



AIR QUALITY PERMIT TO CONSTRUCT APPLICATION CHECKLIST

OWNER OF EQUIPMENT/PROCESS	
COMPANY NAME:	
COMPANY ADDRESS:	
LOCATION OF EQUIPMENT/PROCESS	
PREMISES NAME:	
PREMISES ADDRESS:	
CONTACT INFORMATION FOR THIS PERMIT APPLICATION	
CONTACT NAME:	
JOB TITLE:	
PHONE NUMBER:	
EMAIL ADDRESS:	
DESCRIPTION OF EQUIPMENT OR PROCESS	

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

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

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

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

MARYLAND DEPARTMENT OF THE ENVIRONMENT
Air and Radiation Management Administration / Air Quality Permits Program
1800 Washington Boulevard, STE 720 Baltimore, MD 21230-1720
(410) 537-3230 • 1-800-633-6101 • www.mde.state.md.us

Mail application to

MDE/ARMA

**1800 Washington Blvd, Suite 720
Baltimore, MD 21230-1720**

Don't forget to:

- ✓ Sign the application
- ✓ Include vendor literature

Air Quality Permit to Construct & Registration Application for
INTERNAL COMBUSTION ENGINES
(Electrical Power Generators, Power Equipment, Fire Protection Pumps)

1) Applicability

You must check off one the following items to use this application form

- ☐ Electrical power generation (off grid, base load, peak, load shaving,, etc)
 - Use MDE Form 42 for emergency use only generators
- ☐ Power equipment (hydraulic, mechanical, etc)
- ☐ Fire protection pump

For electrical power generators only, you must check off one the following items to use this application form

- ☐ I have a CPCN Exemption from the Public Service Commission for this generator
(contact the Public Service Commission at 410.767.8131)
- ☐ This generator was installed before October 1, 2001 and I do not need a CPCN Exemption

2) Business/Institution/Facility where the engine will be located

☐ Check if this is a federal facility

Name: _____ Phone: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

3) Owner/Operator of the engine (if different than above)

Name: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

4) Installer

☐ Check if installer is applying for permit. If checked, complete the following:

Name: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____



5) Engine Information

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Installation Date	Engine Manufacturer & Model	Horsepower	Manufacture Date	Fuel Type

6) Operating Information

Intended use description: (Examples, "a portable generator at a construction site" or "peak shaving with the emergency generator", etc)

_____ Hours per day _____ Hours per year

7) Required Attachments

(Check that they are attached)

- ☐ Vendor literature
- ☐ CPCN Exemption from the Public Service Commission
 - Electrical generators only
 - Not needed for generators installed before October 1, 2001

8) Workers Compensation (Environmental article §1-202)

Workers insurance policy or binder number: _____

☐ Check if self employed or otherwise exempt from this requirement

"I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION SUBMITTED IN THIS REQUEST FOR COVERAGE IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS."

Owners Signature

Printed Name & Title

Date

LEAVE BLANK, MDE use only

- ☐ Permit
- ☐ Registration (Less than 1,000 brake horsepower & installed prior to 11/24/03)

Permit/Registration Number: _____ - _____ - _____ - _____

AI: _____

Emissions Stack _____ _____ _____ _____ _____

Fugitive _____ _____ _____ _____ _____

SOx Nox CO VOC PM PM-10