State of Tennessee
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

APC 100

EG-L

### NON-TITLE V PERMIT APPLICATION FACILITY IDENTIFICATION

	Please type or	print and submit in d	uplicate for each	emission source. Atta	ach appropriat	e source description	forms.		
				FORMATION					
1.	Organization's legal name	THE COLUMN TWO IS NOT THE OWNER.			For	APC Company pe	oint no.		
	Site name (if different from legal	N. Hosov	TAL CO	L-L-C-	APC				
					use	APC Log/Permit	no.		
	Skylence Wa	EDICAL (	EUTE	2	only				
3.	Site address (St./Rd./Hwy.)				County n	ame			
	City or distance to nearest town	BUSS AU	B	RADIEL					
			Ziq	code	4. NA	ICS or SIC code			
	CLEVELAND,	TH	3	(320		WA			
5.		atitude	***************************************			Longitude			
	(Lit lat. /long.)	35% 10'2	7-1.		84	本5213	,′'		
		CONTACT	INFORMATI	ON (RESPONSE	BLE PERSO	ON)			
6.	Responsible person/Authorized				Phone nu	mber with area code	3		
	JEEE BULL	<u> </u>		***	422	ber with area code	6016		
	Mailing address (St./Rd./Hwy.)				Fax numi	ber with area code			
	SAME AS A	rboue_							
	C ny	State	Zip code	1	Email address  TEFF PRINCE CHE, WET				
						E-BOM	iee che mec		
7.	Principal technical contact	CON	FACT INFOR	MATION (TECH					
	•				Phone nu	mher with area code	:		
	Mailing address (SL/Rd/Hwy.)	1			54.1	ME AS A	からしての		
	3	5 . 1 6			Fax numi	per with area code			
	SANGE AS A	COVE	State	Zip code	Email add	1			
		1	citate	Zip code		PATTERNA TOTAL STATE AND			
		CO	NTACT INFO	RMATION (BIL		ae as a	ZIGOUE_		
8.	B filling contact		THACE HAPO	KWAHOH (DIL		mber with area code			
	JEFF POINT	<u> </u>			100000000	100 T			
	Mailing address (St/Rd/Hwy.)				Fax num	Fax number with area code			
	ACTION CONTRACTOR STREET	Qmile			1 as ittina	or with area code			
	SAME AS A		State	Zip code	Email ad	dress			
				5.51*.0555.3880	CAR	SAME AS ABOVE			
		EA	MISSION SOU	RCE INFORMA		The same of			
9.	E muission source no. (number wh								
	999		,						
10.	B rief description of emission son	irce		***************************************		-			
1.5	The Will Nick	4 3-11			_				
6	500 KM DIESE	C 1-165-17	, EVIE	50EHC4	CEM	SOLVES	_ 1		
11.	Normal operation: Hours	s/Day	Days/Week		Weeks/Year	г	Days/Year		
		,			I .				
12.	Percent annual Dec.	- Pah	Morah N	0.1	52		2.2		
	th roughput		March - M	•	June - Aug		Sept Nov.		
		25%	1 25	52	25	6	25%		

		DANSE CE NA	THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRE			APC 100
13. Operating permit	Date construction star		RMIT REQUESTE! te completed	The second second	stpermit no.	Emission source reference
()		Da Da		La	erberunting.	number
	2009		2069	96	64B9P	999
Construction pennit	Last permit no.			Em	ission source referer	ice number
( )				1		
If you choose Construction p	ermit, then choose either Ne	w Construction.	Modification, or Location	on transfer		
	New Construction	Sta	rting date		Completion date	
	( )					
	Modification	Dat	e modification started or	e will char	Date paralleted as	
	( )	Dat	e mounication started o	i will suiti	Date completed or	wincompiete
	Location transfer	Tra	nsfer date		Address of last loc	ation
	( )					
14. Describe changes that have	been made to this equipme	ent or operation	since the last construc	tion or oper	ating permit applic	ation:
NONE				•	0.	
	<del></del>					
en leste en les			NATURE			
Based upon information and be	lief formed after a reasor	nable inquiry, I	, as the responsible po	erson of the	above mentioned	facility, certify that the
information contained in this ar	oplication and any attach	ed application(	<li>s) is accurate and true</li>	to the best	of my knowledge	. As specified in TCA
Section 39-16-702(a)(4), this di			ury.	15		
15. Signature (application must l	be signed before it will be pi	rocessed)		Date		
Zym)m				1 9	umber with area co	
Signer's name (type of print)		Title				
JEEE ASM	E	DPO		42	3-559-	6016
the system has several pieces of co none of the below codes fit, use 99 to Equipment	9 as a code for other and sp	eaify in the comm	nents.			241
ctivated Carbon Adsorption		048	Limestone Injection	on – Erry on – Wet	,	041
fterburner – Direct Flame		021	Liquid Filtration S	ystem		
fterburner – Direct Flame with Hea fterburner – Catalytic	t Exchanger	022	Mist Eliminator – Mist Eliminator –	High Veloci	y	014
fterburner - Catalytic with Heat Ex	changer	020	Process Change		************************	046
Ikalized Aluminaatalytic Oxidation – Flue Gas Desu	Birmania a	040	Process Enclosed			
yclone - High Efficiency		007	Settling Chamber	– High Effic	iency	060
yclone - Medium Efficiency			Settling Chamber	– Medium E	fficiency	005
yclone — Low Efficiency just Suppression by Chemical Stabi	lizers or Wetting Apents		Settling Chamber	- Low Effici	Only	006
lectrost atic Precipitator – High Effi	ciency	010	Sulfuric Acid Plan	it – Contact I	rocess	052
lectrostatic Precipitator – Medium I	Efficiency	011	Sulfuric Acid Plan	at - Double (	ontact Process	044
lectrost atic Precipitator - Low Effic abric Filter - High Temperature	ciency	012	Vanor Recovery S	System (Inclu	ding Condensers, H	045
abric Filter - Medium Temperature		017	Other Enclose	ires)		047
abric Filter – Low Temperature abric Filter – Metal Screens (Cotton	· Cina	018	Venturi Scrubber	(Gaseous Co	ntrol Only)	
lanng.	**********************************		Wet Scrubber - H	igh Efficienc fedium Effic	encv	
ias Adscription Column — Packed		050	Wer Scrubber – L	ow Efficienc	γ	003
fas Adsorption Column – Tray Typ fas Scrubber (General: Not Classifi	C	051	Wet Suppression	by Water Spi	ays	061
Man Servesser (Certoral, 1401 C RESELL	ca)	······································				
lot appl ication / Emissions are know	No. 10		Estimation Method Co-			
emissions based on source testing.						1
anissiolas based on inaterial balance	dusing engineering expertise	e and knowledge	of process			2
udgment	lactors from EPA publicati	ons No. AP-42 C	ompilation of Air Pollu	tion Emissio	ns Factors	
amissioms calculated using a special	emission factor different li	om that in AP-42			AND AND INCOME.	5
Other (Specify in comments)						6

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APC 100

EG-2



### NON-TITLE V PERMIT APPLICATION FACILITY IDENTIFICATION

	Please	type or print and submit in o	luplicate for a	nch emissing source Att	tach amenavial	and developing			
		of the Or I have the adolette the			аси арргориа	e source description torms.			
1.	Organization's legal nor		5111	EINFORMATION					
"	· ·				For	APC Company point no.			
1-	CHECAM	n legal name)	JAL C	s, LLC	APC				
2.					use	APC Log/Permit no.			
_	Site address (St./Rd./Hw	MEDICAL (	CELT	EC	only				
3.					County n	ume			
	2305 CW	town	B:	RADIEU					
				Zip code		ICS or SIC code			
	CLEVELAN	D, TH		37320		NA			
5.	Site location	Latitude			Longitud	Longitude,			
	(in lat. /long.)	35% 10	84	*52/13/1					
				ATION (RESPONSI					
6.	Responsible person/Auth	orized contact	MINA CIATIA	TELEVIT (ICES) OTTO		mber with area code			
		THE			1				
	Mailing address (St./Rd.	Hwy			For number	5-559-6516 per with area coole			
		• · · · · · · · · · · · · · · · · · · ·			rax nome	oer with area code			
	City State Zip code					Apara .			
					Email add				
		CON	TC + CCT YA CE			F PRINCE CHE, WET			
7.	Principal technical conta		TACTINE	ORMATION (TECI					
٠.					Phone nu	unber with area code			
	JEEF PO	PLE			540	ME AS ABOUT			
	Malling address (St/Rd/	•			Fax numb	er with area code			
	SAME AS	- ABOVE							
	City		State	Zip code	Email add	iress			
					=	AE AS ABOVE			
		CC	NTACT IN	FORMATION (BIL	LING)				
8.	Billing contact				Phone nu	inber with area code			
	Malling address (St/Rd/	INE			SXX	SAMIE AS ARONE			
	Malling address (St/Rd/	Hwy.)			Fox number with area code				
	SAME AS	SUBBLE							
	City		State	Zip code	Email add	fress			
					SAN	HE AS ABOVE			
		E	MISSION S	OURCE INFORMA	TION				
9.	E mission source no. (nun	ber which uniquely identifie	s this source)	0010031110111111	CIXON				
	999		, ino houreof						
10.	Brief description of emis-	sion source							
6	god AM pre	SEL FRED	EM.	ERGENCY	GEN	EDATBO			
11.	Normal operation:	Hours/Day	Days/V	Veek	Weeks/Year	Days/Year			
		\		1	52				
12.	Percent annual	Dec Feb.	March	- May	June - Augu	Care Care			
	th roughput	25%		98	-				
		473 kg		252	2.5	2 25%			

APC 100

	T	YPE OF I	PERMIT REQUESTED		***************************************	711 0 10
13. Operating permit	Date construction starte	The state of the s	Date completed	Las	t permit no.	Emission source reference
(1)	2009		3618	01	1	number
Construction pennit	Last permit no.		2669	-	daTZAP	
•	Last pertan no.			EIR	ission source referer	ice number
( )						
If you choose Construction perm				transfer		
	New Construction		Starting date		Completion date	
	( )					
	Modification		Date modification started or v	vill start	Date completed or	r will complete
	505707000000000000		Date mediadaten statted et	- And Start	Date conquetes ()	"" complete
	( )					
	Location transfer		Transfer date		Address of last loc	eation
	( )					
4. Describe changes that have been	n made to this equipmen	tor operat	tion since the last construction	m or aner	ating permit applic	ation.
		от орин		or open	ber mir ribbure	F101111
NONE						
		9	IGNATURE			
Based upon information and belief	formed after a reasona			on of the	above mentioned	facility certify that the
nformation contained in this appli	cation and any attached	l applicati	on(s) is accurate and true to	the best	of my knowledge	t. As specified in TCA
Section 39-16-702(a)(4), this decla	ration is made under pe	enalty of p	perjury.		0. (1) /	1 2 20 openition in a cont
5. Sign/fure (application must be si				Date		
40000	Control Pro-Pro-Pro-Pro-Pro-Pro-Pro-Pro-Pro-Pro-	,				
Signer's name type of print)	17	C'AL.		DI	umber with area co	>,
morning 0		Fitle				
TELL ASTUE		DP		45	3-559-	6016
Equipment tivated Carbon Adsorption terburner – Direct Flame		048	Limestone Injection Liquid Filtration Sys	- Wet	**************************************	041
terburner – Direct Flame with Heat Ex	changer	022	Mist Eliminator – H	igh Velocit	y	014
terburner – Catalytic terburner – Catalytic with Heat Excha	nopr		Mist Eliminator – Le			
kalized Alumina		040	Process Enclosed	,.,,	***************************************	054
talytic Oxidation – Flue Gas Desulfuri	zation	039				060
clone - High Efficiency	***************************************	007	Settling Chamber –	High Ettic: Medinin Fi	iency Hiciency	004
clone - Low Effletency	*	009	Settling Chamber -			005
st Suppression by Chemical Stabilizer	's or Wetting Agents	062	Spray Tower (Gasec			052
ctrostatic Precipitator – High Efficien ctrostatic Precipitator – Medium Effic	Cy american	010	Sulfuric Acid Plant			043
etrostatic Precipitator - Low Efficien	74	012	Sulfur Plant			045
bric Fi lter - High Temperature	*************	016	Vapor Recovery Sys	stem (Inclu	ding Condensers, H	ooding and
bric Filter – Medium Temperature bric Filter – Low Temperature		017	Other Enclosure	s)	nivol Outol	
bric Filter - Metal Screens (Cotton Gi	ns)	018				053
iring		023	Wet Scrubber - Mer	hum Effici	ency	
s Adsorption Column Packed	**************	050	Wet Scrubber – Lov	v Efficienc	y	
is Adsorption Culumn – Tray Type is Scrubber (General: Not Classified)		051	Wet Suppression by	water Spi	uys	
			on Estimation Method Code	-		
ot application / Emissions are known to	o be zero					0
nissions based on source testing nissions based on material balance usi	no enninearine avantica	of transaction	das of worse			1
missionus calculated using emissien fac	tors from EPA publication	ns No. AP-	42 Compilation of Air Pollution	n Emissio	na Factors	
igmen t				*******	F16 (4. C116.14.484) 2444 (4444444444)	4
nissions calculated using a special em ther (Specify in comments)	ission factor different from	n that in Al	P-42		**********	
N-0730 (Rev. 5-13)		*****	***************************************	***/********	*****************	0 RDA

NOT TO BE USED FOR TITLE V APPLICATIONS



9th Floor, L & C Annex 401 Church Street Nashville, TN 37243-1531 Telephone: (615) 532-0554 FAX: (615) 532-0614

#### PERMIT APPLICATION

APC 20

					At 0.20		
PLEASE TYPE OR P		IN DUPLICATE F	OR EACH EMISS	ION SOL	JRCE. ATTACH APPROPRIATE SOURCE		
ORGANIZATIO     Cleveland TN Hospita	N'S LEGAL NAMI	E		FOR.	APC COMPANYPOINT NO.		
2. MAILING ADD P.O. Box 3060	RESS (ST/RD/P.O. I	30X)		APC	APC LOG/PERMIT NO.		
CITY Cleveland		STATE TN	ZIP CODE 37320		PHONE WITH AREA CODE (423) 559-6000		
3. PRINCIPAL TR	CHNICAL CONTA	CT			PHONE WITH AREA CODE (423) 559-6016		
4. SITE ADDRESS 2305 Chambliss Ave 1		and the second s		COUNTY NAME Bradley			
CITY OR DISTA	NCE TO NEAREST	TOWN	ZIP CODE 37311		PHONE WITH AREA CODE (423) 559-6000		
5. EMISSION SOLUTION	URCE NO. (NUMBER W RCE)	HICH UNIQUELY	PERMIT REN YES ( )	EWAL NO (x	)		
annually for 4 hour lo	ad bank test.		14		Generator - #1 CAT		
7. TYPE OF PER	MIT REQUESTED			- W = 10-1	EMISSION SOURCE REFERENCE NUMBER		
CONSTRUCTI ON	STARTING DATE	COMPLETION DATE	LAST PERM NUMBER	11	EMISSION SOURCE REPERENCE NUMBER		
OPERATING	DATE CONSTRU- CTION STARTED 1994	DATE COMPLETE 1994	D LAST PERMI N/A	T NUMBE	R EMISSION SOURCE REFERENCE NUMBER 06-0056-01		
LOCATION TRANSFER	TRANSFER DATE	?	LAST PERM NUMBER	IIT	EMISSION SOURCE REFERENCE NUMBER		
ADDRESS OF I	LAST LOCATION						
	IANGES THAT HA	VE BEEN MADE ' G PERMIT APPL	TO THIS EQUIP ICATION.	MENT C	OR OPERATION SINCE THE LAST		
9. SIGNATURE	APPLICATION MU	ST BE SIGNED BE	FORE IT WILL B	Е	DATE 8/10/12		
10. SIGNER'S NA	1	IT) TITI			PHONE WITH AREA CODE		

COPY

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#### EMISSION POINT DESCRIPTION

APC 22

ATTACH TO THE PERMIT					111	APC COMPAN	IY POINT NO.		
Cleveland TN Hospita	al Co., LLC				FOR				
2. EMISSION SOURCE NO.	(FROM APPLI	CATION)	FLOW DIAGRAM POI	NT NUMBER	111	APC SEQUENC	CENO.		
06-0056-01			N/A		APC				
3. LOCATION:	LATITUDE		LONGITUDE	UTM VERTICAL		UTM HORIZONTAL			
	35* 10' 41	11	84* 52' 13"	N/A		N/A			
4. BRIEF EMISSION POIN	T DESCRIPTION	N (ATTACH A	SKETCH IF APPROPR	IATE):		DISTANCE TO PROPERTY LI			
Emergency generator	s used during	power outag	ges. They are run 1 d	ay a week on no lo	oad, I day a		140(11)		
month under load and	l annually loa	d banked.		ienerator -	- 1	15°			
COMPLETE LINES 5 AND 6 I	F DIFFERENT	FROM THAT C	N THE PROCESS OR F	JEL BURNING SOUR	CE DESCRIPTION	(APC 21)			
5. NORMAL	HOURS/DAY		DAYS/WEEK	WEEK/YEAR		DAYS/YEAR			
OPERATION:	1		ι	52	-	1			
6. PERCENT ANNUAL	DECFEB.		MARCH-MAY	JUNE-AUG.		SEPTNOV.			
THROUGHPUT:	25%		25%	25%		25%			
7. STACK OR EMISSION	HEIGHT ABO		DIAMETER (FT)	TEMPERATURE	% OF TIME OVER 125°F	DIRECTION O			
POINT DATA:	GRADE (FT	)	12"	(°F) 300	100%	HORIZONTA	<sup>L)</sup> Up		
DATA AT EXIT CONDITIONS:	FLOW (ACT) FT³/MIN.)	JAL	VELOCITY (FT/SEC)	MOISTURE (GRAINS/FT³)		MOISTURE (PERCENT)			
	N/A		N/A	N/A		N/A			
DATA AT STANDARD CONDITIONS:	FLOW (DRY STD. FT <sup>3</sup> /MIN)		VELOCITY (FT/SEC)	MOISTURE (GRAINS/FT³)		MOISTURE (PERCENT)			
	N/A		N/A	N/A		N/A			
8. AIR CONTAMINANTS			TUAL EMISSIONS			CONTROL	CONTROL		
	EMISSIONS AVERAGE	(LBS/HR) MAXIMUM	CONCENTRATION	AVG. EMISSIONS (TONS/YR)	EMISSIONS* EST. METHOD	DEVICES*	EFFICIENCY%		
PARTICULATES			**						
SULFUR DIOXIDE			***						
CARBON MONOXIDE			PPM						
ORGANIC COMPOUNDS			PPM						
NITROGEN OXIDES			PPM						
FLUORIDES									
OTHER( SPECIFY )						1			
OTHER( SPECIFY )	+ .	-					T		

9.	OPACITY MONITOR (	NITORING AND REC	), NOX MONITOR (	NTS THAT ARE ATTACHED: ), OTHER (SPECIFY IN COMMENTS) (	)	
	0111011111111111	7				7652

10. COMMENTS

11. SIGNATURE

DATE

\* REFER TO THE BACK OF THE PERMIT APPLICATION FORM FOR ESTIMATION METHOD AND CONTROL DEVICE CODES.

\*\* EXIT GAS PARTICULATE CONCENTRATION UNITS: PROCESS — GRAINS/DRY STANDARD FT3 (70°F); WOOD FIRED BOILERS —
GRAINS/DRY STANDARD FT3 (70°F); ALL OTHER BOILERS — LBS/MILLION BTU HEAT INPUT.

\*\*\* EXIT GAS SULFUR DIOXIDE CONCENTRATIONS UNITS: PROCESS — PPM BY VOLUME, DRY BASES; BOILERS — LBS/MILLION BTU HEAT INPUT.

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### PROCESS OR FUEL BURNING SOURCE DESCRIPTION

APC21(& 24)

PL	EASE TYPE OR PRINT, SUBMI	T IN DUPLICA	ATE AND A	ATTACH TO T	HE PERMIT A	PPLICA	TIOI	N.
1.	ORGANIZATION NAME Cleveland TN Hospital Co.,	LLC				FOR	APO	COMPANY-POINT NO.
2.	EMISSION SOURCE NO. (AS O 06-0056-01		PLICATION	)	SIC CODE	/// APC	ΑPO	C PERMIT/LOG NO.
3.	DESCRIPTION OF PROCESS OR					1		
	Emergency generators used dannually load banked.	uring power	outages. Ti	hey are run 1 d	lay a week no	load, 1		enerator - CAT #1
4.	NORMAL OPERATION:	HOURS/DAY	DAYS/V	VEEK	WEEKS/YE	AR	DA	<del>YS</del> /YEAR
	<b>→</b>	1	1		52		1	
5.	PERCENT ANNUAL	DECFEB.	MARCH	I-MAY	JUNE-AUG.		SEI	PTNOV.
٥.	THROUGHPUT: →	25% 25%			25%		2:	5%
-	TYPE OF PERMIT APPLICATIO	N					(0)	HECK BELOW ONE ONLY)
-0.	PROCESS SOURCE: APPLY FOR	A SEPARATE	7, 8, 13, AN	D 14 ).				( )
	RIGHT, AND COMPLETE LINES 7, 8, 13, AND 14).  PROCESS SOURCE WITH IN-PROCESS FUEL: PRODUCTS OF COMBUSTION CONTACT MATERIALS HEATED. APPLY FOR A SEPARATE PERMIT FOR EACH SOURCE. (CHECK AT RIGHT, AND COMPLETE LINES 7, 8, AND 10 THROUGH 14)							( )
	NON-PROCESS FUEL BURNIN MATERIALS HEA BURNER AND CO FOR EACH STACE	G SOURCE: ATED, COMPL	PRODUCTS ETE THIS FO MISSION P	OF COMBUSTIC ORM FOR EACH OINT DESCRIPT	IN DO NOT COI BOILER OR FU ION FORM ( AP	EL C 22 )		( x )
7.	TYPE OF OPERATION: CONTI	NUOUS,		TCH )	NORMAL I		NC	RMAL BATCHES/DAY
8.	PROCESS MATERIAL INPUTS A	ND DL	AGRAM*		ES (POUNDS/H	OUR)	1/	(FOR APC USE ONLY)
	IN-PROCESS SOLID FUELS		FERENCE	DESIGN	ACTU	AL	1	SCC CODE
	A.					****	1	
	В.						1	
	c. \ (X						1	
-	D.						1/1	
-	E,						1	water to the state of the state
li	F.						1	
	G.						1/1	
		T	DTALS				1	

<sup>\*</sup> A SIMPLE PROCESS FLOW DIAGRAM MUST BE ATTACHED.

		TA: (COMPLETE LI	NES 9 TO 14 L			RM FOR			DATTMO
BOILER NUMBER	STACK NUMBER**	TYPE OF FIRING***		RATED BO HORSEPON	WER	CAPACI (106 BTU	TY		ACITY AND UNITS)
N/A	N/A	N/A		N/A	A N/A N/A				
BOILER SE	RIAL NO.	DATE CONSTRUCT							ENTS BELOW).
N/A		N/A		N/A					
*** CYCLC REINJE IN CON	ONE, SPREADER ECTION ), OTHE MMENTS ).	MMON STACK WILL I R (WITH OR WITHOU RR STOKER (SPECIFY E FOR A PROCESS SO	IT REINJECTI (TYPE), HAN	ON ), PULVERI ID FIRED, AUT	IZED ( W OMATIC	OR OT	HER T	YPE ( DESCRIBE BE	ELOW
	A: (COMPLET		JURCE WITH	IN-PROCESS F	STANT	DRY FUE	I. TYP	E(S)(SPECIFY)	300KdD)
PRIMARI	rucu i irc(si	Fuel Oil	#2 (Diesel)		N/A				
FUELS USE	ED	ANNUAL USAGE		YUSAGE	%		%	BTU VALUE	(FOR APC ONI
			DESIGN	AVERAGE	SULF		SH	OF FUEL	SCC CODE
NATURAL	GAS:	10° CUFT	CUFT	CUFT	111		11	1,000	
#2 FUEL O	IL:	10 <sup>3</sup> GAL	GAL	GAL			11		
Diesel		1200	165	3.65			11		
#5 FUEL O	IL:	10 <sup>3</sup> GAL	GAL.	CAI			11		
#6 FUEL O	IL:	10 <sup>3</sup> GAL	GAL	GAL			11		
COAL:		TONS	LBS	LBS					
					ļ.,,,		, ,		
WOOD:		TONS	LBS	LBS	111				
LIQUID PR	OPANE:	10 <sup>3</sup> GAL	GAL	GAL	111		11	85,000	
OTHER (.S TYPE & U									
		FUEL, SPECIFY TY							

14. SIGNATURE	DATE
Ja m	8 10/13
	V

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9th Floor, L & C Annex 401 Church Street Nashville, TN 37243-1531 Telephone: (615) 532-0554 FAX: (615) 532-0614

#### PERMIT APPLICATION

APC 20

				AFC 20		
PLEASE TYPE OR PRINT AND SUBMIT DESCRIPTION FORMS.	IN DUPLICATE FO	R EACH EMISS	ION SO	URCE. ATTACH APPROPRIATE SOURCE		
1. ORGANIZATION'S LEGAL NAME Cleveland TN Hospital Co., LLC /				APC COMPANYPOINT NO.		
2. MAILING ADDRESS (ST/RD/P.O. BOX) // P.O. Box 3060 //				APC LOG/PERMIT NO.		
CITY STATE ZIP CODI Cleveland TN 37320				PHONE WITH AREA CODE (423) 559-6000		
3. PRINCIPAL TECHNICAL CONTA Jeff Prine	СТ			PHONE WITH AREA CODE (423) 559-6016		
4. SITE ADDRESS (ST/RD/HWY) 2305 Chambliss Ave NW				COUNTY NAME Bradley		
CITY OR DISTANCE TO NEAREST Cleveland	TOWN	ZIP CODE 37311		PHONE WITH AREA CODE (423) 559-6000		
5. EMISSION SOURCE NO. (NUMBER W IDENTIFIES THIS SOURCE) 06-0056-01	HICH UNIQUELY	PERMIT REN YES ( )	EWAL NO (x	)		
6. BRIEF DESCRIPTION OF EMISS. Emergency generator used during power ou once annually for 4 hour load bank test.	ION SOURCE tages. It is run 1 day	a week for 30 m	inutes no	o load, I day a month for 30 minutes under load and		

Generator - #2 CAT

7.	TYPE OF PER	MIT REQUESTED			
ON	CONSTRUCTI	STARTING DATE	COMPLETION DATE	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
	OPERATING	DATE CONSTRU- CTION STARTED 2008	DATE COMPLETED 2009	LAST PERMIT NUMBER N/A	EMISSION SOURCE REFERENCE NUMBER 06-0056-01
	LOCATION TRANSFER	TRANSFER DATE	2	LAST PERMIT NUMBER	EMISSION SOURCE REFERENCE NUMBER
	ADDRESS OF L	AST LOCATION			

8. DESCRIBE CHANGES THAT HAVE BEEN MADE TO THIS EQUIPMENT OR OPERATION SINCE THE LAST CONSTRUCTION OR OPERATING PERMIT APPLICATION.

9. SIGNATURE (APPLICATION MUST BE SIGNI PROCESSED)	ED BEFORE IT WILL BE	8/10/12
10. SIGNER'S NAME (TYPE OR PRINT) Jeff Prine	TITLE Facilities Director	PHONE WITH AREA CODE (423) 559-6016

(CO) 172 RDA 1298

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Noor 7711

#### **EMISSION POINT DESCRIPTION**

APC 22

PLEASE TYPE OR PRINT ATTACH TO THE PERMIT										
1. ORGANIZATION NAME					///	APC COMPAN	Y POINT NO.			
Cleveland TN Hospital Co., LLC										
2. EMISSION SOURCE NO. (FROM APPLICATION)   FLOW DIAGRAM POINT NUMBER //							CENO.			
06-0056-01			N/A		APC					
3. LOCATION:	LATITUDE		LONGITUDE		UTM HORIZONTAL					
3. LOCATION:	35* 10' 41	ti	84* 52' 13"	UTM VERTICAL N/A		N/A				
			0.00			DISTANCE TO NEAREST				
4. BRIEF EMISSION POIN						PROPERTY L				
Emergency generator	s used during	g power outag	ges. They are run 1 d	lay a week no load,	, I day a					
month under load and	l annually loa	ıd banked.	(	aenerator -	CATH >					
COMPLETE LINES 5 AND 6 I	F DIFFERENT	FROM THAT O	N THE PROCESS OR F	UEL BURNING SOUR	CE DESCRIPTION	I (APC 21)				
5. NORMAL	HOURS/DAT		DAYS/WEEK	WEEK <del>/YEA</del> R		DAYS/YEAR				
OPERATION:	•		-	50		1				
	1		1	52		1				
6. PERCENT ANNUAL	DECFEB.		MARCH-MAY	JUNE-AUG.		SEPTNOV.				
THROUGHPUT:			25%	25%		25%				
7. STACK OR EMISSION			DIAMETER	TEMPERATURE	% OF TIME	DIRECTION OF EXIT				
POINT DATA:	GRADE (FT)		(म्म)	(°F) OVER 125°F		(UP, DOWN OR HORIZONTAL) Up				
	32'		10"	520	0 100%		Up			
DATA AT EXIT	FLOW (ACTUAL		VELOCITY				MOISTURE (PERCENT)			
CONDITIONS:	FT³/MIN.)					(PERCENT)				
	N/A		N/A	N/A		N/A				
DATA AT STANDARD	FLOW (DRY STD.		VELOCITY	MOISTURE		MOISTURE (PERCENT)				
CONDITIONS:	FT³/MIN)		(FT/SEC)	(GRAINS/FT³) N/A		N/A				
	N/A		N/A		N/A					
8. AIR CONTAMINANTS			TUAL EMISSIONS	LANO PLEDGIOVE	CMICOTONIC#	CONTROL	CONTROL			
	EMISSIONS AVERAGE	(LBS/HR) MAXIMUM	CONCENTRATION	AVG. EMISSIONS (TONS/YR)	EMISSIONS* EST. METHOD	DEVICES*	EFFICIENCY%			
PARTICULATES	AVERAGE	MAMINION	**	(101.07115)						
PARTICOLATED										
SULFUR DIOXIDE			***							
CARBON	-		PPM							
MONOXIDE					1		+			
ORGANIC COMPOUNDS			PPM							
NITROGEN			PPM	Ť						
OXIDES										
FLUORIDES										
OTHER(SPECIFY)		İ								
OTHER(SPECIFY)	†									

9.	CHECK TYPES OF MO	NITORING AND REC	CORDING INSTRUME	NTS THAT ARE ATTACHED:		
	OPACITY MONITOR (	, SO2 MONITOR (	), NOX MONITOR (	), OTHER (SPECIFY IN COMMENTS) (	)	

10. COMMENTS

DATE 11. SIGNATURE

- REFER TO THE BACK OF THE PERMIT APPLICATION FORM FOR ESTIMATION METHOD AND CONTROL DEVICE CODES.
- \*\* EXIT GAS PARTICULATE CONCENTRATION UNITS: PROCESS GRAINS/DRY STANDARD FT3 (70°F); WOOD FIRED BOILERS —

  GRAINS/DRY STANDARD FT3 (70°F); ALL OTHER BOILERS LBS/MILLION BTU HEAT INPUT.

  \*\*\* EXIT GAS SULFUR DIOXIDE CONCENTRATIONS UNITS: PROCESS PPM BY VOLUME, DRY BASES; BOILERS LBS/MILLION BTU HEAT
- INPUT.

NOT TO BE USED FOR TITLE V APPLICATIONS

men e s



PLEASE TYPE OR PRINT, SUBMIT IN DUPLICATE AND ATTACH TO THE PERMIT APPLICATION.

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## PROCESS OR FUEL BURNING SOURCE DESCRIPTION

APC21(& 24)

	224 241 250					1111	ΔPC	COMPANY-POINT NO.		
1.	ORGANIZATION NAME	74.	COMPANIA TOMATAGE							
	Cleveland TN Hospital Co.,				SIC CODE	111	170	PERMIT/LOG NO.		
2.	06-0056-01						APC	, PERMIT/LOG NO.		
3.	DESCRIPTION OF PROCESS OR									
	Emergency generators used d annually load banked.		3				Git	enerator - CAT #2		
4.	NORMAL OPERATION:	HOURS/DA	Y DAYS/W	VEEK	WEEKS/YE	AR	DA	YS/YEAR		
	<b>→</b>	1	1		52		1			
5.	PERCENT ANNUAL	DECFEB.	MARCH	I-MAY	JUNE-AUG.	Sc.	SEPTNOV.			
Je	THROUGHPUT: →	25%	25%		25%		25%			
6.	TYPE OF PERMIT APPLICATIO	N					( CHECK BELOW ONE ONLY )			
	PROCESS SOURCE: APPLY FOR RIGHT, AND COM	APLETE LINE	S 7, 8, 13, ANI	0 14 ).				( )		
	( CHECK AT RIG	ATED. APPLY HT, AND CON	FOR A SEPAI PLETE LINES	RATE PERMIT FOR S 7, 8, AND 10 THR	(EACH SOUL OUGH 14)	RCE.		( )		
	RURNER AND CO	ATED, COMP OMPLETE AN	LETE THIS FO EMISSION PO	OF COMBUSTION ORM FOR EACH BO DINT DESCRIPTION ND COMPLETE LI	OILER OR FU N FORM ( AP NES 9 TO 14 )	EL C 22 )		( x )		
7.	TYPE OF OPERATION: CONTI			TCH	NORMAL I	BATCH	NC	DRMAL BATCHES/DAY		
	(	)	(	)			1	(FOR APC USE ONLY)		
8.	PROCESS MATERIAL INPUTS A				INPUT RATES (POUNDS/HOUR) DESIGN ACTUAL		- 1/1	SCC CODE		
	IN-PROCESS SOLID FUELS A.	I I	EFERENCE	DESIGN	ACIO	110	7			
	Α.						1			
0	В.						1			
	c.						1			
	D. / //		***************************************				1			
-	E						1			
	F.						1			
-	G.						1			
			TOTALS				1			
				The second secon			-			

<sup>\*</sup> A SIMPLE PROCESS FLOW DIAGRAM MUST BE ATTACHED.

BOILER	STACK	TYPE OF FIRING*		RATED BC	A SEPARATE FORM FOR EACH BO TED BOILER RATED INPUT				RATING	
NUMBER	NUMBER**	27/4		HORSEPO'		APACITY 0°BTU/HR)		PAC	CITY AND UNITS)	
N/A	N/A	N/A		N/A		N/A	N/A	N/A		
BOILER SE	RIAL NO.	DATE CONSTRUC	CTED	DATE OF I	LAST MODIFICATION (EXPLAIN IN COMMENTS BELOW).					
N/A		N/A		N/A						
*** CYCLO REINJE IN CON	ONE, SPREADE ECTION ), OTHE AMENTS ).	MMON STACK WILL R ( WITH OR WITHO ER STOKER ( SPECIF	OUT REINJECT Y TYPE ), HAN	ON ), PULVER ND FIRED, AUT	ZED ( WET OMATIC, (	OR OTHER T	TYPE ( DESCRIBE )	BEL	OW	
		E FOR A PROCESS S	SOURCE WITH	IN-PROCESS F					OURCE)	
PRIMARY	FUEL TYPE (SI	PECIFY) Fuel Oil	l #2 (Diesel)		N/A	Y FUEL TY	PE(S)(SPECIFY)			
FUELS USE	ED	ANNUAL USAGE		Y USAGE	%	%	BTU VALUE		(FOR APC ONL	
NATURAL	GAS <sup>,</sup>	10° CUFT	DESIGN	AVERAGE CUFT	SULFUE		OF FUEL	$\dashv$	SCC CODE	
Miole	0115.	10 00.1	0011		1111		1,000			
#2 FUEL O	IL:	10 <sup>3</sup> GAL	GAL	GAL		111				
Diesel		512	57	2.5		111				
#5 FUEL O	L;	10 <sup>3</sup> GAL	GAL	GAT		111				
#6 FUEL O	L:	10 <sup>3</sup> GAL	GAL	GAL		111				
COAL:		TONS	LBS	LBS					a saven a service	
WOOD:		TONS	LBS	LBS	1111					
LIQUID PR	OPANE:	10 <sup>3</sup> GAL	GAL	GAL	1111		85,000		N. C. Marine	
OTHER (.S TYPE & UI				***************************************						
11. IF WOOD	IS USED AS A	FUEL, SPECIFY TY	PES AND EST	IMATE PERCI	ENT BY WI	EIGHT OF	BARK			
12 15 15 10 00 0	TO TICED WITH	OTHER FUELS, SF	DECIEV DEDC	ENT DV WEIG	HT OF WO	ODCHAR	CED TO THE RUP	NER	)	
12. IF WOOD	IS OSED WILL	OTHER POELS, SI	ECIFI I BAC	DIVI DI WEIG	ar or no	OD CILIAN		4 122	7	
13. COMMEN	TS		1,144							

14. SIGNATURE	DATE
the same of the sa	8/10/12
7	