

**BASIC APPLICATION FOR EQUIPMENT / AIR POLLUTION PERMIT  
OR CERTIFICATE OF OPERATION**

**FORM E001  
03/2011**

1. Name of Company \_\_\_\_\_ 2. NAICS Code: \_\_\_\_\_  
*(If corporation or LLC, name on file with Tennessee Secretary of State Corporate Records Division)*

3. Company Official to Contact: \_\_\_\_\_ 4. Phone No. \_\_\_\_\_

5. Mailing Address: \_\_\_\_\_  
*Street or P.O. Box City State Zip Code*

6. Physical Location  
(If different from line 5) \_\_\_\_\_  
*Street City State Zip Code*

7. Application for:  
 Installation Permit       Initial Certificate of Operation       Renewal Certificate of Operation  
Previous Installation Permit or Certificate of Operation No.: \_\_\_\_\_

8. Type of equipment for which application is made:

<input type="checkbox"/> Process Equipment (Form E010 or Form E010A)	<input type="checkbox"/> Previously Submitted	<input type="checkbox"/> Attached
<input type="checkbox"/> Fuel Burning Equipment (Form E011)	<input type="checkbox"/> Previously Submitted	<input type="checkbox"/> Attached
<input type="checkbox"/> Incineration Equipment (Form E012)	<input type="checkbox"/> Previously Submitted	<input type="checkbox"/> Attached
<input type="checkbox"/> Minor Pollution Source (Form E014) <i>(Less than 1000 lbs/yr and less than 10 lbs/day total uncontrolled contaminant emissions)</i>	<input type="checkbox"/> Previously Submitted	<input type="checkbox"/> Attached

The following forms are filed with this application:  
\_\_\_\_\_

9. Equipment Name: \_\_\_\_\_

10. If application is for a Certificate of Operation (Initial or Renewal), are there any changes since previous application in the equipment or operation which might:

A. Increase, decrease, or alter process materials, fuel, refuse type, etc.?     Yes     No

B. Increase, decrease, or alter emissions or emission points?                     Yes     No

11. Process Weight, lb/hr, (Item 6 on Form E010), Incineration Rate, lb/hr, (Item 3C on Form E012), or Fuel Burning Rate, 1,000 Btu/hr, (Item 7C on Form E011): \_\_\_\_\_

This is to certify that I am familiar with operations concerning this equipment and the information provided on this application is true and complete to the best of my knowledge:

*Mail completed form to:*  
CHATTANOOGA-HAMILTON COUNTY  
AIR POLLUTION CONTROL BUREAU  
6125 Preservation Drive, Suite 140  
Chattanooga, TN 37416-3638

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

**This form must be completely filled out before it will be processed**