

**From:** [Air.Pollution Control](#)  
**To:** [APC Permitting](#)  
**Subject:** FW: Oliver Springs, TN - NOI - Stationary Generator for Sewer Pump Station  
**Date:** Thursday, February 8, 2024 5:30:47 PM  
**Attachments:** [NOI-AirPolPermit-2-7-24.pdf](#)

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**From:** Threadgill, Bob <BThreadgill@grwinc.com>  
**Sent:** Thursday, February 8, 2024 2:04 PM  
**To:** Air.Pollution Control <Air.Pollution.Control@tn.gov>  
**Cc:** oscitymanager <oscitymanager@oliversprings-tn.gov>  
**Subject:** [EXTERNAL] Oliver Springs, TN - NOI - Stationary Generator for Sewer Pump Station

**\*\*\* This is an EXTERNAL email. Please exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email - STS-Security. \*\*\***

TO WHOM IT MAY CONCERN:

On behalf of the Town of Oliver Springs, TN, we are transmitting a NOI in accordance with the permit-by-rule guidelines for the Joel Road pump station.

If you have any questions, please feel free to contact me by email or phone.

Thanks,

**Bob Threadgill, PE**

**GRW** | [engineering](#) | [architecture](#) | [geospatial](#)

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DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
 DIVISION OF AIR POLLUTION CONTROL  
 William R. Snodgrass Tennessee Tower  
 312 Rosa L. Parks Avenue, 15<sup>th</sup> Floor, Nashville, TN 37243  
 Telephone: (615) 532-0554, Email: Air.Pollution.Control@TN.gov

**NOTICE OF INTENT (NOI) FOR DIVISION OF AIR POLLUTION  
 CONTROL PERMIT-BY-RULE (PBR)**

FACILITY INFORMATION			
<b>Organization's legal name</b> Town of Oliver Springs, TN			
<b>Facility name</b> (if different from legal name) Joel Road Sewer Pump Station			
<b>Site address</b> (St./Rd./Hwy.) 316 Joel Road		<b>County name</b> Roane	
<b>City</b> Oliver Springs		<b>Zip code</b> 37840	
CONTACT INFORMATION (RESPONSIBLE PERSON)			
<b>Responsible person/Authorized contact</b> Cory Jenkins, City Manager		<b>Phone number with area code</b> 865-435-7722	
<b>Mailing address</b> (St./Rd./Hwy.) 717 Main Street (Town Hall)		<b>Fax number with area code</b>	
<b>City</b> Oliver Springs	<b>State</b> TN	<b>Zip code</b> 37840	<b>Email address</b> oscitymanager@oliversprings-tn.gov
CONTACT INFORMATION (TECHNICAL)			
<b>Principal technical contact</b> Justin Turbin, Collection System Superintendent		<b>Phone number with area code</b> 865-924-7218	
<b>Mailing address</b> (St./Rd./Hwy.) 717 Main Street (Town Hall)		<b>Fax number with area code</b>	
<b>City</b> Oliver Springs	<b>State</b> TN	<b>Zip code</b> 37840	<b>Email address</b> justinturpin01@icloud.com
TYPE OF NOTIFICATION OF AUTHORIZATION (NOA) REQUESTED			
<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Existing Source w/o Permit	<input type="checkbox"/> Replace Existing Permit with PBR	<input type="checkbox"/> Change of Ownership
<b>Construction Starting Date:</b> 8/1/2023		<b>Emission Source Reference Number:</b> NA	
<b>Construction Completion Date:</b> 3/30/24		<b>Existing Permit Number:</b> NA	
<b>Describe changes and/or modifications that have been made, since the last permit application or NOI:</b> Upgraded sewer pump station that will be provided with an emergency generator for usage during electrical power failures per TDEC requirements.			

PERMIT-BY-RULE CATEGORY		
For which PBR category is an NOA being requested? Potentially eligible categories are listed at Tenn. Comp. R. & Regs. 1200-03-09-.07(5).		
Gasoline Dispensing Facility	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Auto body refinishing subject to 6H	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Stationary emergency engine	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

If Auto Body refinishing facility is not subject to 40 CFR 63 Subpart HHHHHH Miscellaneous Surface Coating and Paint Stripping rule (6H rule), complete Opt-Out petition instead of this form


CERTIFICATION OF ELIGIBILITY		
The facility at which this source is located <b>does not</b> have the potential to emit 100 tons per year or greater of any air pollutant subject to regulation and has not taken limits to reduce its potential to emit below this threshold.	Agree <input checked="" type="checkbox"/>	Disagree <input type="checkbox"/>
The facility at which this source is located <b>does not</b> have the potential to emit ten (10) tons per year or more of a single hazardous air pollutant or twenty-five (25) tons per year or more of any combination of hazardous air pollutants and has not taken limits to reduce its potential to emit below these thresholds.	Agree <input checked="" type="checkbox"/>	Disagree <input type="checkbox"/>
The facility <b>is/is not</b> located in a county designated serious, severe, or extreme <u>non-attainment</u> for ozone.	Is <input type="checkbox"/>	Is Not <input checked="" type="checkbox"/>
If the facility at which this source is located is in a county designated serious, severe, or extreme <u>non-attainment</u> for ozone, this source <b>does not</b> have the potential to emit ten (10) tons per year or more of nitrogen oxides or volatile organic compounds.	Agree <input checked="" type="checkbox"/>	Disagree <input type="checkbox"/>

SOURCE-SPECIFIC INFORMATION			
Gasoline Dispensing Facilities	Maximum monthly throughput in gallons NA		
List Pollution Control Devices (equipment such as submerged fill or Stage I vapor controls. If equipment details are known, list them. If not, list if submerged fill or Stage I vapor controls are present)			
Auto Body Refinishing (If facility is not subject to 6H, complete <u>Opt-Out petition</u> instead of this form)	Methylene chloride used?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
List Pollution Control Devices (include paint booths, HVLP, and similar pollution control devices)			

**Emergency Stationary Engine(s)** – Please complete the following information for all emergency stationary engines. If additional room is needed, please attach a separate page with the remaining engines and required information.

Number of Engines	Brief Description of Engine Purpose	Operated only during emergencies <sup>1</sup>	Engine Manufacture Date(s) (approximate) <sup>2</sup>	Engine Capacity in Horsepower <sup>3</sup>	Engine Fuel Type(s)	List Pollution Control Devices (such as low NOX burner)
1	Power for a 200KW generator	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	2022	330	Natural Gas	Catalyst on Exhaust
		Yes <input type="checkbox"/> No <input type="checkbox"/>				
		Yes <input type="checkbox"/> No <input type="checkbox"/>				
		Yes <input type="checkbox"/> No <input type="checkbox"/>				
		Yes <input type="checkbox"/> No <input type="checkbox"/>				
		Yes <input type="checkbox"/> No <input type="checkbox"/>				
		Yes <input type="checkbox"/> No <input type="checkbox"/>				

<sup>1</sup> A maximum of 100 hours of non-emergency operation per calendar year as allowed within the provisions of the rule.  
<sup>2</sup> If an engine is known to be manufactured prior to April 2005, you may indicate 'manufactured prior to April 2005' without having to approximate the manufactured date.  
<sup>3</sup> If the engine serves a generator, be sure to list the **engine** power output, not the generator electrical output.

SIGNATURE		
Based upon information and belief formed after a reasonable inquiry, I, as the responsible person of the above mentioned facility, certify that the information contained in this application and any attached application(s) is accurate and true to the best of my knowledge. As specified in TCA Section 39-16-702(a)(4), this declaration is made under penalty of perjury.		
Responsible person signature (application must be signed before it will be processed)		Date
		2-7-24
Responsible person printed name	Title	Phone number with area code
C. Cory Jenkins	City Manager	865-250-7368