



THE UNIVERSITY
of NORTH CAROLINA
at CHAPEL HILL

VICE CHANCELLOR FOR
FINANCE AND ADMINISTRATION

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July 2, 2015

Mark Cuilla
Title V Permits Branch Supervisor
NCDENR – Division of Air Quality
1641 Mail Service Center
Raleigh, North Carolina 27699-1641

**RE: The University of North Carolina at Chapel Hill
Title V Air Permit Renewal – Air Permit No. 03069T32**

Dear Mr. Cuilla:

Enclosed please find two copies of Form AA requesting renewal of Title V Air Permit No. 03069 T32 for The University of North Carolina at Chapel Hill. We are submitting this renewal request at least nine months prior to the expiration of the current permit on April 30, 2016, as required by the current permit.

If you have any questions or comments, please call Mr. Mal Donohue, Environmental Affairs Manager, at (919) 962-5718 or Butch Smith of RST Engineering at (919) 810-9875 any time at your convenience.

Very truly yours,

Matthew M. Fajack
Vice Chancellor for Finance and Administration

Enclosures

Received

JUL 28 2015

Air Permits Section

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Joe - email about each Rule Title V Air Per
Mark - CAIR 03 2112

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J ✓
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Times Renewed



FORM AA

ADMINISTRATIVE APPLICATION (General Information)

NCDENR/Division of Air Quality - Application for Air Permit to Construct/Operate

AA

GENERAL INFORMATION

Legal Corporate/Owner Name: The University of North Carolina at Chapel Hill

Site Name: The University of North Carolina at Chapel Hill

Site Address (911 Address) Line 1: 302 South Building, CB#1000

Site Address Line 2:

City: Chapel Hill **State:** N.C. **Zip Code:** 27599-1000 **County:** Orange

CONTACT INFORMATION

Permit / Technical Contact:	Facility / Inspection Contact:
Name/Title: Malachy G. Donohue/Environmental Affairs Manager	Name/Title: Malachy G. Donohue/Environmental Affairs Manager
Mailing Address Line 1: The University of North Carolina at Chapel Hill	Mailing Address Line 1: The University of North Carolina at Chapel Hill
Mailing Address Line 2: 1120 Estes Drive Extension, CB#1650	Mailing Address Line 2: 1120 Estes Drive Extension, CB#1650
City: Chapel Hill State: N.C. Zip Code: 27599-1650	City: Chapel Hill State: N.C. Zip Code: 27599-1650
Ph. No. (area code) (919) 962-5718 Fax No. (area code) (919) 962-0227	Ph. No. (area code) (919) 962-5718 Fax No. (area code) (919) 962-0227
Email Address: mgdonohue@ehs.unc.edu	Email Address: mgdonohue@ehs.unc.edu

Responsible Official/Authorized Contact: Matthew M. Fajack	Invoice Contact:
Name/Title: Vice Chancellor for Finance and Administration	Name/Title: Malachy G. Donohue/Environmental Affairs Manager
Mailing Address Line 1: The University of North Carolina at Chapel Hill	Mailing Address Line 1: The University of North Carolina at Chapel Hill
Mailing Address Line 2: 302 South Building, CB#1000	Mailing Address Line 2: 1120 Estes Drive Extension, CB#1650
City: Chapel Hill State: N.C. Zip Code: 27599-1000	City: Chapel Hill State: N.C. Zip Code: 27599-1650
Ph. No. (area code) (919) 962-7234 Fax No. (area code) (919) 962-0647	Ph. No. (area code) (919) 962-5718 Fax No. (area code) (919) 962-0227
Email Address: mfajack@unc.edu	Email Address: mgdonohue@ehs.unc.edu

APPLICATION IS BEING MADE FOR

Renewal (non-Title V) Renewal Title V Name Change Ownership Change Administrative Amendment

FACILITY CURRENT CLASSIFICATION (Check Only One)

Small Synthetic Minor Title V

FACILITY (Plant Site) INFORMATION

Describe nature of (plant site) operation(s):

Educational Institution

Primary SIC/NAICS Code: 8221/611310 Current/Previous Air Permit No. 03069T32 Expiration Date: 4/30/2016

Facility Coordinates: Latitude: 35 53' 38" Longitude: 79 03' 43" Facility ID No. 6800043

Does this application contain confidential data? Yes No (See Instructions)

PERSON OR FIRM THAT PREPARED APPLICATION

Person Name: Butch Smith, P.E.	Firm Name: RST Engineering, PLLC
Mailing Address Line 1: 5416 Orchard Oriole Trail	Mailing Address Line 2:
City: Wake Forest State: N.C.	Zip Code: 27587-6770 County: Wake
Ph. No. (area code) (919) 810-9875 Fax No. (area code) (919) 467-8098	Email Address: butch50@nc.rr.com

SIGNATURE OF RESPONSIBLE OFFICIAL/AUTHORIZED CONTACT

Name (typed): Matthew M. Fajack Title: Vice Chancellor for Finance and Administration

X Signature (Blue Ink):

Date: 7/12/15



Received
JUL 29 2015
Air Permits Section

FORM AA (continued, page 2 of 2)
ADMINISTRATIVE APPLICATION

REVISED 05/01/08

Application for Air Permit to Construct/Operate

AA

SECTION AA1 - APPLICATION FOR NON-TITLE V PERMIT RENEWAL

[] (Company Name) hereby formally requests renewal of Air Permit No. []
There have been no modifications to the originally permitted facility or the operations therein that would require an air permit since the last permit was issued.
Is your facility subject to 40 CFR Part 68 "Prevention of Accidental Releases"- Section 112 (r) of the Clean Air Act? Yes No
If yes, have you already submitted a Risk Management Plan (RMP) to EPA? Yes No Date Submitted []
Did you attach a current emissions inventory? Yes No If no, was it submitted via AERO or by mail (date mailed). []

SECTION AA2 - APPLICATION FOR TITLE V PERMIT RENEWAL

In accordance with the provisions of Title 15A 2Q .0513 the responsible official of [The University of North Carolina at Chapel Hill] (Company Name) hereby formally requests renewal of Air Permit No. [03069T32] (Air Permit No.) and further certifies that:

- (1) the current air quality permit identifies and describes all emissions units at the above subject facility, except where such units are exempted under the North Carolina Title V regulations at 15A NCAC 2Q .0500,
- (2) the current air quality permit cites all applicable requirements and provides the method or methods for determining compliance with the applicable requirements,
- (3) the facility is currently in compliance, and shall continue to comply, with all applicable requirements. (Note: As provided under 15A NCAC 2Q. 0512 compliance with the conditions of the permit shall be deemed compliance with the applicable requirements specifically identified in the permit.),
- (4) for applicable requirements that become effective during the term of the renewed permit that the facility shall comply on a timely basis,
- (5) the facility shall fulfill applicable enhanced monitoring requirements and submit a compliance certification as required by 40 CFR Part 64 AND FORM E6 Compliance Assurance Monitoring (CAM) Plan.

The responsible official (signature on page 1) certifies under the penalty of law that all information and statements provided, based on information and belief formed after reasonable inquiry, are true, accurate, and complete.

SECTION AA3 - APPLICATION FOR NAME CHANGE

New Facility Name: []
Former Facility Name: []

An official facility name change is requested as described above for the air quality permit mentioned on page 1 of this form. Complete the other sections if there has been modifications to the originally permitted facility that would require an air quality permit since the last permit was issued and if there has been an ownership change associated with this name change.

SECTION AA4 - APPLICATION FOR AN OWNERSHIP CHANGE

By this application we hereby request transfer of Air Quality Permit No. [] from the former owner to the new owner as describe below. The transfer of permit responsibility, coverage and liability shall be effective [] (immediately or insert date). The legal ownership of the facility described on page 1 of this form has been or will be transferred on [] (date). There have been no modifications to the originally permitted facility that would require an air quality permit since the last permit was issued.

Signature of New (Buyer) Responsible Official/Authorized Contact (as typed on page 1):

X Signature (Blue Ink):

NOTE: It shall be the responsibility of the new owner to submit an annual compliance certification pursuant to the terms and conditions of the air permit for the entire calendar year regardless of who owned the facility during the year. The new owner should obtain compliance information from the former owner prior to the transfer of ownership.

Date: []

New Facility Name: []

Former Facility Name: []

Signature of Former (Seller) Responsible Official/Authorized Contact:

Name (typed or print): []

Title: []

X Signature (Blue Ink):

Date: []

Former Legal Corporate/Owner Name: []

In lieu of the seller's signature on this form, a letter may be submitted with the seller's signature indicating the ownership change.

SECTION AA5 - APPLICATION FOR AN ADMINISTRATIVE AMENDMENT

Describe the requested administrative amendment here (attach additional documents as necessary):

[]