164	
Method Used to Determine Emissions (1= Estimate 2= Emission Factor 3= Stack Test 4= Other)	)
TSP SOX NOX CO VOC PM10	
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 Reviewed by State  DateByBy	-
19. Inventory Date Month/Year Equipment Code SCC Code	
171-174 175-177 178-185	
20. Annual Maximum Design Permit to Operate Transaction Date	
Operating Rate Hourly Rate Month (MM/DD/YR)	Ì
186-192 193-199 200-201 202-207	
Staff Code VOC Code SIP Code Regulation Code Confidentiality	
Staff Code VOC Code SIP Code Regulation Code Confidentiality	

Page 4 of 4 Recycled Paper



(2)

# 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 - Wye Mills Grain Facility	
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679	
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		
	Truck Receiving Pits 1 and 2 (750 bushel capacity)	

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.

$\boxtimes$	Application package cover letter describing the proposed project
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)
	No.         NA         Form 5         No.         NA         Form 11           No.         NA         Form 5T         No.         NA         Form 41           No.         NA         Form 5EP         No.         NA         Form 42           No.         NA         Form 6         No.         NA         Form 44           No.         NA         Form 10
	Vendor/manufacturer specifications/guarantees
$\boxtimes$	Evidence of Workman's Compensation Insurance
$\boxtimes$	Process flow diagrams with emission points
$\boxtimes$	Site plan including the location of the proposed source and property boundary
$\boxtimes$	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 $^{\rm (2)}$
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

Required for applications subject to Expanded Public Participation Requirements.

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 F	PROCESSING/	MANUF	<b>ACTURING EQUIPMENT</b>
Permit to Construct	Registration	Undate □	Initial Registration

Terrine to construct a	Registration opulate a	mittal Registration d
1A. Owner of Equipment/Company Name	•	DO NOT WRITE IN THIS BLOCK
Mountaire Farms of Delaware Inc Wye M	ills Grain Facility	2. REGISTRATION NUMBER
Mailing Address		County No. Premises No.
P.O. Box 1320		
Street Address	40000	1-2 3-6
MIllsboro Delaware City State	19966 Zip	Registration Class Equipment No.
	Zip	regionale in Charles Equipment (1)
Telephone Number		7 8-11
(302 ) 841-4629		Data Year
Signature		
		Anglication Pote
- I mille Whelen		12-13 Application Date
Phillip Plylar - President		F-22-24
Print Name and Title		5-22-24 Date
1B. Equipment Location and Telephone	Number (if different f	rom above)
14209 Old Wye Mills Road Street Number and Street Name		
Wye Mills Marylar	nd 2	1679 (302) 841-4629
City/Town State		Zip Telephone Number
Mountaire Farms of Delaware Inc Wy	ye Mills Grain Facility	
Premises Name (if different from above)		
3. Status (A= New, B= Modification to Ex	isting Equipment, C=	Existing Equipment)
New Construction	New Constructio	
Status Begun (MM/YY)	Completed (MM/Y	Y) Operation (MM/YY)
15 16-19	20-23	20-23
4. Describe this Equipment: Make, Model, Grain Truck Receiving Pits - 750 bushel capacit		er (include Maximum Hourly Input Rate, etc.)
Claim Track ( Cooking ) to pacific suppose	•	
5. Workmen's Compensation Coverage_	See attached.	<u> </u>
Company	Binder/Policy Number	Expiration Date
NOTE: Before a Permit to Construct may be issue	ed by the Department, the a required under Section 1-2	pplicant must provide the Department with proof of 02 of the Worker's Compensation Act.
6A. Number of Pieces of Identical Equipm	nent Units to be Regi	stered/Permitted at this Time 2
6B. Number of Stack/Emission Points As	sociated with this Ed	quipment <u>∠</u>

7. Person Installing this Equipment (if different from Number 1 on Page 1)  Name
Company
Mailing Address/Street
City/TownStateTelephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None  24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber  24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
X Describe Dust control by Wings Baffle System
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  26-31 32-33 34 35-41 42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE % 46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year
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%)  76 77-78 79-80 81-82 83-84

12. Equivalent Stack Innformation- is Exhaust through Doors, Windows, etc. Only? (Y/N)						
If not, then	Height Avove Grour	nd (FT) Inside Diameter at To	op Exit Tempe	rature (°F)	Exit Velocity (F	ET/SEC)
					ZAR VOICORY (I	7,020,
i.	86-88	89-91	92-	95	96-98	
		NOTE:				
Attach a bi	ock diagram of pro	ocess/process line, indica	ating new equip	ment as i	reported on this	form
	and all existing e	equipment, including conf	trol devices and	l emissio	n points.	
12 Innut Mot	torials (for this say	inment only)				
	terials (for this equ this data to be cor	nsidered confidential?	(Y or N)			
				INPU	T RATE	
	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
2.						<u> </u>
3.	<del> </del>					<u> </u>
4.						<u> </u>
5.						
6.						
7.						
8.					<del></del>	
9. TOTAL				<u> </u>		
IOIAL						
	aterials (for this e	quipment)				
Process/	/Product Stream					
1 .	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTF UNITS	PUT RATE PER YEAR	UNITS
1.	IVAIIL	OAO NO. (II ATTEIOADEE)	TENTIOON	Olulo	TENTERIN	0.0.0
2.						
3.						
4.						
5. 6.		-				
7.						
8.			•			
9.						
TOTAL			<u> </u>			
45 Wests Streems, Solid and Liquid						
15. Waste Streams- Solid and Liquid OUTPUT RATE						
[	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.						
2.			-	<u> </u>		
3.						
5.						
6.						
7.						
8.						
9.		<u> </u>		<u> </u>		L
TOTAL						

, , , , , , , , , , , , , , , , , , , ,	oquipmont omy, mir ound	s Per Operating Day	
Particulate Matter	Oxides of Sulfur	Oxides of Nitro	gen
See attached air emmissions			
99-104	105-110	111-116	
Carbon Monoxide	Volatile Organic Compounds	PM-10	
177-122	123-128	129-134	
17. Total Fugitive Emissions (for th	is equipment only) in Pou	nds Per Operating Day	
Particulate Matter	Oxides of Sulfur	Oxides of Nitro	gen
See attached air emmissions	140-144	145-149	
Carbon Monoxide	Volatile Organic Compounds	PM-10	
Carbon Monoxide	Volatile Organic Compounds	FIVETO	
150-154	155-159	160-164	
Method Used to Determine Emission	ons (1= Estimate 2=	Emission Factor 3= St	ack Test 4= Other)
TSP SOX	NOX CO	VOC PM10	·
			ĵ
165 166	167 168	169 170	
	167 168  ION MANAGEMENT ADMI		
AIR AND RADIAT	ION MANAGEMENT ADMI	NISTRATION USE ONL	.Y cion
AIR AND RADIAT	ION MANAGEMENT ADMI	NISTRATION USE ONL	.Y cion
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdict	ION MANAGEMENT ADMI Rec'd. State Re Da ion Review	eturn to Local JurisdicteByed by State	ion
AIR AND RADIAT  18. Date Rec'd. Local Date F  Reviewed by Local Jurisdict  Date By	ION MANAGEMENT ADMI  Rec'd. State Re  Da  ion Review  Date Date	eturn to Local JurisdicteByed by State	ion
AIR AND RADIAT  18. Date Rec'd. Local Date F  Reviewed by Local Jurisdict Date By	ION MANAGEMENT ADMI  Rec'd. State Re  Da  ion Review  Date Date	eturn to Local JurisdicteByed by State	ion
AIR AND RADIAT  18. Date Rec'd. Local Date F  Reviewed by Local Jurisdict Date By  19. Inventory Date Month/Ye	ION MANAGEMENT ADMI  Rec'd. State  Da  ion  Review  Date  ear  Equipment Code	eturn to Local JurisdicteByed by State	de
AIR AND RADIAT  18. Date Rec'd. Local Date F  Reviewed by Local Jurisdict  Date By	ION MANAGEMENT ADMI  Rec'd. State  Da  ion  Review Date  Par  Equipment Code  4 175-177	eturn to Local JurisdicteByed by State	de
AIR AND RADIAT  18. Date Rec'd. Local Date F  Reviewed by Local Jurisdict Date By  19. Inventory Date Month/Ye	Rec'd. State Rec'd. State Rec'd. State Rec'd. State Da  ion Review Date Par Equipment Code 175-177	eturn to Local JurisdicteByed by StateBye SCC Coc178-18	de
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdict By  19. Inventory Date Month/Ye  171-174	ion Review Date Equipment Code 175-177  Maximum Design Pe	eturn to Local Jurisdicte By By State SCC Coc	de Sansaction Date
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdict By  19. Inventory Date Month/Ye  171-174	ion Review Date Equipment Code 175-177  Maximum Design Pe	eturn to Local Jurisdicte By By State SCC Coc	de Sansaction Date
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdict By  19. Inventory Date Month/Ye  171-174  20. Annual Operating Rate	ion Review Date Par Equipment Code 175-177 Maximum Design Hourly Rate 193-199	eturn to Local JurisdicteByed by State  SCC Coc  178-18  Prmit to Operate  Month  200-201	de de ansaction Date (MM/DD/YR)
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdict By  19. Inventory Date Month/Ye  171-174  20. Annual Operating Rate	ion Review Date Par Equipment Code 175-177 Maximum Design Hourly Rate 193-199	eturn to Local JurisdicteByed by State  SCC Coc  178-18  Prmit to Operate  Month  200-201	de de (MM/DD/YR) 202-207
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdict By  19. Inventory Date Month/Ye  171-174  20. Annual Operating Rate	ion Review Date Par Equipment Code 175-177 Maximum Design Hourly Rate 193-199	eturn to Local JurisdicteByed by State  SCC Coc  178-18  Prmit to Operate  Month  200-201	de de (MM/DD/YR) 202-207
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdict By  19. Inventory Date Month/Ye  20. Annual Operating Rate  Staff Code VOC Code  208-210 211 212	ion Review Date 175-177  Maximum Design Hourly Rate 193-199  SIP Code Regularity Regular	eturn to Local Jurisdicte By ed by State SCC Coc  178-18 ermit to Operate Ir  Month 200-201	de ansaction Date (MM/DD/YR) 202-207 onfidentiality
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdict By  19. Inventory Date Month/Ye  20. Annual Operating Rate  Staff Code VOC Code  208-210 211 212	ion Review Date Poar Equipment Code Hourly Rate Poar Hourly Rate Poar Hourly Rate Poar Regulation Regulation Poar Regulation Regulat	eturn to Local Jurisdicte By ed by State SCC Coc  178-18 ermit to Operate Ir  Month 200-201	de de (MM/DD/YR) 202-207 Infidentiality

Page 4 of 4 Recycled Paper



### 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 Wye Mills Grain Facility	
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679	
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		
Tube Transfer / Load Out 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.

$\boxtimes$	Application package cover letter describing the proposed project		
$\boxtimes$	Comp application	lete application forms (Note the numbable.)	per of forms included or NA if not
	No.	NA Form 5T  NA Form 5EP  NA Form 6	No. NA Form 11 No. NA Form 41 No. NA Form 42 No. NA Form 44
	Vendo	or/manufacturer specifications/guaran	tees
$\boxtimes$	Evider	nce of Workman's Compensation Ins	urance
$\boxtimes$	Process flow diagrams with emission points		
$\boxtimes$	Site pl	lan including the location of the propo	sed source and property boundary
$\boxtimes$	Materi	al balance data and all emissions ca	culations
		ial Safety Data Sheets (MSDS) or equipment and manufactured.	uivalent information for materials
	Certificate of Public Convenience and Necessity (CPCN) waiver documentation from the Public Service Commission (1)		
	Documentation that the proposed installation complies with local zoning and land use requirements (2)		
	(1) Octo	Required for emergency and non-emer ber 1, 2001 and rated at 2001 kW or mo	
	(2)	Deguired for applications subject to Ev	anded Public Participation Pequirements

Required for applications subject to Expanded Public Participation Requirements.

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/	MANUFAC'	TURING EQUI	PMENT
Permit to Construct	Registration	Update □	Initial Registration	on 🗆

	Trogrammen opunit =		
1A. Owner of Equipment/Company Na	DO NOT WRITE IN THIS BLOCK		
Mountaire Farms of Delaware Inc Wye	Mills Grain Facility	2. REGISTRA	TION NUMBER
Mailing Address		County No.	Premises No.
P.O. Box 1320			11011110001101
Street Address			
Millsboro Delaware	19966	1-2 Registration Class	3-6 Equipment No.
City State	Zip	Registration class	Lquipinent No.
Telephone Number			
(302 ) 841-4629		Data Year	8-11
		Data Teal	
Signature	7		
White Who	-	12-13	Application Date
7 7			
Phillip Plylar - President		5-22-24 Date	<u></u>
Print Name and Title		Date	
1B. Equipment Location and Telephor	ne Number (if different f	rom above)	
14209 Old Wye Mills Road	io itamion (ii amorone)	rom abovo,	
Street Number and Street Name			
Wye Mills Mary	rland 2 <sup>-</sup>	1679 (302 )	841-4629
City/Town State			phone Number
Mountaire Farms of Delaware Inc	Wye Mills Grain Facility		
Premises Name (if different from above)	vvyc Willis Crail i acility		
3. Status (A= New, B= Modification to			
New Construction Status Begun (MM/YY)	New Construction Completed (MM/Y		ng Initial n (MM/YY)
Ctatus Beguir (WW/11)			
15 16-19	20-23	2	0-23
4. Describe this Equipment: Make, Mod	del, Features, Manufacture	er (include Maximum Ho	urly Input Rate, etc.)
Facility tube transfer/loadout screws			
5. Workmen's Compensation Coverag	See attached air emn	missions	
5. Workmen's Compensation Coverag	Binder/Policy Number		Expiration Date
Company			
NOTE: Before a Permit to Construct may be is worker's compensation coverage			
6A. Number of Pieces of Identical Equ	ipment Units to be Regi	stered/Permitted at th	nis Time_See attached EA.
6B. Number of Stack/Emission Points	Accordated with this E-	uipmont No. 1 1	

7. Person Installing this Equipment (if different from Number 1 on Page 1)  NameTitle
Company
Mailing Address/Street
City/TownStateTelephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None  24-0
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry Scrubber  Cyclone Tower Scrubber Adsorber Precipitator
Other
Describe Mineral oil applied to all grains recevied. Dust socks at all loadout points.
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  26-31 32-33 34 35-41 42-45
COAL-TONS SULFUR % ASH% WOOD-TONS MOISTURE % 46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year  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%)  76 77-78 79-80 81-82 83-84

12. Equivaler	nt Stack Innformat	tion- is Exh	aust through D	oors, Windows	s, etc. On	ly? (Y/N)	
						<u> </u>	
If not, then	Height Avove Grou	nd (FT) In:	side Diameter at To	p Exit Tempe	rature (°F)	Exit Velocity (I	FT/SEC)
		, ,					
	86-88		89-91	92-	95	96-98	
			NOTE:				
Attach a bl	ock diagram of pr		ess line, indica				form
	and all existing of	equipment,	including conf	trol devices and	ł emissio	n points.	
13 Innut Mat	erials (for this equ	uinment on	v)				
Is any of	this data to be co	nsidered co	onfidential?	(Y or N)			
					INPU	T RATE	
	NAME	CAS NO. (I	F APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1. 2.							
3.							
4.							
5.							
6.							
7.							
8. 9.		-					
TOTAL		l			<u> </u>		
	aterials (for this e	quipment)					
Process/	Product Stream				OUT	PUT RATE	
i i	NAME	CAS NO. (I	F APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.		,					
2.						-	
3.				<del> </del>	ļ <u>-</u>		
5.							
6.			_				
7.	** **						
8.							
9.							
TOTAL						· · · · · · · · · · · · · · · · · · ·	
15. Waste Str	eams- Solid and L	_iauid					
		-				PUT RATE	
	NAME	CAS NO. (I	F APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1. 2.							<u> </u>
3.							
4.							
5.							
6.							
7. 8.			-				
9.					<u> </u>		<del> </del>
TOTAL		l					L

	s equipment only) in Pound	s Per Operating Da	У
Particulate Matter See attached air emmissions	Oxides of Sulfur	Oxides of N	Nitrogen
99-104	105-110	111-	116
Carbon Monoxide	Volatile Organic Compounds	PM-	10
177-122	123-128	129-	134
17. Total Fugitive Emissions (for t	this equipment only) in Pour	nds Per Operating	Day
Particulate Matter 135-139	Oxides of Sulfur	Oxides of N	
Carbon Monoxide  150-154	Volatile Organic Compounds  155-159	PM-	
Method Used to Determine Emiss	ions (1= Estimate 2= I	Emission Factor 3	Stack Test 4= Other)
TSP SOX	NOX CO	VOC F	PM10
165 166	167 168		170
	167 168 TION MANAGEMENT ADMII		
AIR AND RADIA	TION MANAGEMENT ADMII	NISTRATION USE Of	DNLY
AIR AND RADIA	Rec'd. State Rection Reviewe	NISTRATION USE Of	DNLY
AIR AND RADIA  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic	Rec'd. State Rection Reviewed Date	turn to Local Jurise ed by State	DNLY
AIR AND RADIA  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic Date By	Rec'd. State Record. State Record. State Ction Reviewer Date Cear Equipment Code	eturn to Local Jurise By ed by State By e SCC	diction
AIR AND RADIA  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/N	Rec'd. State Rec'd. State Rec'd. State Ction Reviewe Date Tear Equipment Code Transport Transpor	eturn to Local Jurise  ed by State  By  SCC  178	Code  3-185 Transaction Date
AIR AND RADIA  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic Date By  19. Inventory Date Month/N	Rec'd. State Record. State Record. State Ction Reviewer Date Date Tear Equipment Code Transport	ed by State  SCC	Code
AIR AND RADIA  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/N	Rec'd. State Rec'd. State Rec'd. State Ction Reviewe Date Tear Equipment Code Transport Transpor	eturn to Local Jurise  ed by State  By  SCC  178	Code  3-185 Transaction Date
AIR AND RADIA  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic  Date By  19. Inventory Date Month/N  171-1  20. Annual Operating Rate	Rec'd. State Rec'd. State Rec'd. State Reviewe Date T4 T75-177 Maximum Design Hourly Rate 193-199	eturn to Local Juriste By By SCC SCC Month	Code  3-185 Transaction Date (MM/DD/YR)
AIR AND RADIA  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/Y  20. Annual Operating Rate	Rec'd. State Rec'd	ed by State  By  SCC  Trmit to Operate  Month	Code  3-185 Transaction Date (MM/DD/YR)  202-207
AIR AND RADIA  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/N  20. Annual Operating Rate  Staff Code VOC Code  208-210 211 212	Rec'd. State Rec'd	eturn to Local Jurise  ed by State  By  SCC  Trmit to Operate  Month  200-201	Code  3-185 Transaction Date (MM/DD/YR)  202-207  Confidentiality

Page 4 of 4 Recycled Paper



(2)

# 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 Wye Mills Grain Facility
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountairecom
DES	CRIPTION OF EQUIPMENT OR PROCESS
	Grain Turnheads 1/2/3/4/6

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.

$\boxtimes$	Application package cover letter describing the proposed project
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)
	No.       1       Form 5       No.       NA       Form 11         No.       NA       Form 5T       No.       NA       Form 41         No.       NA       Form 5EP       No.       NA       Form 42         No.       NA       Form 6       No.       NA       Form 44         No.       NA       Form 10
	Vendor/manufacturer specifications/guarantees
$\boxtimes$	Evidence of Workman's Compensation Insurance
$\boxtimes$	Process flow diagrams with emission points
$\boxtimes$	Site plan including the location of the proposed source and property boundary
$\boxtimes$	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 $^{(2)}$
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

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 I	PROCESSING/	MANUFAC	TURING I	EQUIPMENT
Permit to Construct	Registration	Update □	Initial Re	gistration 🗆

1A. Owner of Equipment/Company Name  Mountaire Farms of Delaware Inc Wye Mills Grain Facility					IN THIS BLOCK
Mountaire Farms of Delaware	Inc Wye Mills G	Frain Facility	2. R	EGISTRAT	TION NUMBER
Mailing Address			County	No	Premises No.
P.O. Box 1320			Country		Tronneco rec
Street Address					
	elaware	19966	1-2	. 01	3-6
City	State	Zip	Registrat	tion Class	Equipment No.
Telephone Number					
(302 ) 841-4629			7		8-11
002 ) 011 1020			— Data Y	ear	
Signature					
			12-1		Application Date
Mallorys	de			3	Application Date
Divilia Diday Daviday				2.21	
Phillip Plylar - President				2-2024	
Print Name and Title			Date		
1B. Equipment Location and	d Telephone Num	ber (if differer	t from above)		
14209 Old Wye Mills Roa	DEED TO THE SHARE SHOP IN COMMENT ASSOCIATION OF THE STATE OF THE SHARE A SOCIAL				
Street Number and Street Nam					
Wye Mills	Maryland		21679	(302)	841-4629
City/Town	State		Zip		none Number
Mountaire Farms of Dela		ilis Grain Facili	У		
Premises Name (if different from	n above)				
3. Status (A= New, B= Modif	ication to Existing	g Equipment,	C= Existing Eq	uipment)	
New Cor	nstruction	New Construc	tion	Existing	ı Initial
Status Begun (	MM/YY)	Completed (MI)	<u>///YY)</u>	Operation	(MM/YY)
c					
	<u>                                     </u>	20-23		20	)-23
4. Describe this Equipment:				ximum Hou	rly Input Rate, etc.)
Grain Turnheads - Direct grain th	roughout the facility	- (grain nandling	g equipment)		
5. Workmen's Compensation	Coverage See	e attached.			
c. Working a compensation		er/Policy Number		E	Expiration Date
Company NOTE: Before a Permit to Constr	rust may be issued by t	the Department th	o applicant must be	ravida tha Dar	partment with proof of
	tion coverage as requir				
					_
6A. Number of Pieces of Ide	ntical Failinment	Linite to be Pa	auctored/Dorm	utted at thi	s lime ∪
	intical Equipment	Office to be in	gisteredirenn	intica at tin	·
6B. Number of Stack/Emissi					

7. Person Installing this Equipment (if different from Number 1 on Page 1)  NameTitle
Company
Mailing Address/Street
City/TownStateTelephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None
Simple/Multiple Spray/Adsorb Venturi Carbon Electrostatic Baghouse Thermal/Catalytic Dry
Cyclone Tower Scrubber Adsorber Precipitator Afterburner Scrubber
24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
X Describe Mineral oil applied to all grains recevied.
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
26-31 32-33 34 35-41 42-45
COAL- TONS SULFUR % ASH% WOOD-TONS MOISTURE %
46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year
67-1 67-2 68-69 70-71 72 73-75
Seasonal Variation in Operation:  No <u>Variation</u> Winter Percent Spring Percent Summer Percent Fall Percent (Total Seasons= 100%)
76 77-78 79-80 81-82 83-84

12. Equivaler	nt Stack Innformat	ion- is Exhaust through D	oors, Windows	, etc. Onl	y? (Y/N)	
					85	
If not, then	Height Avove Groun	d (FT) Inside Diameter at To	p Exit Tempe	rature (°F)	Exit Velocity (F	T/SEC)
	86-88	89-91	92-	95	96-98	
		NOTE:				
Attach a blo		ocess/process line, indica				form
	and all existing e	quipment, including cont	rol devices and	l emissio	n points.	
12 Innut Mat	orials (for this one	inment only)				
	erials (for this equ	isidered confidential?	(Y or N)			
is any or t	ins data to be con			INPU	T RATE	
1	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.						
2.						
3.						
<b>4</b> . <b>5</b> .						
6.						
7.						
8.						
9.						
TOTAL						
	aterials (for this ed	quipment)				
Process/	Product Stream			OUTE	PUT RATE	
i	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.		•				
2.						
3.		-				
4.						
5. 6.						
7.						
8.						
9.						
TOTAL						
						<del> </del>
15. Waste Str	eams- Solid and L	iquid		OUT	PUT RATE	
i r	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS I	PER YEAR	UNITS
1.		ONO NO. (II ALL EIGHDEE)	· EK HOOK	00		<u> </u>
2.						
3.						
4.						
5.						
6. 7.				<b></b>		
8.				<u> </u>		
9.					_	
TOTAL				<u> </u>		· · · - —

16. Total Stack Emissions (fo	r this equipment only) in Pour	nds Per Operating Day	
Particulate Matter See attached air emmissio	Oxides of Sulfur	Oxides of Nitrogen	
99-104	105-110	111-116	
Carbon Monoxide	Volatile Organic Compounds		
177-122	123-128	129-134	
17. Total Fugitive Emissions (	(for this equipment only) in Po	ounds Per Operating Day	
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen	
See attached air emmiss			
135-139	140-144	145-149	
Carbon Monoxide	Volatile Organic Compounds	PM-10	
150-154	155-159	160-164	
Method Used to Determine En	nissions (1= Estimate 2:	= Emission Factor 3= Stack Test 4= Other	er)
TSP SOX	NOX CO	VOC PM10	
165 166	167 168	169 170	
	167 168 ADIATION MANAGEMENT ADM		
AIR AND RA	ADIATION MANAGEMENT ADM	MINISTRATION USE ONLY	
AIR AND RA	ADIATION MANAGEMENT ADM		
AIR AND RA	Date Rec'd. State	MINISTRATION USE ONLY  Return to Local Jurisdiction  DateBy	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jur	Date Rec'd. State	MINISTRATION USE ONLY  Return to Local Jurisdiction	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jury  DateBy	Date Rec'd. State	Return to Local Jurisdiction DateByewed by State	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jun  DateBy	Date Rec'd. State  isdiction  Revie	Return to Local Jurisdiction DateByewed by State	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jun  Date By  19. Inventory Date Mor	Date Rec'd. State  isdiction  Third Equipment Co	Return to Local Jurisdiction DateBy ewed by StateBy ode SCC Code178-185	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jur  Date By  19. Inventory Date More  20. Annual	Date Rec'd. State  isdiction  Revie Date Date  This is a state  This is a	Return to Local Jurisdiction DateBy ewed by StateBy ode SCC Code178-185 Permit to Operate Transaction Date	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jun  Date By  19. Inventory Date Mor	Date Rec'd. State  isdiction  Third Equipment Co	Return to Local Jurisdiction DateBy ewed by StateBy ode SCC Code178-185	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jur  Date By  19. Inventory Date More  20. Annual	Date Rec'd. State  isdiction  Revie Date Date  This is a state  This is a	Return to Local Jurisdiction DateBy ewed by StateBy ode SCC Code178-185 Permit to Operate Transaction Date	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jur  DateBy  19. Inventory Date Mor  20. Annual Operating Rate  186-192	Date Rec'd. State  isdiction  Revie Date Date  171-174  Francisco  171-174  Francisco  173-177  Maximum Design Hourly Rate  193-199	Return to Local Jurisdiction DateBy ewed by StateBy  Dide SCC Code178-185  Permit to Operate	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jur  DateBy  19. Inventory Date Mor  20. Annual Operating Rate	Date Rec'd. State  isdiction  Revie Date Date  171-174  Francisco  171-174  Francisco  173-177  Maximum Design Hourly Rate  193-199	Return to Local Jurisdiction DateBy  ewed by StateBy  ode SCC Code  178-185  Permit to Operate Iransaction Date Month (MM/DD/YR)	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jur  DateBy  19. Inventory Date Mor  20. Annual Operating Rate  186-192	Date Rec'd. State  isdiction  Revie Date Date  171-174  Francisco  171-174  Francisco  173-177  Maximum Design Hourly Rate  193-199	Return to Local Jurisdiction DateBy ewed by StateBy  Dide SCC Code178-185  Permit to Operate	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jurn By  19. Inventory Date  More Departing Rate  186-192  Staff Code  208-210  211  212	Date Rec'd. State  isdiction  Revie Date Date  Inth/Year  Equipment Co  171-174  Maximum Design  Hourly Rate  193-199  E SIP Code  213 214	Return to Local Jurisdiction DateBy  ewed by StateBy  ode SCC Code178-185  Permit to Operate Month (MM/DD/YR)	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jurn By  19. Inventory Date  More Departing Rate  186-192  Staff Code  208-210  211  212	Date Rec'd. State  isdiction  Revie Date Date  Inth/Year  Equipment Co  171-174  Maximum Design Hourly Rate  193-199  e SIP Code  Rec	Return to Local Jurisdiction DateBy  ewed by StateBy  ode SCC Code178-185  Permit to Operate Iransaction Date (MM/DD/YR)	
AIR AND RA  18. Date Rec'd. Local  Reviewed by Local Jurn By  19. Inventory Date  More Departing Rate  186-192  Staff Code  208-210  211  212	Date Rec'd. State  isdiction  Revie Date Date  Inth/Year  Equipment Co  171-174  Maximum Design  Hourly Rate  193-199  E SIP Code  213 214	Return to Local Jurisdiction DateBy  ewed by StateBy  ode SCC Code 178-185  Permit to Operate   Month (MM/DD/YR)	ge

Page 4 of 4 Recycled Paper



(2)

# 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 Delware Inc Wye Mills Grain Facility
PREMISES ADDRESS:	14209 John J Williams Highway, Wye Mills, Maryland, 21679
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION
CONTACT NAME:	Kyle McConnell
JOB TITLE:	Environmental Manager
PHONE NUMBER:	(302) 841-4629
EMAIL ADDRESS:	kmcconnell@mountaire.com
DES	CRIPTION OF EQUIPMENT OR PROCESS
We	et Tank Grain Storage Tanks, Wet Tank 1 - Wet Tank 6

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.

$\boxtimes$	Application package cover letter describing the proposed project
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)
	No.       1       Form 5       No.       NA       Form 11         No.       NA       Form 5T       No.       NA       Form 41         No.       NA       Form 5EP       No.       NA       Form 42         No.       NA       Form 6       No.       NA       Form 44         No.       NA       Form 10
	Vendor/manufacturer specifications/guarantees
$\boxtimes$	Evidence of Workman's Compensation Insurance
$\boxtimes$	Process flow diagrams with emission points
$\boxtimes$	Site plan including the location of the proposed source and property boundary
$\boxtimes$	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 $^{(2)}$
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.

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 PRO	OCESSING/MANUFAC	TURING EQUIPMENT
Permit to Construct	Registration Undate	Initial Registration □

Terrific to Construct	registration opuate a	Tilitial Registration 4
1A. Owner of Equipment/Company Name	)	DO NOT WRITE IN THIS BLOCK
Mountaire Farms of Delaware Inc Wye M	ills Grain Facility	2. REGISTRATION NUMBER
Mailing Address		County No. Premises No.
P.O. Box 1320		
Street Address	40000	
MIllsboro Delaware City State	19966 Zip	1-2 3-6 Registration Class Equipment No.
	Zip	The grant and the same and the
Telephone Number		7 044
(302 ) 841-4629		7 8-11 Data Year
Signature		
olynature // m // //		
Wheth the		12-13 Application Date
Dhillin Dhilar Dranidant		
Phillip Plylar - President Print Name and Title		5-2z-24 Date
Print Name and Title		Date
1B. Equipment Location and Telephone	Number (if different	from above)
14209 Old Wye Mills Road		
Street Number and Street Name		
Wye Mills Marylar	nd 2	1679 (302 )841-4629
City/Town State		Zip Telephone Number
Mountaire Farms of Delaware Inc W	ve Mills Grain Facility	
Premises Name (if different from above)	,	
0.04-4		F
3. Status (A= New, B= Modification to Ex New Construction	isting Equipment, C= New Construction	9 , , ,
Status Begun (MM/YY)	Completed (MM/	
Degan (VIIIVII 1 )		
C		
15 16-19	20-23	20-23
4. Describe this Equipment: Make, Model,	Features, Manufacture	er (include Maximum Hourly Input Rate, etc.)
See attached EA.		
5. Workmen's Compensation Coverage	See attached.	
o. Workings of inpensation of verage_	Binder/Policy Number	Expiration Date
Company	d by the Department the	applicant must provide the Department with proof of
		applicant must provide the Department with proof of 202 of the Worker's Compensation Act.
CA Number of Black - State at - 1		:
6A. Number of Pieces of Identical Equipment	nent Units to be Reg	istered/Permitted at this Time
6B. Number of Stack/Emission Points As	sociated with this Fo	guipment Bin vents
		1

7. Person Installing this Equipment (if different from Number 1 on Page 1)  Name
Company
Mailing Address/Street
City/TownStateTelephone ()
8. Major Activity, Product or Service of Company at this Location
Grain Elevator - receives, drys and ships all grains.
9. Control Devices Associated with this Equipment
None
24-0
Simple/Multiple Cyclone Tower Scrubber Adsorber Precipitator Baghouse Thermal/Catalytic Afterburner Scrubber  24-1 24-2 24-3 24-4 24-5 24-6 24-7 24-8
Other
X Describe Mineral oil applied to all grains recevied.
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
26-31 32-33 34 35-41 42-45
COAL-TONS SULFUR % ASH% WOOD-TONS MOISTURE % 46-52 53-55 56-58 59-63 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 Batch Process Hours per Batch Batch per Week Hours per Day Days Per Week Days per Year
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%)
76 77-78 79-80 81-82 83-84

12. Equivaler	nt Stack Innformat	ion- is Exhaust through D	oors, Windows	, etc. Onl	y? (Y/N)	
li.					L 85	
If not, then	Height Avove Grour	nd (FT) Inside Diameter at To	p Exit Tempe	rature (°F)	Exit Velocity (F	T/SEC)
	86-88	89-91 	92-9	<del></del>	96-98	
		NOTE:				_
Attach a bl		ocess/process line, indica				form
	and all existing e	equipment, including cont	roi devices and	emissioi	n points.	
13. Input Mat	erials (for this equ	ipment only)				
Is any of	this data to be cor	nsidered confidential?	(Y or N)			
1	NAME	L CAS NO. (IF APPLICABLE)	   PER HOUR	<u>INPU</u>   UNITS	T RATE PER YEAR	UNITS
1.	INAIRE	CAS NO. (IF AFFLICABLE)	PER HOOR	UNITS	PER IEAR	ORITS
2.						
3.						
4.						
5. 6.						
7.						
8.	_					
9.	-					
TOTAL						
14 Output M	aterials (for this e	muinment)				
	Product Stream	quipinonty				
					PUT RATE	
1.	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
2.						
3.						
4.						
5.						
6. 7.						
8.						
9.						
TOTAL						
45 Masta St	Calidand I	::-d				
15. Waste Str	eams- Solid and L	.iquia		OUTF	PUT RATE	
	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1.						
3.				<b></b>		-
4.						
5.						
6.						
7.						
9.						
TOTAL		<u> </u>				
IVIAL						

		Per Operating Day	
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen	
99-104	105-110	111-116	
Carbon Monoxide	Volatile Organic Compounds	PM-10	
177-122	123-128	129-134	
17. Total Fugitive Emissions (for the	nis equipment only) in Pound	ds Per Operating Day	
See attached air emmissions 135-139	Oxides of Sulfur	Oxides of Nitrogen  145-149	
Carbon Monoxide	Volatile Organic Compounds	PM-10	
150-154	155-159	160-164	
Method Used to Determine Emission	ons (1= Estimate 2= E	mission Factor 3= Stack Test 4= Othe	er)
TSP SOX	NOX CO	VOC PM10	
165 166	167 168	169 170	
AIR AND RADIAT	TION MANAGEMENT ADMIN	ISTRATION USE ONLY	
		urn to Local Jurisdiction	
Reviewed by Local Jurisdic	tion Reviewed		
Reviewed by Local Jurisdic	tion Reviewed  Date  Date	d by State	
Reviewed by Local Jurisdic DateBy	tion Reviewed Date  ear Equipment Code	ByByBySCC Code	
Reviewed by Local Jurisdic	tion Reviewed Date  Equipment Code  175-177	d by State	
Reviewed by Local Jurisdic DateBy	tion Reviewed Date  Equipment Code  175-177	ByByBySCC Code	
Reviewed by Local Jurisdic By	tion Reviewed Date  ear Equipment Code  74 175-177  Maximum Design Peri Hourly Rate	SCC Code  SCC Code  178-185  mit to Operate   Iransaction Date   Month   (MM/DD/YR)	
Reviewed by Local Jurisdic By	tion Reviewed Date  ear Equipment Code  74 175-177  Maximum Design Peri Hourly Rate  193-199	SCC Code  SCC Code  178-185  mit to Operate I ransaction Date  Month (MM/DD/YR)  200-201 202-207	
Reviewed by Local Jurisdic By	ear Equipment Code    175-177   Maximum Design Periods   193-199     SIP Code Regularity   Rate   193-199     SIP Code Regularity   Rate   193-199     Code Reg	SCC Code  SCC Code  178-185  mit to Operate   Iransaction Date   Month   (MM/DD/YR)	
Reviewed by Local Jurisdic By	ear Equipment Code    175-177   Maximum Design Periods   193-199     SIP Code Regularity   Rate   193-199     SIP Code Regularity   Rate   193-199     Code Reg	SCC Code  SCC Code  178-185  mit to Operate I ransaction Date (MM/DD/YR)  200-201 202-207  ation Code Confidentiality	



(2)

# 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 - Wye Mills Grain Facility		
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679		
CONTACT	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			
1.2 million bushel grain pile 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.

$\boxtimes$	Application package cover letter describing the proposed project		
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)		
	No.       1       Form 5       No.       N/A       Form 11         No.       N/A       Form 5T       No.       N/A       Form 41         No.       N/A       Form 5EP       No.       N/A       Form 42         No.       N/A       Form 6       No.       N/A       Form 44         No.       N/A       Form 10		
	Vendor/manufacturer specifications/guarantees		
$\boxtimes$	Evidence of Workman's Compensation Insurance		
$\boxtimes$	Process flow diagrams with emission points		
$\boxtimes$	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 (2)		
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.		

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		DO NOT WRIT	E IN THIS BLOCK
Mountaire Farms of Delaware Inc.			ATION NUMBER
Mailing Address			
P.O. Box 1320		County No.	Premises No.
Street Address			
MIllsboro Delaware	19966	1-2	3-6
City State	Zip	Registration Class	s Equipment No.
Telephone Number			
(302 ) 841-4629		7	8-11
(502 ) 511 1525		Data Year	
Signature /			
		12-13	Application Date
- Thilly The		12,0	принашен выс
Phillip Plylar - President		5-27-24	
Print Name and Title		5 - 22 - 24 Date	
1B. Equipment Location and Telephone I 14209 Old Wye Mills Road Street Number and Street Name	Number (if different fr	om above)	
Wye Mills Marylan	nd 21	679 (302 <sub>)</sub>	841-4629
City/Town State			phone Number
•			
Mountaire Farms of Delaware Inc Wy Premises Name (if different from above)	ye ivillis Grain Facility	-	
3. Status (A= New, B= Modification to Exi			
New Construction	New Construction		ng Initial
Status Begun (MM/YY)	Completed (MM/Y)	Y) Operatio	n (MM/YY)
15 16-19	20-23		20-23
4. Describe this Equipment: Make, Model, Outside Grain Storage Pile - Covered as pile is		(include Maximum Ho	ourly Input Rate, etc.)
	Can attached		
5. Workmen's Compensation Coverage_	See attached		Expiration Date
Company	Binder/Policy Number		Expiration Date
NOTE: Before a Permit to Construct may be issue worker's compensation coverage as	ed by the Department, the ap required under Section 1-20	plicant must provide the D 2 of the Worker's Compen	epartment with proof of sation Act.
6A. Number of Pieces of Identical Equipm	nent Units to be Regis	stered/Permitted at t	his Time 1
6B. Number of Stack/Emission Points As	sociated with this Equ	uipment <u>'</u>	

7. Person Installing this Equipment (if di		on Page 1)
Company		
Mailing Address/Street		
City/Town	State	Telephone ()
8. Major Activity, Product or Service of C	Company at this Locati	on
Grain Elevator - receives, drys and sh	ips all grains.	
9. Control Devices Associated with this	Equipment	
	None	
	24-0	
Simple/Multiple Spray/Adsorb Venturi	Carbon Electrostatic	Baghouse Thermal/Catalytic Dry
Cyclone Tower Scrubber	Adsorber Precipitator	Afterburner Scrubber
24-1 24-2 24-3	24-4 24-5	24-6 24-7 24-8
Other		
X Describe Mineral oil applied to all grains recevied.		
24-9		
10. Annual Fuel Consumption for this Ed	quipment	
OIL-1000 GALLONS SULFUR % GRADE	NATURAL GAS-1000	FT <sup>3</sup> LP GAS-100 GALLONS GRADE
26-31 32-33 34	35-41	42-45
COAL-TONS SULFUR	% ASH%	WOOD-TONS MOISTURE %
46-52 53-55	56-58	59-63 64-65
OTHER FUELS ANNUAL AMOUNT	CONSUMED OTHER	R FUEL ANNUAL AMOUNT CONSUMED
(Specify Type) 66-1 (Specify Units of	Measure) (Speci Coke 2= COG 3=BFG 4=Ot	ify Type) 66-2 (Specify Units of Measure)
		uiei
11. Operating Schedule (for this Equipm Continuous Operation Batch Process Hours per		Hours per Day Days Per Week Days per Year
67-1 67-2 68-		70-71 72 73-75
Seasonal Variation in Operation:		
No Variation Winter Percent Spring Perce	nt Summer Percent	Fall Percent (Total Seasons= 100%)
76 77-78 79-80	81-82	83-84

12. Equivaler	nt Stack Innformat	ion- is Exhaust through D	oors, Windows	s, etc. Only	y? (Y/N)	
					L 85	
If not, then	Height Avove Grour	nd (FT) Inside Diameter at To	p Exit Tempe	rature (°F)	Exit Velocity (i	FT/SEC)
			<u> </u>			
	86-88	89-91	92-	95 	96-98	
		NOTE:				
Attach a blo		ocess/process line, indica				form
	and all existing e	equipment, including cont	rol devices and	i emissioi	n points.	'
13. Input Mat	erials (for this equ	ipment only)				
		nsidered confidential?	(Y or N)			
	NA 885	L 040 NO (IE 4888 IO48 E)			T RATE	1 1111170
1.	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
2.						
3.						
4.						
5.						
6. 7.						
8.						
9.						<del></del>
TOTAL				<u> </u>		·
44.04.41	4 1 1 16 16 16 16 16 16 16 16 16 16 16 16	· · · · · · · · · · · · · · · · · · ·				
	aterials (for this ed Product Stream	quipment)				
r iocess/	Troductotieam			OUTP	UT RATE	
	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	UNITS	PER YEAR	UNITS
1. 2.						-
3.				<del>                                     </del>		
4.						
5.	· · · · · · · · · · · · · · · · · · ·					
6.						
7.					<del></del>	
9.						
TOTAL	-			<u> </u>		L
15. Waste Str	eams-Solid and L	iquid.		OUTE	NIT DATE	
	NAME	CAS NO. (IF APPLICABLE)	PER HOUR	OUTF   UNITS	PUT RATE PER YEAR	UNITS
1.	AMIL	OAO NO. (II AIT LIOADEL)	1 EK HOOK	00		
2.	· · · · · · · · · · · · · · · · · · ·					
3.						
4.						
5. 6.						
7.						
8.						
9.						
TOTAL						

16. Total Stack Emissions (for this	equipment only) in Pounds P	er Operating Day
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen
See attached air emmissions		
99-104	105-110	111-116
Carbon Monoxide	Volatile Organic Compounds	PM-10
177-122	123-128	129-134
17. Total Fugitive Emissions (for th	nis equipment only) in Pounds	Per Operating Day
Particulate Matter	Oxides of Sulfur	Oxides of Nitrogen
See attached air emmissions	140-144	145-149
Carbon Monoxide	Volatile Organic Compounds	PM-10
150-154	155-159	160-164
Method Used to Determine Emission	ons (1= Estimate 2= Em	ission Factor 3= Stack Test 4= Other)
TSP SOX	NOX CO	VOC PM10
165 166	167 168	169 170
	167 168  TION MANAGEMENT ADMINIS	
	TION MANAGEMENT ADMINIS Rec'd. State Retur	
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic	Rec'd. State Retur	n to Local Jurisdiction  By  by State
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic	Rec'd. State Retur Date tion Reviewed I	n to Local Jurisdiction  By  by State
AIR AND RADIAT  18. Date Rec'd. Local Date Reviewed by Local Jurisdic Date By  19. Inventory Date Month/You	Rec'd. State Retur Date tion Reviewed I Date ear Equipment Code	n to Local Jurisdiction  By  by State  SCC Code
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/Your 171-17	Rec'd. State Retur Date tion Reviewed I Date ear Equipment Code 175-177 Maximum Design Permit	n to Local Jurisdiction  By  Sy State  SCC Code  178-185  It to Operate Transaction Date
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/Ye	Rec'd. State Retur Date tion Reviewed I Date Equipment Code	tration use only  n to Local Jurisdiction  By  by State  SCC Code  178-185
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/Your 171-17	Rec'd. State Retur Date tion Reviewed I Date ear Equipment Code 175-177 Maximum Design Permit	n to Local Jurisdiction  By  Sy State  SCC Code  178-185  It to Operate Transaction Date
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/Ye  171-17  20. Annual Operating Rate	Rec'd. State  Return Date tion  Reviewed In Date ear  Equipment Code  175-177  Maximum Design  Hourly Rate  193-199	TRATION USE ONLY  In to Local Jurisdiction  By  Sy State  SCC Code  178-185  It to Operate I ransaction Date  Month (MM/DD/YR)
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdic By  19. Inventory Date Month/Ye  171-17  20. Annual Operating Rate  186-192	Rec'd. State  Retur Date tion  Reviewed I Date  ear Equipment Code 175-177  Maximum Design Hourly Rate 193-199  SIP Code Regulati	TRATION USE ONLY  In to Local Jurisdiction  By  Sy  SCC Code  178-185  It to Operate Iransaction Date  Month (MM/DD/YR)  200-201  202-207
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdict Date By  19. Inventory Date Month/You  171-17  20. Annual Operating Rate  186-192  Staff Code VOC Code  208-210  211  212	Rec'd. State  Retur Date tion  Reviewed I Date  ear Equipment Code 175-177  Maximum Design Hourly Rate 193-199  SIP Code Regulati	TRATION USE ONLY  In to Local Jurisdiction  By  Sy State  SCC Code  178-185  It to Operate Iransaction Date  Month (MM/DD/YR)  200-201  Confidentiality
AIR AND RADIAT  18. Date Rec'd. Local Date  Reviewed by Local Jurisdict Date By  19. Inventory Date Month/You  171-17  20. Annual Operating Rate  186-192  Staff Code VOC Code  208-210  211  212	Rec'd. State  Return Date tion  Reviewed In Date ear  Equipment Code  4 175-177  Maximum Design Hourly Rate  193-199  SIP Code 213 214  Return Date Reviewed In Date Reviewed In Date 24 275-177  Resulting Regulating Regulating Permit Design Regulating Regulating Permit Design Permit Design Pe	TRATION USE ONLY  In to Local Jurisdiction  By  Sy State  SCC Code  178-185  It to Operate Month (MM/DD/YR)  200-201  Confidentiality  219

Page 4 of 4 Recycled Paper



(2)

# 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 Wye Mills Grain Facility		
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679		
CONTACT	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			
(2) Mineral Oil Application Spray Systems			

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.

$\boxtimes$	Application package cover letter describing the proposed project			
$\boxtimes$	Complete application forms (Note the number of forms included or NA if not applicable.)			
	No.         1         Form 5         No.         NA         Form 11           No.         NA         Form 5T         No.         NA         Form 41           No.         NA         Form 5EP         No.         NA         Form 42           No.         NA         Form 44         No.         NA         Form 44			
	Vendor/manufacturer specifications/guarantees			
$\boxtimes$	Evidence of Workman's Compensation Insurance			
$\boxtimes$	Process flow diagrams with emission points			
$\boxtimes$	Site plan including the location of the proposed source and property boundary			
$\boxtimes$	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>			
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.			

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	Telephone No.		Date of Application		
Mountaire Farms of Delaware Inc.	(302) 841-4629		5-22-24		
2. Mailing Address	City	Zip Code	County		
P.O. Box 1320	Millsboro, DE	19966	Sussex		
3. Equipment Location	City/Town or P	2.0.	County		
14209 Old Wye Mills Road	Wye Mills		Talbot		
4. Signature of Owner or Operator	Title		Print or Type Name		
While Wester	President		Phillip Plylar		
5. Application Type: Alteration	on 🗌	New Const	ruction 🔀		
6. Date Construction is to Start:		Completion	n Date (Estimate):		
To be decided					
7. Type of Gas Cleaning or Emission Con	trol Equipment:				
Simple Cyclone Multiple Cyclor	ne Afterburne	r Ele	ctrostatic Precipitator		
Scrubber(type)	Other X	Mineral oil	applied to all grains recevied.		
8. Gas Cleaning Equipment Manufacturer	Model No.	Collection	Efficiency (Design Criteria)		
9. Type of Equipment which Control Equipment is to Service: All grain handling, storage and drying equipment. Two spray points, one at each grain receiving leg.					
10. Stack Test to be Conducted:					
Yes No					
(5	Stack Test to be Conducted	l By)	(Date)		
11. Cost of Equipment					
Estimated Erection Cost					

12. The Following Sha	ii Be Design Criteria:				
<u>INL</u>	<u>ET</u>		<u>o</u>	UTLET	
Gas Flow Rate	ACFM*		,	A	CFM*
Gas Temperature	°F			°	=
Gas Pressure	INCHES W	V.G.		IN	NCHES W.G.
	PRESSURE DR	OP			
Dust Loading	GRAINS/A	CFD**			RAINS/ACFD**
Moisture Content	%			%	•
Wet Bulb Temperature	°F			°F	:
Liquid Flow Rate (Wet Scrubber)	GALLONS	/MINUTE			
(WHEN SCRUBBER LIC	QUID OTHER THAN WATER IN	DICATE COMPOSIT	TION OF S	CRUBBING MED	IUM IN WEIGHT %)
*= AC	TUAL CUBIC FEET PER MIN	NUTE **= /	ACTUAL C	UBIC FEET DR	Υ
CONCENTRATION ( COMPOSITION OF THE	ring Cleaning Unit	HE GAS STREAN LEANING DEVICE	I IN VOLU E AND TH AILABLE	IME PERCENT. E COMPOSITIO	INCLUDE THE ON OF EXHAUSTED
10 to 44 Micror		<del></del>	_		
Larger than 44					
Gas Inlet Temp Capacity of Aft Diameter (or a Combustion Cl	perature terburner rea) of Afterburner Throat	B (length)	F TU/HR		E COMBUSTION AIR) Afterburner °F
Notondon Time					

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

Date Received: Local	State
	· ·
Acknowledgement Date:	
Ву	
Reviewed By:	
Local	
State	
Returned to Local:	
Date	
Ву	
Application Returned to Applicant:	
Date	
Ву	
DECISED ATION AND DECISED OF ACCOUNTED FOR HOMENT	¬
REGISTRATION NUMBER OF ASSOCIATED EQUIPMENT:	
PREMISES NUMBER:	
	D.4.
Emission Calculations Revised By	Date
	ļ



(2)

# 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 Wye Mills Grain Facility	
PREMISES ADDRESS:	14209 Old Wye Mills Road, Wye Mills, Maryland, 21679	
CONTACT	INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	Kyle McConnell	
JOB TITLE:	Environmental Manager	
PHONE NUMBER:	(302) 841-4629	
EMAIL ADDRESS:	kmcconnell@mountaire.com	
DES	SCRIPTION OF EQUIPMENT OR PROCESS	
	(2) 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.

$\boxtimes$	Application package cover letter describing the proposed project  Complete application forms (Note the number of forms included or NA if not applicable.)			
	No.         1         Form 5         No.         NA         Form 11           No.         NA         Form 5T         No.         NA         Form 41           No.         NA         Form 5EP         No.         NA         Form 42           No.         NA         Form 6         No.         NA         Form 44           No.         NA         Form 10			
	Vendor/manufacturer specifications/guarantees			
$\boxtimes$	Evidence of Workman's Compensation Insurance			
$\boxtimes$	Process flow diagrams with emission points			
$\boxtimes$	Site plan including the location of the proposed source and property boundary			
$\boxtimes$	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>			
	(1) Required for emergency and non-emergency generators installed on or after October 1, 2001 and rated at 2001 kW or more.			

Required for applications subject to Expanded Public Participation Requirements.

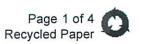
#### MARYLAND DEPARTMENT OF THE ENVIRONMENT

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

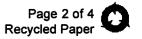
### Air and Radiation Management Administration ■ Air Quality Permits Program

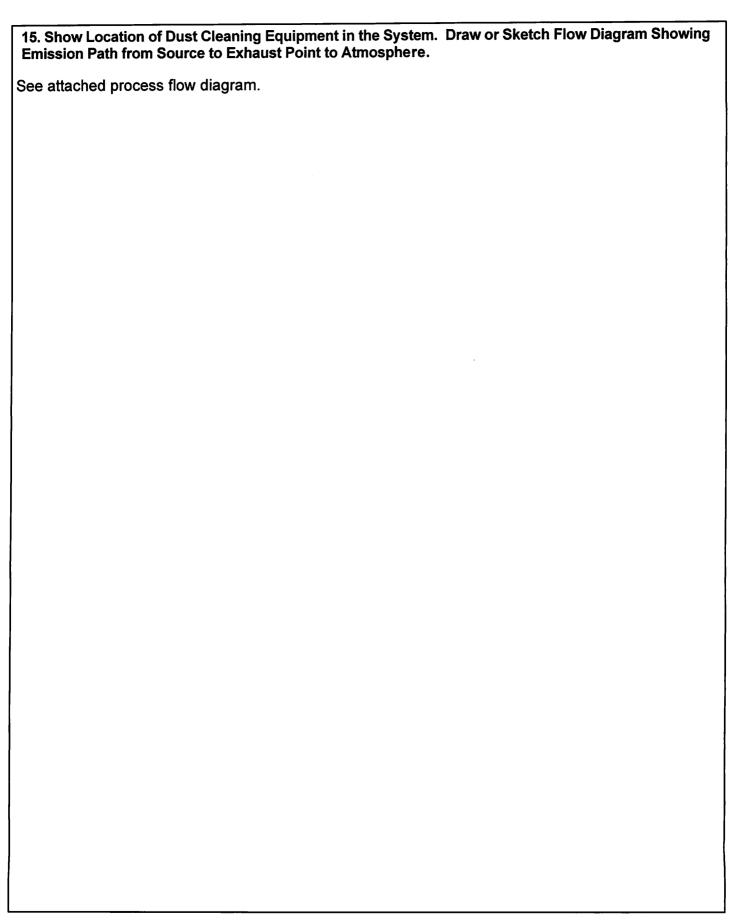
### Application for Permit to Construct Gas Cleaning or Emission Control Equipment

1. Owner of Installation	Telephone No.		Date of Application		
Mountaire Farms of Delaware Inc.	(302) 841-4629		5-22-24		
2. Mailing Address	City	Zip Code	County		
P.O. Box 1320	Millsboro	19966	Sussex, DE.		
3. Equipment Location	City/Town or P.	О.	County		
14209 Old Wye Mills Road	Wye Mills		Talbot		
4. Signature of Owner or Operator	Title		Print or Type Name		
White boll			Phillip Plylar		
5. Application Type: Alteration	n 🗌	New Constr	uction 🔀		
6. Date Construction is to Start:		Completion	Date (Estimate):		
To be decided					
7. Type of Gas Cleaning or Emission Contr	ol Equipment:				
Simple Cyclone Multiple Cyclone	Afterburner	Elec	trostatic Precipitator		
Scrubber(type)	Other X	Dust contro	l by Wings Baffle System (type)		
8. Gas Cleaning Equipment Manufacturer	Model No.	Collection E	fficiency (Design Criteria)		
*					
9. Type of Equipment which Control Equipment is to Service: Grain receiving pits, one placed in each receiving pit.					
10. Stack Test to be Conducted:					
Yes No					
(Sta	ack Test to be Conducted	Ву)	(Date)		
11. Cost of Equipment					
Estimated Erection Cost					



12. The Following Shall Be	Design Criteria:			
<u>INLET</u>				OUTLET
Gas Flow Rate	ACFM*			ACFM*
Gas Temperature	°F			°F
Gas Pressure	INCHES W.	G.		INCHES W.G.
	PRESSURE DRO	P		<u></u>
Dust Loading	GRAINS/AC	FD**		GRAINS/ACFD**
Moisture Content	%			%
Wet Bulb Temperature	°F			°F
Liquid Flow Rate (Wet Scrubber)	GALLONS/N	MINUTE		
	OTHER THAN WATER IND	ICATE COMPOSI	TION	OF SCRUBBING MEDIUM IN WEIGHT %)
*= ACTUAL	CUBIC FEET PER MINU	JTE **=	ACTL	JAL CUBIC FEET DRY
13. Particle Size Analysis  Size of Dust Particles Entering (	Cleaning Unit	% of Total Dust		% to be Collected
0 to 10 Microns				
Larger than 44 Micro				
14. For Afterburner Constru	ıction Only:			
Volume of Contamin	nated Air	c	FM	(DO NOT INCLUDE COMBUSTION AIR)
Gas Inlet Temperate	ıre		۲F	
Capacity of Afterbu	ner	E	BTU/H	R
Diameter (or area)	of Afterburner Throat			
Combustion Chamb	er (diameter)	(length)	Opera	ting Temperature at Afterburner °F
Retention Time of G	Gases			





Date Received:	Local		<del></del> _
Acknowledgeme	nt Date:		;
Ву	<del>_</del>		
Reviewed By:			
-			
	_		
Returned to Loca			
Date			
Ву			
Application Retu	rned to Applicant:		
Date			
<u> </u>			
REGISTRATION NUI	MBER OF ASSOCIATED EQUIPMEN	т:	
PREMISES NUMBER			
PREMISES NUMBER	z:		
PREMISES NOMBER	<u> </u>		
	ns Revised By	Date	
		Date	•
		Date	•
		Date	
		Date	
		Date	
		Date	•
		Date	



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

Phone: 410-770-8030 FAX: 410-770-8043 edeflaux@talbotcountymd.gov 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
- 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,	0001	0010	0005	DEMO-24-18
145100	Wye Mills, MD 28663 Queen Anne Hwy,	0001	0010	0045	DEMO-24-20
145119	Wye Mills, MD 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