

(iii) Description and quantity of raw materials handled for each product (maximum per hour and average per year).

(iv) Types of fuels burned, quantities and characteristics (maximum and average quantities per hour, average per year).

(v) Description and quantity of solid wastes generated (per year) and method of disposal.

(3) A description of the air pollution control equipment in use or proposed to control the designated pollutant, including:

(i) Verbal description of equipment.

(ii) Optimum control efficiency, in percent. This shall be a combined efficiency when more than one device operates in series. The method of control efficiency determination shall be indicated (e.g., design efficiency, measured efficiency, estimated efficiency).

(iii) Annual average control efficiency, in percent, taking into account control equipment down time. This shall be a combined efficiency when more than one device operates in series.

(4) An estimate of the designated pollutant emissions from the designated facility (maximum per hour and average per year). The method of emission determination shall also be specified (e.g., stack test, material balance, emission factor).

[40 FR 53349, Nov. 17, 1975]

APPENDIX E TO PART 60 [RESERVED]

APPENDIX F TO PART 60—QUALITY ASSURANCE PROCEDURES

PROCEDURE 1. QUALITY ASSURANCE REQUIREMENTS FOR GAS CONTINUOUS EMISSION MONITORING SYSTEMS USED FOR COMPLIANCE DETERMINATION

1. Applicability and Principle

1.1 Applicability. Procedure 1 is used to evaluate the effectiveness of quality control (QC) and quality assurance (QA) procedures and the quality of data produced by any continuous emission monitoring system (CEMS) that is used for determining compliance with the emission standards on a continuous basis as specified in the applicable regulation. The CEMS may include pollutant (e.g., SO₂ and NO_x) and diluent (e.g., O₂ or CO₂) monitors.

This procedure specifies the minimum QA requirements necessary for the control and assessment of the quality of CEMS data submitted to the Environmental Protection Agency (EPA). Source owners and operators responsible for one or more CEMS's used for compliance monitoring must meet these minimum requirements and are encouraged to develop and implement a more extensive QA program or to continue such programs where they already exist.

Data collected as a result of QA and QC measures required in this procedure are to be

submitted to the Agency. These data are to be used by both the Agency and the CEMS operator in assessing the effectiveness of the CEMS QC and QA procedures in the maintenance of acceptable CEMS operation and valid emission data.

Appendix F, Procedure 1 is applicable December 4, 1987. The first CEMS accuracy assessment shall be a relative accuracy test audit (RATA) (see section 5) and shall be completed by March 4, 1988 or the date of the initial performance test required by the applicable regulation, whichever is later.

1.2 Principle. The QA procedures consist of two distinct and equally important functions. One function is the assessment of the quality of the CEMS data by estimating accuracy. The other function is the control and improvement of the quality of the CEMS data by implementing QC policies and corrective actions. These two functions form a control loop: When the assessment function indicates that the data quality is inadequate, the control effort must be increased until the data quality is acceptable. In order to provide uniformity in the assessment and reporting of data quality, this procedure explicitly specifies the assessment methods for response drift and accuracy. The methods are based on procedures included in the applicable performance specifications (PS's) in appendix B of 40 CFR part 60. Procedure 1 also requires the analysis of the EPA audit samples concurrent with certain reference method (RM) analyses as specified in the applicable RM's.

Because the control and corrective action function encompasses a variety of policies, specifications, standards, and corrective measures, this procedure treats QC requirements in general terms to allow each source owner or operator to develop a QC system that is most effective and efficient for the circumstances.

2. Definitions

2.1 Continuous Emission Monitoring System. The total equipment required for the determination of a gas concentration or emission rate.

2.2 Diluent Gas. A major gaseous constituent in a gaseous pollutant mixture. For combustion sources, CO₂ and O₂ are the major gaseous constituents of interest.

2.3 Span Value. The upper limit of a gas concentration measurement range that is specified for affected source categories in the applicable subpart of the regulation.

2.4 Zero, Low-Level, and High-Level Values. The CEMS response values related to the source specific span value. Determination of zero, low-level, and high-level values is defined in the appropriate PS in appendix B of this part.

2.5 Calibration Drift (CD). The difference in the CEMS output reading from a reference value after a period of operation during

which no unscheduled maintenance, repair or adjustment took place. The reference value may be supplied by a cylinder gas, gas cell, or optical filter and need not be certified.

2.6 Relative Accuracy (RA). The absolute mean difference between the gas concentration or emission rate determined by the CEMS and the value determined by the RM's plus the 2.5 percent error confidence coefficient of a series of tests divided by the mean of the RM tests or the applicable emission limit.

3. QC Requirements

Each source owner or operator must develop and implement a QC program. As a minimum, each QC program must include written procedures which should describe in detail, complete, step-by-step procedures and operations for each of the following activities:

1. Calibration of CEMS.
2. CD determination and adjustment of CEMS.
3. Preventive maintenance of CEMS (including spare parts inventory).
4. Data recording, calculations, and reporting.
5. Accuracy audit procedures including sampling and analysis methods.
6. Program of corrective action for malfunctioning CEMS.

As described in section 5.2, whenever excessive inaccuracies occur for two consecutive quarters, the source owner or operator must revise the current written procedures or modify or replace the CEMS to correct the deficiency causing the excessive inaccuracies.

These written procedures must be kept on record and available for inspection by the enforcement agency.

4. CD Assessment

4.1 CD Requirement. As described in 40 CFR 60.13(d), source owners and operators of CEMS must check, record, and quantify the CD at two concentration values at least once daily (approximately 24 hours) in accordance with the method prescribed by the manufacturer. The CEMS calibration must, as minimum, be adjusted whenever the daily zero (or low-level) CD or the daily high-level CD exceeds two times the limits of the applicable PS's in appendix B of this regulation.

4.2 Recording Requirement for Automatic CD Adjusting Monitors. Monitors that automatically adjust the data to the corrected calibration values (e.g., microprocessor control) must be programmed to record the unadjusted concentration measured in the CD prior to resetting the calibration, if performed, or record the amount of adjustment.

4.3 Criteria for Excessive CD. If either the zero (or low-level) or high-level CD result exceeds twice the applicable drift specification

in appendix B for five, consecutive, daily periods, the CEMS is out-of-control. If either the zero (or low-level) or high-level CD result exceeds four times the applicable drift specification in appendix B during any CD check, the CEMS is out-of-control. If the CEMS is out-of-control, take necessary corrective action. Following corrective action, repeat the CD checks.

4.3.1 Out-Of-Control Period Definition. The beginning of the out-of-control period is the time corresponding to the completion of the fifth, consecutive, daily CD check with a CD in excess of two times the allowable limit, or the time corresponding to the completion of the daily CD check preceding the daily CD check that results in a CD in excess of four times the allowable limit. The end of the out-of-control period is the time corresponding to the completion of the CD check following corrective action that results in the CD's at both the zero (or low-level) and high-level measurement points being within the corresponding allowable CD limit (i.e., either two times or four times the allowable limit in appendix B).

4.3.2 CEMS Data Status During Out-of-Control Period. During the period the CEMS is out-of-control, the CEMS data may not be used in calculating emission compliance nor be counted towards meeting minimum data availability as required and described in the applicable subpart [e.g., §60.47a(f)].

4.4 Data Recording and Reporting. As required in §60.7(d) of this regulation (40 CFR part 60), all measurements from the CEMS must be retained on file by the source owner for at least 2 years. However, emission data obtained on each successive day while the CEMS is out-of-control may not be included as part of the minimum daily data requirement of the applicable subpart [e.g., §60.47a(f)] nor be used in the calculation of reported emissions for that period.

5. Data Accuracy Assessment

5.1 Auditing Requirements. Each CEMS must be audited at least once each calendar quarter. Successive quarterly audits shall occur no closer than 2 months. The audits shall be conducted as follows:

5.1.1 Relative Accuracy Test Audit (RATA). The RATA must be conducted at least once every four calendar quarters, except as otherwise noted in section 5.1.4 of this appendix. Conduct the RATA as described for the RA test procedure in the applicable PS in appendix B (e.g., PS 2 for SO₂ and NO_x). In addition, analyze the appropriate performance audit samples received from EPA as described in the applicable sampling methods (e.g., Methods 6 and 7).

5.1.2 Cylinder Gas Audit (CGA). If applicable, a CGA may be conducted in three of four calendar quarters, but in no more than three quarters in succession.

To conduct a CGA: (1) Challenge the CEMS (both pollutant and diluent portions of the CEMS, if applicable) with an audit gas of known concentration at two points within the following ranges:

Audit point	Audit range		
	Pollutant monitors	Diluent monitors for—	
		CO ₂	O ₂
1	20 to 30% of span value.	5 to 8% by volume.	4 to 6% by volume.
2	50 to 60% of span value.	10 to 14% by volume.	8 to 12% by volume.

Challenge the CEMS three times at each audit point, and use the average of the three responses in determining accuracy.

Use of separate audit gas cylinder for audit points 1 and 2. Do not dilute gas from audit cylinder when challenging the CEMS.

The monitor should be challenged at each audit point for a sufficient period of time to assure adsorption-desorption of the CEMS sample transport surfaces has stabilized.

(2) Operate each monitor in its normal sampling mode, i.e., pass the audit gas through all filters, scrubbers, conditioners, and other monitor components used during normal sampling, and as much of the sampling probe as is practical. At a minimum, the audit gas should be introduced at the connection between the probe and the sample line.

(3) Use Certified Reference Materials (CRM's) (See Citation 1) audit gases that have been certified by comparison to National Institute of Standards and Technology (NIST) or EPA Traceability Protocol Materials (ETPM's) following the most recent edition of EPA's Traceability Protocol No. 1 (See Citation 2). Procedures for preparation of CRM's are described in Citation 1. Procedures for preparation of ETPM's are described in Citation 2. As an alternative to CRM's or ETPM gases, Method 205 (See Citation 3) may be used. The difference between the actual concentration of the audit gas and the concentration indicated by the monitor is used to assess the accuracy of the CEMS.

5.1.3 Relative Accuracy Audit (RAA). The RAA may be conducted three of four calendar quarters, but in no more than three quarters in succession. To conduct a RAA, follow the procedure described in the applicable PS in appendix B for the relative accuracy test, except that only three sets of measurement data are required. Analyses of EPA performance audit samples are also required.

The relative difference between the mean of the RM values and the mean of the CEMS responses will be used to assess the accuracy of the CEMS.

5.1.4 Other Alternative Audits. Other alternative audit procedures may be used as approved by the Administrator for three of four

calendar quarters. One RATA is required at least every four calendar quarters, except in the case where the affected facility is off-line (does not operate) in the fourth calendar quarter since the quarter of the previous RATA. In that case, the RATA shall be performed in the quarter in which the unit recommences operation. Also, cylinder gas audits are not be required for calendar quarters in which the affected facility does not operate.

5.2 Excessive Audit Inaccuracy. If the RA, using the RATA, CGA, or RAA exceeds the criteria in section 5.2.3, the CEMS is out-of-control. If the CEMS is out-of-control, take necessary corrective action to eliminate the problem. Following corrective action, the source owner or operator must audit the CEMS with a RATA, CGA, or RAA to determine if the CEMS is operating within the specifications. A RATA must always be used following an out-of-control period resulting from a RATA. The audit following corrective action does not require analysis of EPA performance audit samples. If audit results show the CEMS to be out-of-control, the CEMS operator shall report both the audit showing the CEMS to be out-of-control and the results of the audit following corrective action showing the CEMS to be operating within specifications.

5.2.1 Out-Of-Control Period Definition. The beginning of the out-of-control period is the time corresponding to the completion of the sampling for the RATA, RAA, or CGA. The end of the out-of-control period is the time corresponding to the completion of the sampling of the subsequent successful audit.

5.2.2 CEMS Data Status During Out-Of-Control Period. During the period the monitor is out-of-control, the CEMS data may not be used in calculating emission compliance nor be counted towards meeting minimum data availability as required and described in the applicable subpart [e.g., §60.47a(f)].

5.2.3 Criteria for Excessive Audit Inaccuracy. Unless specified otherwise in the applicable subpart, the criteria for excessive inaccuracy are:

(1) For the RATA, the allowable RA in the applicable PS in appendix B.

(2) For the CGA, ±15 percent of the average audit value or ±5 ppm, whichever is greater.

(3) For the RAA, ±15 percent of the three run average or ±7.5 percent of the applicable standard, whichever is greater.

5.3 Criteria for Acceptable QC Procedure. Repeated excessive inaccuracies (i.e., out-of-control conditions resulting from the quarterly audits) indicates the QC procedures are inadequate or that the CEMS is incapable of providing quality data. Therefore, whenever excessive inaccuracies occur for two consecutive quarters, the source owner or operator must revise the QC procedures (see section 3) or modify or replace the CEMS.

6. Calculations for CEMS Data Accuracy

6.1 RATA RA Calculation. Follow the equations described in section 8 of appendix B, PS 2 to calculate the RA for the RATA. The RATA must be calculated in units of the applicable emission standard (e.g., ng/J).

6.2 RAA Accuracy Calculation. Use the calculation procedure in the relevant performance specification to calculate the accuracy for the RAA. The RAA must be calculated in the units of the applicable emission standard.

6.3 CGA Accuracy Calculation. Use Equation 1-1 to calculate the accuracy for the CGA, which is calculated in units of the appropriate concentration (e.g., ppm SO₂ or percent O₂). Each component of the CEMS must meet the acceptable accuracy requirement.

$$A = \frac{C_m - C_a}{C_a} \times 100 \quad \text{Eq. 1-1}$$

where:

A = Accuracy of the CEMS, percent.

C_m = Average CEMS response during audit in units of applicable standard or appropriate concentration.

C_a = Average audit value (CGA certified value or three-run average for RAA) in units of applicable standard or appropriate concentration.

6.4 Example Accuracy Calculations. Example calculations for the RATA, RAA, and CGA are available in Citation 3.

7. Reporting Requirements

At the reporting interval specified in the applicable regulation, report for each CEMS the accuracy results from section 6 and the CD assessment results from section 4. Report the drift and accuracy information as a Data Assessment Report (DAR), and include one copy of this DAR for each quarterly audit with the report of emissions required under the applicable subparts of this part.

As a minimum, the DAR must contain the following information:

1. Source owner or operator name and address.
2. Identification and location of monitors in the CEMS.
3. Manufacturer and model number of each monitor in the CEMS.
4. Assessment of CEMS data accuracy and date of assessment as determined by a RATA, RAA, or CGA described in section 5 including the RA for the RATA, the A for the RAA or CGA, the RM results, the cylinder gases certified values, the CEMS responses, and the calculations results as defined in section 6. If the accuracy audit results show the CEMS to be out-of-control, the CEMS operator shall report both the audit results showing the CEMS to be out-of-control and

the results of the audit following corrective action showing the CEMS to be operating within specifications.

5. Results from EPA performance audit samples described in section 5 and the applicable RM's.

6. Summary of all corrective actions taken when CEMS was determined out-of-control, as described in sections 4 and 5.

An example of a DAR format is shown in Figure 1.

8. Bibliography

1. "A Procedure for Establishing Traceability of Gas Mixtures to Certain National Bureau of Standards Standard Reference Materials." Joint publication by NBS and EPA-600/7-81-010, Revised 1989. Available from the U.S. Environmental Protection Agency, Quality Assurance Division (MD-77), Research Triangle Park, NC 27711.
2. "EPA Traceability Protocol For Assay And Certification Of Gaseous Calibration Standards." EPA-600/R-97/121, September 1997. Available from EPA's Emission Measurement Center at <http://www.epa.gov/ttn/emc>.
3. Method 205, "Verification of Gas Dilution Systems for Field Instrument Calibrations," 40 CFR 51, appendix M.

FIGURE 1—EXAMPLE FORMAT FOR DATA ASSESSMENT REPORT

Period ending date _____
 Year _____
 Company name _____
 Plant name _____
 Source unit no. _____
 CEMS manufacturer _____
 Model no. _____
 CEMS serial no. _____
 CEMS type (e.g., in situ) _____
 CEMS sampling location (e.g., control device outlet) _____
 CEMS span values as per the applicable regulation: _____ (e.g., SO₂ _____ ppm, NO_x _____ ppm).

I. Accuracy assessment results (Complete A, B, or C below for each CEMS or for each pollutant and diluent analyzer, as applicable.) If the quarterly audit results show the CEMS to be out-of-control, report the results of both the quarterly audit and the audit following corrective action showing the CEMS to be operating properly.

A. Relative accuracy test audit (RATA) for _____ (e.g., SO₂ in ng/J).

1. Date of audit _____.
2. Reference methods (RM's) used _____ (e.g., Methods 3 and 6).
3. Average RM value _____ (e.g., ng/J, mg/dsm³, or percent volume).
4. Average CEMS value _____.
5. Absolute value of mean difference [d] _____.
6. Confidence coefficient [CC] _____.

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- 7. Percent relative accuracy (RA) _____ percent.
- 8. EPA performance audit results:
 - a. Audit lot number (1) _____ (2) _____
 - b. Audit sample number (1) _____ (2) _____
 - c. Results (mg/dsm³) (1) _____ (2) _____
 - d. Actual value (mg/dsm³)* (1) _____ (2) _____
 - e. Relative error* (1) _____ (2) _____
- B. Cylinder gas audit (CGA) for _____ (e.g., SO₂ in ppm).

	Audit point 1	Audit point 2	
1. Date of audit.			
2. Cylinder ID number.			
3. Date of certification.			
4. Type of certification	(e.g., EPA Protocol 1 or CRM).
5. Certified audit value	(e.g., ppm).
6. CEMS response value	(e.g., ppm).
7. Accuracy	percent.

- C. Relative accuracy audit (RAA) for _____ (e.g., SO₂ in ng/J).
 - 1. Date of audit _____.
 - 2. Reference methods (RM's) used _____ (e.g., Methods 3 and 6).
 - 3. Average RM value _____ (e.g., ng/J).
 - 4. Average CEMS value _____.
 - 5. Accuracy _____ percent.
 - 6. EPA performance audit results:
 - a. Audit lot number (1) _____ (2) _____
 - b. Audit sample number (1) _____ (2) _____
 - c. Results (mg/dsm³) (1) _____ (2) _____
 - d. Actual value (mg/dsm³) *(1) _____ (2) _____
 - e. Relative error* (1) _____ (2) _____
 - D. Corrective action for excessive inaccuracy.
 - 1. Out-of-control periods.
 - a. Date(s) _____.
 - b. Number of days _____.
 - 2. Corrective action taken _____
 - 3. Results of audit following corrective action. (Use format of A, B, or C above, as applicable.)
 - II. Calibration drift assessment.
 - A. Out-of-control periods.
 - 1. Date(s) _____.
 - 2. Number of days _____.
 - B. Corrective action taken _____

*To be completed by the Agency.

PROCEDURE 2—QUALITY ASSURANCE REQUIREMENTS FOR PARTICULATE MATTER CONTINUOUS EMISSION MONITORING SYSTEMS AT STATIONARY SOURCES

1.0 What Are the Purpose and Applicability of Procedure 2?

The purpose of Procedure 2 is to establish the minimum requirements for evaluating the effectiveness of quality control (QC) and quality assurance (QA) procedures and the quality of data produced by your particulate matter (PM) continuous emission monitoring system (CEMS). Procedure 2 applies to PM CEMS used for continuously determining compliance with emission standards or operating permit limits as specified in an applicable regulation or permit. Other QC procedures may apply to diluent (e.g., O₂) monitors and other auxiliary monitoring equipment included with your CEMS to facilitate PM measurement or determination of PM concentration in units specified in an applicable regulation.

1.1 What measurement parameter does Procedure 2 address? Procedure 2 covers the instrumental measurement of PM as defined by your source's applicable reference method (no Chemical Abstract Service number assigned).

1.2 For what types of devices must I comply with Procedure 2? You must comply with Procedure 2 for the total equipment that:

(1) We require you to install and operate on a continuous basis under the applicable regulation, and

(2) You use to monitor the PM mass concentration associated with the operation of a process or emission control device.

1.3 What are the data quality objectives (DQOs) of Procedure 2? The overall DQO of Procedure 2 is the generation of valid, representative data that can be transferred into useful information for determining PM CEMS concentrations averaged over a prescribed interval. Procedure 2 is also closely associated with Performance Specification 11 (PS-11).

(1) Procedure 2 specifies the minimum requirements for controlling and assessing the quality of PM CEMS data submitted to us or the delegated permitting authority.

(2) You must meet these minimum requirements if you are responsible for one or more PM CEMS used for compliance monitoring. We encourage you to develop and implement a more extensive QA program or to continue such programs where they already exist.

1.4 What is the intent of the QA/QC procedures specified in Procedure 2? Procedure 2 is intended to establish the minimum QA/QC requirements for PM CEMS and is presented in general terms to allow you to develop a

program that is most effective for your circumstances. You may adopt QA/QC procedures that go beyond these minimum requirements to ensure compliance with applicable regulations.

1.5 When must I comply with Procedure 2? You must comply with the basic requirements of Procedure 2 immediately following successful completion of the initial correlation test of PS-11.

2.0 What Are the Basic Requirements of Procedure 2?

Procedure 2 requires you to perform periodic evaluations of PM CEMS performance and to develop and implement QA/QC programs to ensure that PM CEMS data quality is maintained.

2.1 What are the basic functions of Procedure 2?

(1) Assessment of the quality of your PM CEMS data by estimating measurement accuracy;

(2) Control and improvement of the quality of your PM CEMS data by implementing QC requirements and corrective actions until the data quality is acceptable; and

(3) Specification of requirements for daily instrument zero and upscale drift checks and daily sample volume checks, as well as routine response correlation audits, absolute correlation audits, sample volume audits, and relative response audits.

3.0 What Special Definitions Apply to Procedure 2?

The definitions in Procedure 2 include those provided in PS-11 of Appendix B, with the following additions:

3.1 “Absolute Correlation Audit (ACA)” means an evaluation of your PM CEMS response to a series of reference standards covering the full measurement range of the instrument (*e.g.*, 4 mA to 20 mA).

3.2 “Correlation Range” means the range of PM CEMS responses used in the complete set of correlation test data.

3.3 “PM CEMS Correlation” means the site-specific relationship (*i.e.*, a regression equation) between the output from your PM CEMS (*e.g.*, mA) and the particulate concentration, as determined by the reference method. The PM CEMS correlation is expressed in the same units as the PM concentration measured by your PM CEMS (*e.g.*, mg/acm). You must derive this relation from PM CEMS response data and manual reference method data that were gathered simultaneously. These data must be representative of the full range of source and control device operating conditions that you expect to occur. You must develop the correlation by performing the steps presented in sections 12.2 and 12.3 of PS-11.

3.4 “Reference Method Sampling Location” means the location in your source’s exhaust

duct from which you collect manual reference method data for developing your PM CEMS correlation and for performing relative response audits (RRAs) and response correlation audits (RCAs).

3.5 “Response Correlation Audit (RCA)” means the series of tests specified in section 10.3(8) of this procedure that you conduct to ensure the continued validity of your PM CEMS correlation.

3.6 “Relative Response Audit (RRA)” means the brief series of tests specified in section 10.3(6) of this procedure that you conduct between consecutive RCAs to ensure the continued validity of your PM CEMS correlation.

3.7 “Sample Volume Audit (SVA)” means an evaluation of your PM CEMS measurement of sample volume if your PM CEMS determines PM concentration based on a measure of PM mass in an extracted sample volume and an independent determination of sample volume.

4.0 Interferences [Reserved]

5.0 What Do I Need To Know To Ensure the Safety of Persons Using Procedure 2?

People using Procedure 2 may be exposed to hazardous materials, operations, and equipment. Procedure 2 does not purport to address all of the safety issues associated with its use. It is your responsibility to establish appropriate safety and health practices and determine the applicable regulatory limitations before performing this procedure. You must consult your CEMS user’s manual for specific precautions to be taken with regard to your PM CEMS procedures.

6.0 What Equipment and Supplies Do I Need? [Reserved]

7.0 What Reagents and Standards Do I Need?

You will need reference standards or procedures to perform the zero drift check, the upscale drift check, and the sample volume check.

7.1 What is the reference standard value for the zero drift check? You must use a zero check value that is no greater than 20 percent of the PM CEMS’s response range. You must obtain documentation on the zero check value from your PM CEMS manufacturer.

7.2 What is the reference standard value for the upscale drift check? You must use an upscale check value that produces a response between 50 and 100 percent of the PM CEMS’s response range. For a PM CEMS that produces output over a range of 4 mA to 20 mA, the upscale check value must produce a response in the range of 12 mA to 20 mA. You must obtain documentation on the upscale check value from your PM CEMS manufacturer.

7.3 What is the reference standard value for the sample volume check? You must use a reference standard value or procedure that produces a sample volume value equivalent to the normal sampling rate. You must obtain documentation on the sample volume value from your PM CEMS manufacturer.

8.0 *What Sample Collection, Preservation, Storage, and Transport Are Relevant to This Procedure?* [Reserved]

9.0 *What Quality Control Measures Are Required by This Procedure for My PM CEMS?*

You must develop and implement a QC program for your PM CEMS. Your QC program must, at a minimum, include written procedures that describe, in detail, complete step-by-step procedures and operations for the activities in paragraphs (1) through (8) of this section.

(1) Procedures for performing drift checks, including both zero drift and upscale drift and the sample volume check (see sections 10.2(1), (2), and (5)).

(2) Methods for adjustment of PM CEMS based on the results of drift checks, sample volume checks (if applicable), and the periodic audits specified in this procedure.

(3) Preventative maintenance of PM CEMS (including spare parts inventory and sampling probe integrity).

(4) Data recording, calculations, and reporting.

(5) RCA and RRA procedures, including sampling and analysis methods, sampling strategy, and structuring test conditions over the prescribed range of PM concentrations.

(6) Procedures for performing ACAs and SVAs and methods for adjusting your PM CEMS response based on ACA and SVA results.

(7) Program of corrective action for malfunctioning PM CEMS, including flagged data periods.

(8) For extractive PM CEMS, procedures for checking extractive system ducts for material accumulation.

9.1 What QA/QC documentation must I have? You are required to keep the written QA/QC procedures on record and available for inspection by us, the State, and/or local enforcement agency for the life of your CEMS or until you are no longer subject to the requirements of this procedure.

9.2 How do I know if I have acceptable QC procedures for my PM CEMS? Your QC procedures are inadequate or your PM CEMS is incapable of providing quality data if you fail two consecutive QC audits (*i.e.*, out-of-control conditions resulting from the annual audits, quarterly audits, or daily checks). Therefore, if you fail the same two consecutive audits, you must revise your QC procedures or modify or replace your PM CEMS to correct the deficiencies causing the excessive

inaccuracies (see section 10.4 for limits for excessive audit inaccuracy).

10.0 *What Calibration/Correlation and Standardization Procedures Must I Perform for My PM CEMS?*

You must generate a site-specific correlation for each of your PM CEMS installation(s) relating response from your PM CEMS to results from simultaneous PM reference method testing. The PS-11 defines procedures for developing the correlation and defines a series of statistical parameters for assessing acceptability of the correlation. However, a critical component of your PM CEMS correlation process is ensuring the accuracy and precision of reference method data. The activities listed in sections 10.1 through 10.10 assure the quality of the correlation.

10.1 When should I use paired trains for reference method testing? Although not required, we recommend that you should use paired-train reference method testing to generate data used to develop your PM CEMS correlation and for RCA testing. Guidance on the use of paired sampling trains can be found in the PM CEMS Knowledge Document (see section 16.5 of PS-11).

10.2 What routine system checks must I perform on my PM CEMS? You must perform routine checks to ensure proper operation of system electronics and optics, light and radiation sources and detectors, and electric or electro-mechanical systems. Necessary components of the routine system checks will depend on design details of your PM CEMS. As a minimum, you must verify the system operating parameters listed in paragraphs (1) through (5) of this section on a daily basis. Some PM CEMS may perform one or more of these functions automatically or as an integral portion of unit operations; for other PM CEMS, you must initiate or perform one or more of these functions manually.

(1) You must check the zero drift to ensure stability of your PM CEMS response to the zero check value. You must determine system output on the most sensitive measurement range when the PM CEMS is challenged with a zero reference standard or procedure. You must, at a minimum, adjust your PM CEMS whenever the daily zero drift exceeds 4 percent.

(2) You must check the upscale drift to ensure stability of your PM CEMS response to the upscale check value. You must determine system output when the PM CEMS is challenged with a reference standard or procedure corresponding to the upscale check value. You must, at a minimum, adjust your PM CEMS whenever the daily upscale drift check exceeds 4 percent.

(3) For light-scattering and extinction-type PM CEMS, you must check the system optics to ensure that system response has not

been altered by the condition of optical components, such as fogging of lens and performance of light monitoring devices.

(4) You must record data from your automatic drift-adjusting PM CEMS before any adjustment is made. If your PM CEMS automatically adjusts its response to the corrected calibration values (*e.g.*, micro-processor control), you must program your PM CEMS to record the unadjusted concentration measured in the drift check before resetting the calibration. Alternately, you may program your PM CEMS to record the amount of adjustment.

(5) For extractive PM CEMS that measure the sample volume and use the measured sample volume as part of calculating the output value, you must check the sample volume on a daily basis to verify the accuracy of the sample volume measuring equipment. This sample volume check must be done at the normal sampling rate of your PM CEMS. You must adjust your PM CEMS sample volume measurement whenever the daily sample volume check error exceeds 10 percent.

10.3 What are the auditing requirements for my PM CEMS? You must subject your PM CEMS to an ACA and an SVA, as applicable, at least once each calendar quarter. Successive quarterly audits must occur no closer than 2 months apart. You must conduct an RCA and an RRA at the frequencies specified in the applicable regulation or facility operating permit. An RRA or RCA conducted during any calendar quarter can take the place of the ACA required for that calendar quarter. An RCA conducted during the period in which an RRA is required can take the place of the RRA for that period.

(1) When must I perform an ACA? You must perform an ACA each quarter unless you conduct an RRA or RCA during that same quarter.

(2) How do I perform an ACA? You perform an ACA according to the procedure specified in paragraphs (2)(i) through (v) of this section.

(i) You must challenge your PM CEMS with an audit standard or an equivalent audit reference to reproduce the PM CEMS's measurement at three points within the following ranges:

Audit point	Audit range
1	0 to 20 percent of measurement range
2	40 to 60 percent of measurement range
3	70 to 100 percent of measurement range

(ii) You must then challenge your PM CEMS three times at each audit point and use the average of the three responses in determining accuracy at each audit point. Use a separate audit standard for audit points 1, 2, and 3. Challenge the PM CEMS at each

audit point for a sufficient period of time to ensure that your PM CEMS response has stabilized.

(iii) Operate your PM CEMS in the mode, manner, and range specified by the manufacturer.

(iv) Store, maintain, and use audit standards as recommended by the manufacturer.

(v) Use the difference between the actual known value of the audit standard and the response of your PM CEMS to assess the accuracy of your PM CEMS.

(3) When must I perform an SVA? You must perform an audit of the measured sample volume (*e.g.*, the sampling flow rate for a known time) once per quarter for applicable PM CEMS with an extractive sampling system. Also, you must perform and pass an SVA prior to initiation of any of the reference method data collection runs for an RCA or RRA.

(4) How do I perform an SVA? You perform an SVA according to the procedure specified in paragraphs (4)(i) through (iii) of this section.

(i) You perform an SVA by independently measuring the volume of sample gas extracted from the stack or duct over each batch cycle or time period with a calibrated device. You may make this measurement either at the inlet or outlet of your PM CEMS, so long as it measures the sample gas volume without including any dilution or recycle air. Compare the measured volume with the volume reported by your PM CEMS for the same cycle or time period to calculate sample volume accuracy.

(ii) You must make measurements during three sampling cycles for batch extractive monitors (*e.g.*, Beta-gauge) or during three periods of at least 20 minutes for continuous extractive PM CEMS.

(iii) You may need to condense, collect, and measure moisture from the sample gas prior to the calibrated measurement device (*e.g.*, dry gas meter) and correct the results for moisture content. In any case, the volumes measured by the calibrated device and your PM CEMS must be on a consistent temperature, pressure, and moisture basis.

(5) How often must I perform an RRA? You must perform an RRA at the frequency specified in the applicable regulation or facility operating permit. You may conduct an RCA instead of an RRA during the period when the RRA is required.

(6) How do I perform an RRA? You must perform the RRA according to the procedure specified in paragraphs (6)(i) and (ii) of this section.

(i) You perform an RRA by collecting three simultaneous reference method PM concentration measurements and PM CEMS measurements at the as-found source operating conditions and PM concentration.

(ii) We recommend that you use paired trains for reference method sampling. Guidance on the use of paired sampling trains can be found in the PM CEMS Knowledge Document (see section 16.5 of PS-11).

(7) How often must I perform an RCA? You must perform an RCA at the frequency specified in the applicable regulation or facility operating permit.

(8) How do I perform an RCA? You must perform the RCA according to the procedures for the PM CEMS correlation test described in PS-11, section 8.6, except that the minimum number of runs required is 12 in the RCA instead of 15 as specified in PS-11.

(9) What other alternative audits can I use? You can use other alternative audit procedures as approved by us, the State, or local agency for the quarters when you would conduct ACAs.

10.4 What are my limits for excessive audit inaccuracy? Unless specified otherwise in the applicable subpart, the criteria for excessive audit inaccuracy are listed in paragraphs (1) through (6) of this section.

(1) What are the criteria for excessive zero or upscale drift? Your PM CEMS is out of control if the zero drift check or upscale drift check either exceeds 4 percent for five consecutive daily periods or exceeds 8 percent for any one day.

(2) What are the criteria for excessive sample volume measurement error? Your PM CEMS is out of control if sample volume check error exceeds 10 percent for five consecutive daily periods or exceeds 20 percent for any one day.

(3) What are the criteria for excessive ACA error? Your PM CEMS is out of control if the results of any ACA exceed ± 10 percent of the average audit value, as calculated using Equation 2-1a, or 7.5 percent of the applicable standard, as calculated using Equation 2-1b, whichever is greater.

(4) What is the criterion for excessive SVA error? Your PM CEMS is out of control if results exceed ± 5 percent of the average sample volume audit value.

(5) What are the criteria for passing an RCA? To pass an RCA, you must meet the criteria specified in paragraphs (5)(i) through (iii) of this section. If your PM CEMS fails to meet these RCA criteria, it is out of control.

(i) For all 12 data points, the PM CEMS response value can be no greater than the greatest PM CEMS response value used to develop your correlation curve.

(ii) For 9 of the 12 data points, the PM CEMS response value must lie within the PM CEMS output range used to develop your correlation curve.

(iii) At least 75 percent of a minimum number of 12 sets of PM CEMS and reference method measurements must fall within a specified area on a graph of the correlation regression line. The specified area on the graph of the correlation regression line is de-

finied by two lines parallel to the correlation regression line, offset at a distance of ± 25 percent of the numerical emission limit value from the correlation regression line.

(6) What are the criteria to pass an RRA? To pass an RRA, you must meet the criteria specified in paragraphs (6)(i) and (ii) of this section. If your PM CEMS fails to meet these RRA criteria, it is out of control.

(i) For all three data points, the PM CEMS response value can be no greater than the greatest PM CEMS response value used to develop your correlation curve.

(ii) For two of the three data points, the PM CEMS response value must lie within the PM CEMS output range used to develop your correlation curve.

(iii) At least two of the three sets of PM CEMS and reference method measurements must fall within the same specified area on a graph of the correlation regression line as required for the RCA and described in paragraph (5)(iii) of this section.

10.5 What do I do if my PM CEMS is out of control? If your PM CEMS is out of control, you must take the actions listed in paragraphs (1) and (2) of this section.

(1) You must take necessary corrective action to eliminate the problem and perform tests, as appropriate, to ensure that the corrective action was successful.

(i) Following corrective action, you must repeat the previously failed audit to confirm that your PM CEMS is operating within the specifications.

(ii) If your PM CEMS failed an RRA, you must take corrective action until your PM CEMS passes the RRA criteria. If the RRA criteria cannot be achieved, you must perform an RCA.

(iii) If your PM CEMS failed an RCA, you must follow procedures specified in section 10.6 of this procedure.

(2) You must report both the audit showing your PM CEMS to be out of control and the results of the audit following corrective action showing your PM CEMS to be operating within specifications.

10.6 What do I do if my PM CEMS fails an RCA? After an RCA failure, you must take all applicable actions listed in paragraphs (1) through (3) of this section.

(1) Combine RCA data with data from the active PM CEMS correlation and perform the mathematical evaluations defined in PS-11 for development of a PM CEMS correlation, including examination of alternate correlation models (*i.e.*, linear, polynomial, logarithmic, exponential, and power). If the expanded data base and revised correlation meet PS-11 statistical criteria, use the revised correlation.

(2) If the criteria specified in paragraph (1) of this section are not achieved, you must develop a new PM CEMS correlation based on revised data. The revised data set must consist of the test results from only the

RCA. The new data must meet all requirements of PS-11 to develop a revised PM CEMS correlation, except that the minimum number of sets of PM CEMS and reference method measurements is 12 instead of the minimum of 15 sets required by PS-11. Your PM CEMS is considered to be back in controlled status when the revised correlation meets all of the performance criteria specified in section 13.2 of PS-11.

(3) If the actions in paragraphs (1) and (2) of this section do not result in an acceptable correlation, you must evaluate the cause(s) and comply with the actions listed in paragraphs (3)(i) through (iv) of this section within 90 days after the completion of the failed RCA.

(i) Completely inspect your PM CEMS for mechanical or operational problems. If you find a mechanical or operational problem, repair your PM CEMS and repeat the RCA.

(ii) You may need to relocate your PM CEMS to a more appropriate measurement location. If you relocate your PM CEMS, you must perform a new correlation test according to the procedures specified in PS-11.

(iii) The characteristics of the PM or gas in your source's flue gas stream may have changed such that your PM CEMS measurement technology is no longer appropriate. If this is the case, you must install a PM CEMS with measurement technology that is appropriate for your source's flue gas characteristics. You must perform a new correlation test according to the procedures specified in PS-11.

(iv) If the corrective actions in paragraphs (3)(i) through (iii) of this section were not successful, you must petition us, the State, or local agency for approval of alternative criteria or an alternative for continuous PM monitoring.

10.7 When does the out-of-control period begin and end? The out-of-control period begins immediately after the last test run or check of an unsuccessful RCA, RRA, ACA, SVA, drift check, or sample volume check. The out-of-control period ends immediately after the last test run or check of the subsequent successful audit or drift check.

10.8 Can I use the data recorded by my PM CEMS during out-of-control periods? During any period when your PM CEMS is out of control, you may not use your PM CEMS data to calculate emission compliance or to meet minimum data availability requirements described in the applicable regulation.

10.9 What are the QA/QC reporting requirements for my PM CEMS? You must report the accuracy results for your PM CEMS, specified in section 10.4 of this procedure, at the interval specified in the applicable regulation. Report the drift and accuracy information as a Data Assessment Report (DAR), and include one copy of this DAR for each quarterly audit with the report of emissions required under the applicable regulation. An

example DAR is provided in Procedure 1, Appendix F of this part.

10.10 What minimum information must I include in my DAR? As a minimum, you must include the information listed in paragraphs (1) through (5) of this section in the DAR:

- (1) Your name and address.
- (2) Identification and location of monitors in your CEMS.
- (3) Manufacturer and model number of each monitor in your CEMS.
- (4) Assessment of PM CEMS data accuracy/acceptability, and date of assessment, as determined by an RCA, RRA, ACA, or SVA described in section 10, including the acceptability determination for the RCA or RRA, the accuracy for the ACA or SVA, the reference method results, the audit standards, your PM CEMS responses, and the calculation results as defined in section 12. If the accuracy audit results show your PM CEMS to be out of control, you must report both the audit results showing your PM CEMS to be out of control and the results of the audit following corrective action showing your PM CEMS to be operating within specifications.
- (5) Summary of all corrective actions you took when you determined your PM CEMS to be out of control, as described in section 10.5, or after failing on RCA, as described in section 10.6.

10.7 Where and how long must I retain the QA data that this procedure requires me to record for my PM CEMS? You must keep the records required by this procedure for your PM CEMS onsite and available for inspection by us, the State, and/or local enforcement agency for a period of 5 years.

11.0 What Analytical Procedures Apply to This Procedure?

Sample collection and analysis are concurrent for this procedure. You must refer to the appropriate reference method for the specific analytical procedures.

12.0 What Calculations and Data Analysis Must I Perform for my PM CEMS?

(1) How do I determine RCA and RRA acceptability? You must plot each of your PM CEMS and reference method data sets from an RCA or RRA on a graph based on your PM CEMS correlation line to determine if the criteria in paragraphs 10.4(5) or (6), respectively, are met.

(2) How do I calculate ACA accuracy? You must use either Equation 2-1a or 2-1b to calculate ACA accuracy for each of the three audit points. However, when calculating ACA accuracy for the first audit point (0 to 20 percent of measurement range), you must use Equation 2-1b to calculate ACA accuracy if the reference standard value (R_w) equals zero.

$$\text{ACA Accuracy} = \frac{|R_{\text{CEM}} - R_{\text{V}}|}{R_{\text{V}}} \times 100\% \quad \text{Eq. 2-1a}$$

Where:

ACA Accuracy = The ACA accuracy at each audit point, in percent,

R_{CEM} = Your PM CEMS response to the reference standard, and
 R_{V} = The reference standard value.

$$\text{ACA Accuracy} = \frac{|C_{\text{CEM}} - C_{\text{RV}}|}{C_{\text{S}}} \times 100\% \quad \text{Eq. 2-1b}$$

Where:

ACA Accuracy = The ACA accuracy at each audit point, in percent,

C_{CEM} = The PM concentration that corresponds to your PM CEMS response to the reference standard, as calculated using the correlation equation for your PM CEMS,

C_{RV} = The PM concentration that corresponds to the reference standard value in units consistent with C_{CEM} , and
 C_{S} = The PM concentration that corresponds to the applicable emission limit in units consistent with C_{CEM} .

(3) How do I calculate daily upscale and zero drift? You must calculate the upscale drift using Equation 2-2 and the zero drift using Equation 2-3:

$$UD = \frac{|R_{\text{CEM}} - R_{\text{U}}|}{R_{\text{r}}} \times 100 \quad \text{Eq. 2-2}$$

Where:

UD = The upscale drift of your PM CEMS, in percent,

R_{CEM} = Your PM CEMS response to the upscale check value,
 R_{U} = The upscale check value, and
 R_{r} = The response range of the analyzer.

$$ZD = \frac{|R_{\text{CEM}} - R_{\text{L}}|}{R_{\text{r}}} \times 100 \quad \text{Eq. 2-3}$$

Where:

ZD = The zero (low-level) drift of your PM CEMS, in percent,

R_{CEM} = Your PM CEMS response of the zero check value,
 R_{L} = The zero check value, and

R_{r} = The response range of the analyzer.

(4) How do I calculate SVA accuracy? You must use Equation 2-4 to calculate the accuracy, in percent, for each of the three SVA tests or the daily sample volume check:

$$\text{SVA Accuracy} = \frac{|V_{\text{M}} - V_{\text{R}}|}{V_{\text{R}}} \times 100 \quad \text{Eq. 2-4}$$

Where:

SVA Accuracy = The SVA accuracy at each audit point, in percent,

V_{M} = Sample gas volume determined/reported by your PM CEMS (e.g., dscm), and

V_R = Sample gas volume measured by the independent calibrated reference device (e.g., dscm) for the SVA or the reference value for the daily sample volume check.

NOTE: Before calculating SVA accuracy, you must correct the sample gas volumes measured by your PM CEMS and the independent calibrated reference device to the same basis of temperature, pressure, and moisture content. You must document all data and calculations.

13.0 Method Performance [Reserved]

14.0 Pollution Prevention [Reserved]

15.0 Waste Management [Reserved]

16.0 Which References are Relevant to This Method? [Reserved]

17.0 What Tables, Diagrams, Flowcharts, and Validation Data Are Relevant to This Method? [Reserved]

PROCEDURE 3—QUALITY ASSURANCE REQUIREMENTS FOR CONTINUOUS OPACITY MONITORING SYSTEMS AT STATIONARY SOURCES

1.0 What are the purpose and applicability of Procedure 3?

The purpose of Procedure 3 is to establish quality assurance and quality control (QA/QC) procedures for continuous opacity monitoring systems (COMS). Procedure 3 applies to COMS used to demonstrate continuous compliance with opacity standards specified in new source performance standards (NSPS) promulgated by EPA pursuant to section 111(b) of the Clean Air Act, 42 U.S.C. 7411(b)—Standards of Performance for New Stationary Sources.

1.1 What are the data quality objectives of Procedure 3? The overall data quality objective (DQO) of Procedure 3 is the generation of valid and representative opacity data. Procedure 3 specifies the minimum requirements for controlling and assessing the quality of COMS data submitted to us or the delegated regulatory agency. Procedure 3 requires you to perform periodic evaluations of a COMS performance and to develop and implement QA/QC programs to ensure that COMS data quality is maintained.

1.2 What is the intent of the QA/QC procedures specified in Procedure 3? Procedure 3 is intended to establish the minimum QA/QC requirements to verify and maintain an acceptable level of quality of the data produced by COMS. It is presented in general terms to allow you to develop a program that is most effective for your circumstances.

1.3 When must I comply with Procedure 3? You must comply with Procedure 3 no later than November 12, 2014.

2.0 What are the basic functions of Procedure 3?

The basic functions of Procedure 3 are assessment of the quality of your COMS data and control and improvement of the quality of the data by implementing QC requirements and corrective actions. Procedure 3 provides requirements for:

- (1) Daily instrument zero and upscale drift checks and status indicators checks;
- (2) Quarterly performance audits which include the following assessments:
 - (i) Optical alignment,
 - (ii) Calibration error, and
 - (iii) Zero compensation.

Sources that achieve quality assured data for four consecutive quarters may reduce their auditing frequency to semi-annual. If a performance audit is failed, the source must resume quarterly testing for that audit requirement until it again demonstrates successful performance over four consecutive quarters.

- (3) Annual zero alignment.

3.0 What special definitions apply to Procedure 3?

The definitions in Procedure 3 include those provided in Performance Specification 1 (PS-1) of Appendix B of this part and ASTM D6216-12 and the following additional definitions.

3.1 *Out-of-control periods.* Out-of-control periods mean that one or more COMS parameters falls outside of the acceptable limits established by this rule.

(1) *Daily Assessments.* Whenever the calibration drift (CD) exceeds twice the specification of PS-1, the COMS is out-of-control. The beginning of the out-of-control period is the time corresponding to the completion of the daily calibration drift check. The end of the out-of-control period is the time corresponding to the completion of appropriate adjustment and subsequent successful CD assessment.

(2) *Quarterly and Annual Assessments.* Whenever an annual zero alignment or quarterly performance audit fails to meet the criteria established in paragraphs (2) and (3) of section 10.4, the COMS is out-of-control. The beginning of the out-of-control period is the time corresponding to the completion of the performance audit indicating the failure to meet these established criteria. The end of the out-of-control period is the time corresponding to the completion of appropriate corrective actions and the subsequent successful audit (or, if applicable, partial audit).

4.0 What interferences must I avoid?

Opacity cannot be measured accurately in the presence of condensed water vapor. Thus, COMS opacity compliance determinations cannot be made when condensed water vapor

is present, such as downstream of a wet scrubber without a reheater or at other saturated flue gas locations. Therefore, COMS must be located where condensed water vapor is not present.

5.0 What do I need to know to ensure the safety of persons using Procedure 3?

Those implementing Procedure 3 may be exposed to hazardous materials, operations and equipment. Procedure 3 does not purport to address all of the safety issues associated with its use. It is your responsibility to establish appropriate health and safety practices and determine the applicable regulatory limitations before performing this procedure. You should consult the COMS user's manual for specific precautions to take.

6.0 What equipment and supplies do I need?

The equipment and supplies that you need are specified in PS-1. You are not required to purchase a new COMS if your existing COMS meets the requirements specified in Procedure 3.

7.0 What reagents and standards do I need?

The reagents and standards that you need are specified in PS-1. You are not required to purchase a new COMS if your existing COMS meets the requirements specified in Procedure 3.

8.0 What sample collection, preservation, storage, and transport are relevant to this procedure? [Reserved]

9.0 What quality control measures are required by this procedure for my COMS?

You must develop and implement a QC program for your COMS. Your QC program must, at a minimum, include written procedures which describe in detail complete step-by-step procedures and operations for the activities in paragraphs (1) through (4):

(1) Procedures for performing drift checks, including both zero and upscale drift and the status indicators check,

(2) Procedures for performing quarterly performance audits,

(3) A means of checking the zero alignment of the COMS, and

(4) A program of corrective action for a malfunctioning COMS. The corrective action must include, at a minimum, the requirements specified in section 10.5.

9.1 What QA/QC documentation must I have? You are required to keep the QA/QC written procedures required in section 9.0 on site and available for inspection by us, the state, and/or local enforcement agencies.

9.2 What actions must I take if I fail QC audits? If you fail two consecutive annual audits, two consecutive quarterly audits, or five consecutive daily checks, you must ei-

ther revise your QC procedures or determine if your COMS is malfunctioning. If you determine that your COMS is malfunctioning, you must take the necessary corrective action as specified in section 10.5. If you determine that your COMS requires extensive repairs, you may use a substitute COMS provided the substitute meets the requirements in section 10.6.

10.0 What calibration and standardization procedures must I perform for my COMS?

(1) You must perform daily system checks to ensure proper operation of system electronics and optics, light and radiation sources and detectors, electric or electro-mechanical systems, and general stability of the system calibration. Daily is defined as any portion of a calendar day in which a unit operates.

(2) You must subject your COMS to a performance audit to include checks of the individual COMS components and factors affecting the accuracy of the monitoring data at least once per QA operating quarter. A QA operating quarter is a calendar quarter in which a unit operates at least 168 hours.

(3) At least annually, you must perform a zero alignment by comparing the COMS simulated zero to the actual clear path zero. Annually is defined as a period wherein the unit is operating at least 28 days in a calendar year. The simulated zero device produces a simulated clear path condition or low-level opacity condition, where the energy reaching the detector is between 90 and 110 percent of the energy reaching the detector under actual clear path conditions.

10.1 What daily system checks must I perform on my COMS? The specific components required to undergo daily system checks will depend on the design details of your COMS. At a minimum, you must verify the system operating parameters listed in paragraphs (1) through (3) of this section. Some COMS may perform one or more of these functions automatically or as an integral portion of unit operations; other COMS may perform one or more of these functions manually.

(1) You must check the zero drift to ensure stability of your COMS response to the simulated zero device. The simulated zero device, an automated mechanism within the transmissometer that produces a simulated clear path condition or low-level opacity condition, is used to check the zero drift. You must, at a minimum, take corrective action on your COMS whenever the daily zero drift exceeds twice the applicable drift specification in section 13.3(6) of PS-1.

(2) You must check the upscale drift to ensure stability of your COMS response to the upscale drift value. The upscale calibration device, an automated mechanism (employing an attenuator or reduced reflectance device) within the transmissometer that produces an upscale opacity value is used to check the

upscale drift. You must, at a minimum, take corrective action on your COMS whenever the daily upscale drift check exceeds twice the applicable drift specification in section 13.3(6) of PS-1.

(3) You must, at a minimum, check the status indicators, data acquisition system error messages, and other system self-diagnostic indicators. You must take appropriate corrective action based on the manufacturer's recommendations when the COMS is operating outside preset limits.

10.2 *What are the quarterly auditing requirements for my COMS?* At a minimum, the parameters listed in paragraphs (1) through (3) of this section must be included in the performance audit conducted on a quarterly basis as defined in section 10.0(2).

(1) For units with automatic zero compensation, you must determine the zero compensation for the COMS. The value of the zero compensation applied at the time of the audit must be calculated as equivalent opacity and corrected to stack exit conditions according to the procedures specified by the manufacturer. The compensation applied to the effluent by the monitor system must be recorded.

(2) You must conduct a three-point calibration error test of the COMS. Three calibration attenuators, either primary or secondary must meet the requirements of PS-1, with one exception. Instead of recalibrating the attenuators semi-annually, they must be recalibrated annually. If two annual calibrations agree within 0.5 percent opacity, the attenuators may then be calibrated once every five years. The three attenuators must be placed in the COMS light beam path for at least three nonconsecutive readings. All monitor responses must then be independently recorded from the COMS permanent data recorder. Additional guidance for conducting this test is included in section 8.1(3)(ii) of PS-1. The low-, mid-, and high-range calibration error results must be computed as the mean difference and 95 percent confidence interval for the difference between the expected and actual responses of the monitor as corrected to stack exit conditions. The equations necessary to perform the calculations are found in section 12.0 of PS-1. For the calibration error test method, you must use the external audit device. When the external audit device is installed, with no calibration attenuator inserted, the COMS measurement reading must be less than or equal to one percent opacity. You must also document procedures for properly handling and storing the external audit device and calibration attenuators within your written QC program.

(3) You must check the optical alignment of the COMS in accordance with the instrument manufacturer's recommendations. If the optical alignment varies with stack tem-

perature, perform the optical alignment test when the unit is operating.

10.3 *What are the annual auditing requirements for my COMS?*

(1) You must perform the primary zero alignment method under clear path conditions. The COMS must be removed from its installation and set up under clear path conditions. There must be no adjustments to the monitor other than the establishment of the proper monitor path length and correct optical alignment of the COMS components. You must record the COMS response to a clear condition and to the COMS's simulated zero condition as percent opacity corrected to stack exit conditions. For a COMS with automatic zero compensation, you must disconnect or disable the zero compensation mechanism or record the amount of correction applied to the COMS's simulated zero condition. The response difference in percent opacity to the clear path and simulated zero conditions must be recorded as the zero alignment error. You must adjust the COMS's simulated zero device to provide the same response as the clear path condition as specified in paragraph (3) of section 10.0.

(2) As an alternative, monitors capable of allowing the installation of an external zero device may use the device for the zero alignment provided that: (1) The external zero device setting has been established for the monitor path length and recorded for the specific COMS by comparison of the COMS responses to the installed external zero device and to the clear path condition, and (2) the external zero device is demonstrated to be capable of producing a consistent zero response when it is repeatedly (i.e., three consecutive installations and removals prior to conducting the final zero alignment check) installed on the COMS. This can be demonstrated by either the manufacturer's certificate of conformance (MCOC) or actual on-site performance. The external zero device setting must be permanently set at the time of initial zeroing to the clear path zero value and protected when not in use to ensure that the setting equivalent to zero opacity does not change. The external zero device response must be checked and recorded prior to initiating the zero alignment. If the external zero device setting has changed, you must remove the COMS from the stack in order to reset the external zero device. If you employ an external zero device, you must perform the zero alignment audits with the COMS off the stack at least every three years. If the external zero device is adjusted within the three-year period, you must perform the zero alignment with the COMS off the stack no later than three years from the date of adjustment.

(3) The procedure in section 6.8 of ASTM D6216-12 is allowed.

10.4 *What are my limits for excessive audit inaccuracy?* Unless specified otherwise in the

applicable subpart, the criteria for excessive inaccuracy are listed in paragraphs (1) through (4).

(1) What is the criterion for excessive zero or upscale drift? Your COMS is out-of-control if either the zero drift check or upscale drift check exceeds twice the applicable drift specification in PS-1 for any one day.

(2) What is the criterion for excessive zero alignment? Your COMS is out-of-control if the zero alignment error exceeds 2 percent opacity.

(3) What is the criterion to pass the quarterly performance audit? Your COMS is out-of-control if the results of a quarterly performance audit indicate noncompliance with the following criteria:

(i) The optical alignment indicator does not show proper alignment (i.e., does not fall within a specific reference mark or condition).

(ii) The zero compensation exceeds 4 percent opacity, or

(iii) The calibration error exceeds 3 percent opacity.

(4) What is the criterion for data capture? You must adhere to the data capture criterion specified in the applicable subpart.

10.5 *What corrective action must I take if my COMS is malfunctioning?* You must have a corrective action program in place to address the repair and/or maintenance of your COMS. The corrective action program must address routine/preventative maintenance and various types of analyzer repairs. The corrective action program must establish what diagnostic testing must be performed after each type of activity to ensure that the COMS is collecting valid, quality-assured data. Recommended maintenance and repair procedures and diagnostic testing after repairs may be found in an associated guidance document.

10.6 *What requirements must I meet if I use a temporary opacity monitor?*

(1) In the event that your certified opacity monitor has to be removed for extended service, you may install a temporary replacement monitor to obtain required opacity emissions data provided that:

(i) The temporary monitor has been certified according to ASTM D6216-12 for which a MCOC has been provided;

(ii) The use of the temporary monitor does not exceed 1080 hours (45 days) of operation per year as a replacement for a fully certified opacity monitor. After that time, the analyzer must complete a full certification according to PS-1 prior to further use as a temporary replacement monitor. Once a temporary replacement monitor has been installed and required testing and adjustments have been successfully completed, it cannot be replaced by another temporary replacement monitor to avoid the full PS-1 certification testing required after 1080 hours (45 days) of use;

(iii) The temporary monitor has been installed and successfully completed an optical alignment assessment and status indicator assessment;

(iv) The temporary monitor has successfully completed an off-stack clear path zero assessment and zero calibration value adjustment procedure;

(v) The temporary monitor has successfully completed an abbreviated zero and upscale drift check consisting of seven zero and upscale calibration value drift checks which may be conducted within a 24-hour period with not more than one calibration drift check every three hours and not less than one calibration drift check every 25 hours. Calculated zero and upscale drift requirements are the same as specified for the normal PS-1 certification;

(vi) The temporary monitor has successfully completed a three-point calibration error test;

(vii) The upscale reference calibration check value of the new monitor has been updated in the associated data recording equipment;

(viii) The overall calibration of the monitor and data recording equipment has been verified; and

(ix) The user has documented all of the above in the maintenance log.

(2) Data generated by the temporary monitor is considered valid when paragraphs (i) through (ix) in this section have been met.

10.7 *When do out-of-control periods begin and end?* The out-of-control periods are as specified in section 3.1.

10.8 *What are the limitations on the use of my COMS data collected during out-of-control periods?* During the period your COMS is out-of-control, you may not use your COMS data to calculate emission compliance or to meet minimum data capture requirements in this procedure or the applicable regulation.

10.9 *What are the QA/QC reporting requirements for my COMS?* You must report in a Data Assessment Report (DAR) the information required by sections 10.0, 10.1, 10.2, and 10.3 for your COMS at the interval specified in the applicable regulation.

10.10 *What minimum information must I include in my DAR?* At a minimum, you must include the information listed in paragraphs (1) through (5) of this section in the DAR.

(1) Name of person completing the report and facility address,

(2) Identification and location of your COMS(s),

(3) Manufacturer, model, and serial number of your COMS(s),

(4) Assessment of COMS data accuracy/acceptability and date of assessment as determined by a performance audit described in section 10.0. If the accuracy audit results show your COMS to be out-of-control, you must report both the audit results showing

your COMS to be out-of-control and the results of the audit following corrective action showing your COMS to be operating within specifications, and

(5) Summary of all corrective actions you took when you determined your COMS was out-of-control.

10.11 *Where and how long must I retain the QA data that this procedure requires me to record for my COMS?* You must keep the records required by this procedure for your COMS on site and available for inspection by us, the state, and/or the local enforcement agency for the period specified in the regulations requiring the use of COMS.

11.0 *What analytical procedures apply to this procedure?* [Reserved]

12.0 *What calculations and data analysis must I perform for my COMS?* The calculations required for the quarterly performance audit are in section 12.0 of PS-1.

13.0 *Method Performance* [Reserved]

14.0 *Pollution Prevention* [Reserved]

15.0 *Waste Management* [Reserved]

16.0 References

16.1 Performance Specification 1-Specifications and Test Procedures for Continuous Opacity Monitoring Systems in Stationary Sources, 40 CFR part 60, Appendix B.

16.2 ASTM D6216-12-Standard Practice for Opacity Monitor Manufacturers to Certify Conformance with Design and Performance Specifications, American Society for Testing and Materials (ASTM).

17.0 *What tables, diagrams, flowcharts, and validation data are relevant to this procedure?* [Reserved]

PROCEDURE 4. [RESERVED]

PROCEDURE 5. QUALITY ASSURANCE REQUIREMENTS FOR VAPOR PHASE MERCURY CONTINUOUS EMISSIONS MONITORING SYSTEMS AND SORBENT TRAP MONITORING SYSTEMS USED FOR COMPLIANCE DETERMINATION AT STATIONARY SOURCES

1.0 Applicability and Principle

1.1 *Applicability.* The purpose of Procedure 5 is to establish the minimum requirements for evaluating the effectiveness of quality control (QC) and quality assurance (QA) procedures as well as the quality of data produced by vapor phase mercury (Hg) continuous emissions monitoring systems (CEMS) and sorbent trap monitoring systems. Procedure 5 applies to Hg CEMS and sorbent trap monitoring systems used for continuously determining compliance with emission standards or operating permit limits as specified in an applicable regulation or permit.

Other QA/QC procedures may apply to other auxiliary monitoring equipment that may be needed to determine Hg emissions in the units of measure specified in an applicable permit or regulation.

Procedure 5 covers the measurement of Hg emissions as defined in Performance Specification 12A (PS 12A) and Performance Specification 12B (PS 12B) in appendix B to this part, *i.e.*, total vapor phase Hg representing the sum of the elemental (Hg⁰, CAS Number 7439-97-6) and oxidized (Hg⁺²) forms of gaseous Hg.

Procedure 5 specifies the minimum requirements for controlling and assessing the quality of Hg CEMS and sorbent trap monitoring system data submitted to EPA or a delegated permitting authority. You must meet these minimum requirements if you are responsible for one or more Hg CEMS or sorbent trap monitoring systems used for compliance monitoring. We encourage you to develop and implement a more extensive QA program or to continue such programs where they already exist.

You must comply with the basic requirements of Procedure 5 immediately following successful completion of the initial performance test described in PS 12A or PS 12B in appendix B to this part (as applicable).

1.2 *Principle.* The QA procedures consist of two distinct and equally important functions. One function is the assessment of the quality of the Hg CEMS or sorbent trap monitoring system data by estimating accuracy. The other function is the control and improvement of the quality of the CEMS or sorbent trap monitoring system data by implementing QC policies and corrective actions. These two functions form a control loop: When the assessment function indicates that the data quality is inadequate, the quality control effort must be increased until the data quality is acceptable. In order to provide uniformity in the assessment and reporting of data quality, this procedure explicitly specifies assessment methods for calibration drift, system integrity, and accuracy. Several of the procedures are based on those of PS 12A and PS 12B in appendix B to this part. Because the control and corrective action function encompasses a variety of policies, specifications, standards, and corrective measures, this procedure treats QC requirements in general terms to allow each source owner or operator to develop a QC system that is most effective and efficient for the circumstances.

2.0 Definitions

2.1 *Mercury Continuous Emission Monitoring System (Hg CEMS)* means the equipment required for the determination of the total vapor phase Hg concentration in the stack effluent. The Hg CEMS consists of the following major subsystems:

2.1.1 *Sample Interface* means that portion of the CEMS used for one or more of the following: sample acquisition, sample transport, sample conditioning, and protection of the monitor from the effects of the stack effluent.

2.1.2 *Hg Analyzer* means that portion of the Hg CEMS that measures the total vapor phase Hg concentration and generates a proportional output.

2.1.3 *Data Recorder* means that portion of the CEMS that provides a permanent electronic record of the analyzer output. The data recorder may provide automatic data reduction and CEMS control capabilities.

2.2 *Sorbent Trap Monitoring System* means the total equipment required for the collection of gaseous Hg samples using paired three-partition sorbent traps as described in PS 12B in appendix B to this part.

2.3 *Span Value* means the measurement range as specified for the affected source category in the applicable regulation and/or monitoring performance specification.

2.4 *Zero, Mid-Level, and High Level Values* means the reference gas concentrations used for calibration drift assessments and system integrity checks on a Hg CEMS, expressed as percentages of the span value (see section 7.1 of PS 12A in appendix B to this part).

2.5 *Calibration Drift (CD)* means the absolute value of the difference between the CEMS output response and either the upscale Hg reference gas or the zero-level Hg reference gas, expressed as a percentage of the span value, when the entire CEMS, including the sampling interface, is challenged after a stated period of operation during which no unscheduled maintenance, repair, or adjustment took place.

2.6 *System Integrity (SI) Check* means a test procedure assessing transport and measurement of oxidized Hg by a Hg CEMS. In particular, system integrity is expressed as the absolute value of the difference between the CEMS output response and the reference value of either a mid- or high-level mercuric chloride (HgCl₂) reference gas, as a percentage of span, when the entire CEMS, including the sampling interface, is challenged.

2.7 *Relative Accuracy (RA)* means the absolute mean difference between the pollutant concentrations determined by a continuous monitoring system (e.g., Hg CEMS or sorbent trap monitoring system) and the values determined by a reference method (RM) plus the 2.5 percent error confidence coefficient of a series of tests divided by the mean of the RM tests. Alternatively, for sources with an average RM concentration less than 5.0 micrograms per standard cubic meter (µg/scm), the RA may be expressed as the absolute value of the difference between the mean CEMS and RM values.

2.8 *Relative Accuracy Test Audit (RATA)* means an audit test procedure consisting of at least nine runs, in which the accuracy of

the total vapor phase Hg concentrations measured by a CEMS or sorbent trap monitoring system is evaluated by comparison against concurrent measurements made with a reference test method.

2.9 *Quarterly Gas Audit (QGA)* means an audit procedure in which the accuracy of the total vapor phase Hg concentrations measured by a CEMS is evaluated by challenging the CEMS with a zero and two upscale reference gases.

3.0 QC Requirements

3.1 Each source owner or operator must develop and implement a QC program. At a minimum, each QC program must include written procedures which should describe in detail, complete, step-by-step procedures and operations for each of the following activities (as applicable):

(a) Calibration drift (CD) checks of Hg CEMS.

(b) CD determination and adjustment of Hg CEMS.

(c) Weekly system integrity check procedures for Hg CEMS.

(d) Routine operation, maintenance, and QA/QC procedures for sorbent trap monitoring systems.

(e) Routine and preventive maintenance procedures for Hg CEMS (including spare parts inventory).

(f) Data recording, calculations, and reporting.

(g) Accuracy audit procedures for Hg CEMS and sorbent trap monitoring systems including sampling and analysis methods.

(h) Program of corrective action for malfunctioning Hg CEMS and sorbent trap monitoring systems.

These written procedures must be kept on record and available for inspection by the responsible enforcement agency. Also, as noted in section 5.2.4, below, whenever excessive inaccuracies of a Hg CEMS occur for two consecutive quarters, the source owner or operator must revise the current written procedures or modify or replace the CEMS or sorbent trap monitoring system to correct the deficiency causing the excessive inaccuracies.

4.0 Calibration Drift (CD) Assessment

4.1 CD Requirement. As described in 40 CFR 60.13(d) and 63.8(c), source owners and operators of Hg CEMS must check, record, and quantify the CD at two concentration values at least once daily (approximately 24 hours) in accordance with the method prescribed by the manufacturer. The Hg CEMS calibration must, as minimum, be adjusted whenever the daily zero (or low-level) CD or the daily high-level CD exceeds two times the limits of the applicable PS in appendix B of this part.

4.2 Recording Requirement for Automatic CD Adjusting CEMS. CEMS that automatically adjust the data to the corrected calibration values (e.g., microprocessor control) must either be programmed to record the unadjusted concentration measured in the CD prior to resetting the calibration, if performed, or to record the amount of adjustment.

4.3 Criteria for Excessive CD. If either the zero (or low-level) or high-level CD result exceeds twice the applicable drift specification in section 13.2 of PS 12A in appendix B to this part for five, consecutive, daily periods, the CEMS is out-of-control. If either the zero (or low-level) or high-level CD result exceeds four times the applicable drift specification in PS 12A during any CD check, the CEMS is out-of-control. If the CEMS is out-of-control, take necessary corrective action. Following corrective action, repeat the CD checks.

4.3.1 Out-Of-Control Period Definition. The beginning of the out-of-control period is the time corresponding to the completion of the fifth, consecutive, daily CD check with a CD in excess of two times the allowable limit, or the time corresponding to the completion of the daily CD check preceding the daily CD check that results in a CD in excess of four times the allowable limit. The end of the out-of-control period is the time corresponding to the completion of the CD check following corrective action that results in the CD's at both the zero (or low-level) and high-level measurement points being within the corresponding allowable CD limit (*i.e.*, either two times or four times the allowable limit in the applicable PS in appendix B).

4.3.2 CEMS Data Status During Out-of-Control Period. During the period the CEMS is out-of-control, the CEMS data may not be used either to determine compliance with an emission limit or to meet a minimum data availability requirement specified in an applicable regulation or permit.

5.0 Data Accuracy Assessment

5.1 Hg CEMS Audit Requirements. For each Hg CEMS, an accuracy audit must be performed at least once each calendar quarter. Successive quarterly audits must, to the extent practicable, be performed no less than 2 months apart. The audits must be conducted as follows:

5.1.1 Relative Accuracy Test Audit (RATA). A RATA of the Hg CEMS must be conducted at least once every four calendar quarters, except as otherwise noted in section 5.1.4 of this appendix. Perform the RATA as described in section 8.5 of PS 12A in appendix B to this part. Calculate the results according to section 12.4 of PS 12A.

5.1.2 Quarterly Gas Audit. A quarterly gas audit (QGA) may be conducted in three of four calendar quarters, but in no more than three quarters in succession. To perform a

QGA, challenge the CEMS with a zero-level and two upscale level audit gases of known concentrations, first of elemental Hg and then of oxidized Hg, within the following ranges:

Audit point	Audit range
1	20 to 30% of span value.
2	50 to 60% of span value.

Sequentially inject each of the three audit gases (zero and two upscale), three times each for a total of nine injections. Inject the gases in such a manner that the entire CEMS is challenged. Do not inject the same gas concentration twice in succession.

Use elemental Hg and oxidized Hg (mercuric chloride, HgCl₂) audit gases that are National Institute of Standards and Technology (NIST)-certified or NIST-traceable following an EPA Traceability Protocol. If audit gas cylinders are used, do not dilute gas when challenging the Hg CEMS. For each reference gas concentration, determine the average of the three CEMS responses and subtract the average response from the reference gas value. Calculate the measurement error at each gas level using Equation 12A-1 in section 8.2 of PS 12A.

5.1.3 Relative Accuracy Audit (RAA). As an alternative to the QGA, a RAA may be conducted in three of four calendar quarters, but in no more than three quarters in succession. To conduct a RAA, follow the RATA test procedures in section 8.5 of PS 12A in appendix B to this part, except that only three test runs are required.

5.1.4 Alternative Quarterly Audits. Alternative quarterly audit procedures may be used as approved by the Administrator for three of four calendar quarters. One RATA is required at least every four calendar quarters, except in the case where the affected facility is off-line (does not operate) in the fourth calendar quarter since the quarter of the previous RATA. In that case, the RATA must be performed in the quarter in which the unit recommences operation. Also, quarterly gas audits (or RAAs, if applicable) are not required for calendar quarters in which the affected facility does not operate.

5.2 Sorbent Trap Monitoring System Audit Requirements. For each sorbent trap monitoring system, a RATA must be conducted at least once every four calendar quarters, except as otherwise noted in section 5.1.4 of this appendix. Perform the RATA as described in section 8.3 of PS 12B in appendix B to this part. Calculate the results according to section 12.4 of PS 12A.

5.3 Excessive Audit Inaccuracy. If the results of a RATA, QGA, or RAA exceed the applicable criteria in section 5.3.3, the Hg CEMS or sorbent trap monitoring system is out-of-control. If the Hg CEMS or sorbent trap monitoring system is out-of-control,

take necessary corrective action to eliminate the problem. Following corrective action, the source owner or operator must audit the CEMS or sorbent trap monitoring system using the same type of test that failed to meet the accuracy criterion. For instance, a RATA must always be performed following an out-of-control period resulting from a failed RATA. Whenever audit results show the Hg CEMS or sorbent trap monitoring system to be out-of-control, the owner or operator must report both the results of the failed test and the results of the retest following corrective action showing the CEMS to be operating within specifications.

5.3.1 Out-Of-Control Period Definition. The beginning of the out-of-control period is the hour immediately following the completion of a RATA, RAA, QGA or system integrity check that fails to meet the applicable performance criteria in section 5.3.3, below. The end of the out-of-control period is the time corresponding to the completion of a subsequent successful test of the same type.

5.3.2 Monitoring Data Status During Out-Of-Control Period. During the period the monitor is out-of-control, the monitoring data may not be used to determine compliance with an applicable emission limit or to meet a minimum data availability requirement in an applicable regulation or permit.

5.3.3 Criteria for Excessive Audit Inaccuracy. Unless specified otherwise in an applicable regulation or permit, the criteria for excessive inaccuracy are:

(a) For the RATA, the allowable RA in the applicable PS in appendix B (e.g., PS 12A or PS 12B).

(b) For the QGA, ± 15 percent of the average audit value or $\pm 0.5 \mu\text{g}/\text{m}^3$, whichever is greater.

(c) For the RAA, ± 20 percent of the three run average or ± 10 percent of the applicable standard, whichever is greater.

5.3.4 Criteria for Acceptable QC Procedures. Repeated excessive inaccuracies (*i.e.*, out-of-control conditions resulting from the quarterly audits) indicates the QC procedures are inadequate or that the CEMS or sorbent trap monitoring system is incapable of providing quality data. Therefore, whenever excessive inaccuracies occur for two consecutive quarters, the source owner or operator must revise the QC procedures (*see* section 3) or modify, repair, or replace the CEMS or sorbent trap monitoring system.

6.0 Reporting Requirements

6.1 Data Assessment Report. At the reporting interval specified in the applicable regulation or permit, report for each Hg CEMS and/or sorbent trap monitoring system the accuracy assessment results from section 5, above. For Hg CEMS, also report the CD assessment results from section 4, above. Report this information as a Data Assessment Report (DAR), and include the appropriate

DAR(s) with the emissions report required under the applicable regulation or permit.

6.2 Contents of the DAR. At a minimum, the DAR must contain the following information:

6.2.1 Facility name and address including identification of source owner/operator.

6.2.2 Identification and location of each Hg CEMS and/or sorbent trap monitoring system.

6.2.3 Manufacturer, model, and serial number of each Hg CEMS and/or sorbent trap monitoring system.

6.2.4 CD Assessment for each Hg CEMS, including the identification of out-of-control periods.

6.2.5 System integrity check data for each Hg CEMS.

6.2.6 Accuracy assessment for each Hg CEMS and/or sorbent trap monitoring system, including the identification of out-of-control periods. The results of all required RATAs, QGAs, RAAs, and audits of auxiliary equipment must be reported. If an accuracy audit shows a CEMS or sorbent trap monitoring system to be out-of-control, report both the audit results that caused the out-of-control period and the results of the retest following corrective action, showing the monitoring system to be operating within specifications.

6.2.7 Summary of all corrective actions taken when the Hg CEMS and/or sorbent trap monitoring system was determined to be out-of-control.

6.3 Data Retention. As required in 40 CFR 60.7(d) and 63.10(b), all measurements from CEMS and sorbent trap monitoring systems, including the quality assurance data required by this procedure, must be retained by the source owner for at least 5 years.

7.0 Bibliography

7.1 Calculation and Interpretation of Accuracy for Continuous Emission Monitoring Systems (CEMS). section 3.0.7 of the Quality Assurance Handbook for Air Pollution Measurement Systems, Volume III, Stationary Source Specific Methods. EPA-600/4-77-027b. August 1977. U.S. Environmental Protection Agency. Office of Research and Development Publications, 26 West St. Clair Street, Cincinnati, OH 45268.

PROCEDURE 6. QUALITY ASSURANCE REQUIREMENTS FOR GASEOUS HYDROGEN CHLORIDE (HCL) CONTINUOUS EMISSION MONITORING SYSTEMS USED FOR COMPLIANCE DETERMINATION AT STATIONARY SOURCES

1.0 Applicability and Principle

1.1 Applicability. Procedure 6 is used to evaluate the effectiveness of quality control (QC) and quality assurance (QA) procedures and evaluate the quality of data produced by any hydrogen chloride (HCl) gas, CAS: 7647-01-0, continuous emission monitoring system

(CEMS) that is used for determining compliance with emission standards for HCl on a continuous basis as specified in an applicable permit or regulation.

1.1.1 This procedure specifies the minimum QA requirements necessary for the control and assessment of the quality of CEMS data submitted to the Environmental Protection Agency (EPA) or a delegated authority. If you are responsible for one or more CEMS used for HCl compliance monitoring you must meet these minimum requirements and you are encouraged to develop and implement a more extensive QA program or to continue such programs where they already exist.

1.1.2 Data collected as a result of QA and QC measures required in this procedure are to be submitted to the EPA or the delegated authority in accordance with the applicable regulation or permit. These data are to be used by both the delegated authority and you, as the CEMS operator, in assessing the effectiveness of the CEMS QC and QA procedures in the maintenance of acceptable CEMS operation and valid emission data.

1.2 Principle

1.2.1 The QA procedures consist of two distinct and equally important functions. One function is the assessment of the quality of the CEMS data by estimating accuracy. The other function is the control and improvement of the quality of the CEMS data by implementing QC policies and corrective actions. These two functions form an iterative control loop. When the assessment function indicates that the data quality is inadequate, the control effort must be increased until the data quality is acceptable. In order to provide uniformity in the assessment and reporting of data quality, this procedure specifies the assessment procedures to evaluate response drift and accuracy. The procedures specified are based on Performance Specification 18 (PS-18) in appendix B to this part.

(NOTE: Because the control and corrective action function encompasses a variety of policies, specifications, standards and corrective measures, this procedure treats QC requirements in general terms to allow you, as source owner or operator to develop the most effective and efficient QC system for your circumstances.)

2.0 Definitions

See PS-18 of this subpart for the primary definitions used in this Procedure.

3.0 QC Requirements

3.1 You, as a source owner or operator, must develop and implement a QC program. At a minimum, each QC program must include written procedures and/or manufacturer's information which should describe in de-

tail, complete, step-by-step procedures and operations for each of the following activities:

- (a) Calibration Drift (CD) checks of CEMS;
- (b) CD determination and adjustment of CEMS;
- (c) Integrated Path (IP) CEMS temperature and pressure sensor accuracy checks;
- (d) IP CEMS beam intensity checks;
- (e) Routine and preventative maintenance of CEMS (including spare parts inventory);
- (f) Data recording, calculations, and reporting;
- (g) Accuracy audit procedures for CEMS including reference method(s); and
- (h) Program of corrective action for malfunctioning CEMS.

3.2 These written procedures must be kept on site and available for inspection by the delegated authority. As described in section 5.4, whenever excessive inaccuracies occur for two consecutive quarters, you must revise the current written procedures, or modify or replace the CEMS to correct the deficiency causing the excessive inaccuracies.

4.0 Daily Data Quality Requirements and Measurement Standardization Procedures

4.1 CD Assessment. An upscale gas, used to meet a requirement in this section must be either a NIST-traceable reference gas or a gas certified by the gas vendor to ± 5.0 percent accuracy.

4.1.1 CD Requirement. Consistent with 40 CFR 60.13(d) and 63.8(c), you, as source owners or operators of CEMS must check, record, and quantify the CD at two levels, using a zero gas and mid-level gas at least once daily (approximately every 24 hours). Perform the CD check in accordance with the procedure in applicable performance specification (*e.g.*, section 11.8 of PS-18 in appendix B of this part). The daily zero- and mid-level CD must not exceed two times the drift limits specified in the applicable performance specification (*e.g.*, section 13.2 of PS-18 in appendix B to this part.)

4.1.2 Recording Requirement for CD Corrective action. Corrective actions taken to bring a CEMS back in control after exceeding a CD limit must be recorded and reported with the associated CEMS data. Reporting corrective action must include the unadjusted concentration measured prior to resetting the calibration and the adjusted value after resetting the calibration to bring the CEMS back into control.

4.1.3 Dynamic Spiking Option for Mid-level CD. For extractive CEMS, you have the option to conduct a daily dynamic spiking procedure found in section 11.8.3 of PS-18 of appendix B of this part in lieu of the daily mid-level CD check. If this option is selected, the daily zero CD check is still required.

4.1.4 Out of Control Criteria for Excessive CD. As specified in §63.8(c)(7)(i)(A), a CEMS

is out of control if the zero or mid-level CD exceeds two times the applicable CD specification in the applicable PS or in the relevant standard. When a CEMS is out of control, you as owner or operator of the affected source must take the necessary corrective actions and repeat the tests that caused the system to go out of control (in this case, the failed CD check) until the applicable performance requirements are met.

4.1.5 Additional Quality Assurance for Data above Span. This procedure must be used when required by an applicable regulation and may be used when significant data above span is being collected.

4.1.5.1 Any time the average measured concentration of HCl exceeds 150 percent of the span value for greater than two hours, conduct the following 'above span' CEMS response check.

4.1.5.1.1 Within a period of 24 hours (before or after) of the 'above span' period, introduce a higher, 'above span' HCl reference gas standard to the CEMS. Use 'above span' reference gas that meets the requirements of section 7.0 of PS-18 and target a concentration level between 75 and 125 percent of the highest hourly concentration measured during the period of measurements above span.

4.1.5.1.2 Introduce the reference gas at the probe for extractive CEMS or for IP-CEMS

as an equivalent path length corrected concentration in the instrument calibration cell.

4.1.5.1.3 At no time may the 'above span' concentration exceed the analyzer full-scale range.

4.1.5.2 Record and report the results of this procedure as you would for a daily calibration. The 'above span' response check is successful if the value measured by the CEMS is within 20 percent of the certified value of the reference gas.

4.1.5.3 If the 'above span' response check is conducted during the period when measured emissions are above span and there is a failure to collect at least one data point in an hour due to the response check duration, then determine the emissions average for that missed hour as the average of hourly averages for the hour preceding the missed hour and the hour following the missed hour.

4.1.5.4 In the event that the 'above span' response check is not successful (*i.e.*, the CEMS measured value is not within 20 percent of the certified value of the reference gas), then you must normalize the one-hour average stack gas values measured above the span during the 24-hour period preceding or following the 'above span' response check for reporting based on the CEMS response to the reference gas as shown in Eq. 6-1:

Normalized stack gas result =

$$\frac{\text{Certified reference gas value}}{\text{Measured value of reference gas}} \times \text{Measured stack gas result} \quad \text{Eq.6-1}$$

4.2 Beam Intensity Requirement for HCl IP-CEMS.

4.2.1 Beam Intensity Measurement. If you use a HCl IP-CEMS, you must quantify and record the beam intensity of the IP-CEMS in appropriate units at least once daily (approximately 24 hours apart) according to manufacturer's specifications and procedures.

4.2.2 Out of Control Criteria for Excessive Beam Intensity Loss. If the beam intensity falls below the level established for the operation range determined following the procedures in section 11.2 of PS-18 of this part, then your CEMS is out-of-control. This quality check is independent of whether the CEMS daily CD is acceptable. If your CEMS is out-of-control, take necessary corrective action. You have the option to repeat the beam intensity test procedures in section 11.2 of PS-18 to expand the acceptable range of acceptable beam intensity. Following corrective action, repeat the beam intensity check.

4.3 Out Of Control Period Duration for Daily Assessments. The beginning of the out-of-control period is the hour in which the owner or operator conducts a daily performance check (*e.g.*, calibration drift or beam intensity check) that indicates an exceedance of the performance requirements established under this procedure. The end of the out-of-control period is the completion of daily assessment of the same type following corrective actions, which shows that the applicable performance requirements have been met.

4.4 CEMS Data Status During Out-of-Control Period. During the period the CEMS is out-of-control, the CEMS data may not be used in calculating compliance with an emissions limit nor be counted towards meeting minimum data availability as required and described in the applicable regulation or permit.

5.0 Data Accuracy Assessment

You must audit your CEMS for the accuracy of HCl measurement on a regular basis at the frequency described in this section,

unless otherwise specified in an applicable regulation or permit. Quarterly audits are performed at least once each calendar quarter. Successive quarterly audits, to the extent practicable, shall occur no closer than 2 months apart. Annual audits are performed at least once every four consecutive calendar quarters.

5.1 Temperature and Pressure Accuracy Assessment for IP CEMS.

5.1.1 Stack or source gas temperature measurement audits for HCl IP-CEMS must be conducted and recorded at least annually in accordance with the procedure described in section 11.3 of PS-18 in appendix B to this part. As an alternative, temperature measurement devices may be replaced with certified instruments on an annual basis. Units removed from service may be bench tested against an NIST traceable sensor and reused during subsequent years. Any measurement instrument or device that is used to conduct ongoing verification of temperature measurement must have an accuracy that is traceable to NIST.

5.1.2 Stack or source gas pressure measurement audits for HCl IP-CEMS must be conducted and recorded at least annually in accordance with the procedure described in section 11.4 of PS-18 in appendix B of this part. As an alternative, pressure measurement devices may be replaced with certified instruments on an annual basis. Units removed from service may be bench tested against an NIST traceable sensor and reused during subsequent years. Any measurement instrument or device that is used to conduct ongoing verification of pressure measurement must have an accuracy that is traceable to NIST.

5.1.3 Out of Control Criteria for Excessive Parameter Verification Inaccuracy. If the temperature or pressure verification audit exceeds the criteria in sections 5.3.4.5 and 5.3.4.6, respectively, the CEMS is out-of-control. If the CEMS is out-of-control, take necessary corrective action to eliminate the problem. Following corrective action, you must repeat the failed verification audit until the temperature or pressure measurement device is operating within the applicable specifications, at which point the out-of-control period ends.

5.2 Concentration Accuracy Auditing Requirements. Unless otherwise specified in an applicable rule or permit, you must audit the HCl measurement accuracy of each CEMS at least once each calendar quarter, except in the case where the affected facility is off-line (does not operate). In that case, the audit must be performed as soon as is practicable in the quarter in which the unit recommences operation. Successive quarterly audits must, to the extent practicable, be performed no less than 2 months apart. The accuracy audits shall be conducted as follows:

5.2.1 Relative Accuracy Test Audit. A RATA must be conducted at least once every four calendar quarters, except as otherwise noted in sections 5.2.5 or 5.5 of this procedure. Perform the RATA as described in section 11.9 of PS-18 in appendix B to this part. If the HCl concentration measured by the RM during a RATA (in ppmv) is less than or equal to 20 percent of the concentration equivalent to the applicable emission standard, you must perform a Cylinder Gas Audit (CGA) or a Dynamic Spike Audit (DSA) for at least one subsequent (one of the following three) quarterly accuracy audits.

5.2.2 Quarterly Relative Accuracy Audit (RAA). A quarterly RAA may be conducted as an option to conducting a RATA in three of four calendar quarters, but in no more than three quarters in succession. To conduct an RAA, follow the test procedures in section 11.9 of PS-18 in appendix B to this part, except that only three test runs are required. The difference between the mean of the RM values and the mean of the CEMS responses relative to the mean of the RM values (or alternatively the emission standard) is used to assess the accuracy of the CEMS. Calculate the RAA results as described in section 6.2. As an alternative to an RAA, a cylinder gas audit or a dynamic spiking audit may be conducted.

5.2.3 Cylinder Gas Audit. A quarterly CGA may be conducted as an option to conducting a RATA in three of four calendar quarters, but in no more than three consecutive quarters. To perform a CGA, challenge the CEMS with a zero-level and two upscale level audit gases of known concentrations within the following ranges:

Audit point	Audit range
1 (Mid-Level)	50 to 60% of span value.
2 (High-Level)	80 to 100% of span value.

5.2.3.1 Inject each of the three audit gases (zero and two upscale) three times each for a total of nine injections. Inject the gases in such a manner that the entire CEMS is challenged. Do not inject the same gas concentration twice in succession.

5.2.3.2 Use HCl audit gases that meet the requirements of section 7 of PS-18 in appendix B to this part.

5.2.3.3 Calculate results as described in section 6.3.

5.2.4 Dynamic Spiking Audit. For extractive CEMS, a quarterly DSA may be conducted as an option to conducting a RATA in three of four calendar quarters, but in no more than three quarters in succession.

5.2.4.1 To conduct a DSA, you must challenge the entire HCl CEMS with a zero gas in accordance with the procedure in section 11.8 of PS-18 in appendix B of this part. You must also conduct the DS procedure as described in appendix A to PS-18 of appendix B to this

part. You must conduct three spike injections with each of two upscale level audit gases. The upscale level gases must meet the requirements of section 7 of PS-18 in appendix B to this part and must be chosen to yield concentrations at the analyzer of 50 to 60 percent of span and 80 to 100 percent of span. Do not inject the same gas concentration twice in succession.

5.2.4.2 Calculate results as described in section 6.4. You must calculate the dynamic spiking error (DSE) for each of the two upscale audit gases using the combination of Equation A5 and A6 in appendix A to PS-18 in appendix B to this part to determine CEMS accuracy.

5.2.5 Other Alternative Quarterly Audits. Other alternative audit procedures, as approved by the Administrator, may be used for three of four calendar quarters.

5.3 Out of Control Criteria for Excessive Audit Inaccuracy. If the results of the RATA, RAA, CGA, or DSA do not meet the applicable performance criteria in section 5.3.4, the CEMS is out-of-control. If the CEMS is out-of-control, take necessary corrective action to eliminate the problem. Following corrective action, the CEMS must pass a test of the same type that resulted in the out-of-control period to determine if the CEMS is operating within the specifications (*e.g.*, a RATA must always follow an out-of-control period resulting from a RATA).

5.3.1 If the audit results show the CEMS to be out-of-control, you must report both the results of the audit showing the CEMS to be out-of-control and the results of the audit following corrective action showing the CEMS to be operating within specifications.

5.3.2 Out-Of-Control Period Duration for Excessive Audit Inaccuracy. The beginning of the out-of-control period is the time corresponding to the completion of the sampling for the failed RATA, RAA, CGA or DSA. The end of the out-of-control period is the time corresponding to the completion of the sampling of the subsequent successful audit.

5.3.3 CEMS Data Status During Out-Of-Control Period. During the period the CEMS is out-of-control, the CEMS data may not be used in calculating emission compliance nor be counted towards meeting minimum data availability as required and described in the applicable regulation or permit.

5.3.4 Criteria for Excessive Quarterly and Yearly Audit Inaccuracy. Unless specified otherwise in the applicable regulation or permit, the criteria for excessive inaccuracy are:

5.3.4.1 For the RATA, the CEMS must meet the RA specifications in section 13.4 of PS-18 in appendix B to this part.

5.3.4.2 For the CGA, the accuracy must not exceed 5.0 percent of the span value at the zero gas and the mid- and high-level reference gas concentrations.

5.3.4.3 For the RAA, the RA must not exceed 20.0 percent of the RM_{avg} as calculated using Equation 6-2 in section 6.2 of this procedure whether calculated in units of HCl concentration or in units of the emission standard. In cases where the RA is calculated on a concentration (ppmv) basis, if the average HCl concentration measured by the RM during the test is less than 75 percent of the HCl concentration equivalent to the applicable standard, you may substitute the equivalent emission standard value (in ppmv) in the denominator of Equation 6-2 in the place of RM_{avg} and the result of this alternative calculation of RA must not exceed 15.0 percent.

5.3.4.4 For DSA, the accuracy must not exceed 5.0 percent of the span value at the zero gas and the mid- and high-level reference gas concentrations or 20.0 percent of the applicable emission standard, whichever is greater.

5.3.4.5 For the gas temperature measurement audit, the CEMS must satisfy the requirements in section 13.7 in PS-18 of appendix B to this part.

5.3.4.6 For the gas pressure measurement audit, the CEMS must satisfy the requirements in section 13.8 in PS-18 of appendix B to this part.

5.4 Criteria for Acceptable QC Procedures. Repeated excessive inaccuracies (*i.e.*, out-of-control conditions resulting from the quarterly or yearly audits) indicate that the QC procedures are inadequate or that the CEMS is incapable of providing quality data. Therefore, whenever excessive inaccuracies occur for two consecutive quarters, you must revise the QC procedures (see section 3.0) or modify or replace the CEMS.

5.5 Criteria for Optional QA Test Frequency. If all the quality criteria are met in sections 4 and 5 of this procedure, the CEMS is in-control.

5.5.1 Unless otherwise specified in an applicable rule or permit, if the CEMS is in-control and if your source emits ≤ 75 percent of the HCl emission limit for each averaging period as specified in the relevant standard for eight consecutive quarters that include a minimum of two RATAs, you may revise your auditing procedures to use CGA, RAA or DSA each quarter for seven subsequent quarters following a RATA.

5.5.2 You must perform at least one RATA that meets the acceptance criteria every 2 years.

5.5.3 If you fail a RATA, RAA, CGA, or DSA, then the audit schedule in section 5.2 must be followed until the audit results meet the criteria in section 5.3.4 to start requalifying for the optional QA test frequency in section 5.5.

6.0 Calculations for CEMS Data Accuracy

6.1 RATA RA Calculation. Follow Equations 9 through 14 in section 12 of PS-18 in

appendix B to this part to calculate the RA for the RATA. The RATA must be calculated either in units of the applicable emission standard or in concentration units (ppmv).

$$RA = \frac{[MN_{avg} - RM_{avg}]}{RM_{avg}} * 100 \text{ Eq.} \quad \text{Eq. 6-2}$$

Where:

RA = Accuracy of the CEMS (percent)

MN_{avg} = Average measured CEMS response during the audit in units of applicable standard or appropriate concentration.

RM_{avg} = Average reference method value in units of applicable standard or appropriate concentration.

6.3 CGA Accuracy Calculation. For each gas concentration, determine the average of the three CEMS responses and subtract the average response from the audit gas value. For extractive CEMS, calculate the ME at each gas level using Equation 3A in section 12.3 of PS-18 in appendix B to this part. For

6.2 RAA Accuracy Calculation. Use Equation 6-2 to calculate the accuracy for the RAA. The RA may be calculated in concentration units (ppmv) or in the units of the applicable emission standard.

IP-CEMS, calculate the ME at each gas level using Equation 6A in section 12.4.3 of PS-18 in appendix B to this part.

6.4 DSA Accuracy Calculation. DSA accuracy is calculated as a percent of span. To calculate the DSA accuracy for each upscale spike concentration, first calculate the DSE using Equation A5 in appendix A of PS-18 in appendix B to this part. Then use Equation 6-3 to calculate the average DSA accuracy for each upscale spike concentration. To calculate DSA accuracy at the zero level, use equation 3A in section 12.3 of PS-18 in appendix B to this part.

$$DSA \text{ Accuracy} = \frac{\sum_1^3 \left[\frac{|DSE_i|}{S} \right]}{3} * 100 \quad \text{Eq. 6-3}$$

7.0 Reporting Requirements

At the reporting interval specified in the applicable regulation or permit, report for each CEMS the quarterly and annual accuracy audit results from section 6 and the daily assessment results from section 4. Unless otherwise specified in the applicable regulation or permit, include all data sheets, calculations, CEMS data records (*i.e.*, charts, records of CEMS responses), reference gas certifications and reference method results necessary to confirm that the performance of the CEMS met the performance specifications.

7.1 Unless otherwise specified in the applicable regulations or permit, report the daily assessments (CD and beam intensity) and accuracy audit information at the interval for emissions reporting required under the applicable regulations or permits.

7.1.1 At a minimum, the daily assessments and accuracy audit information reporting must contain the following information:

- a. Company name and address.
- b. Identification and location of monitors in the CEMS.
- c. Manufacturer and model number of each monitor in the CEMS.

d. Assessment of CEMS data accuracy and date of assessment as determined by a RATA, RAA, CGA or DSA described in section 5 including:

- i. The RA for the RATA;
- ii. The accuracy for the CGA, RAA, or DSA;
- iii. Temperature and pressure sensor audit results for IP-CEMS;
- iv. The RM results, the reference gas certified values;
- v. The CEMS responses;
- vi. The calculation results as defined in section 6; and
- vii. Results from the performance audit samples described in section 5 and the applicable RMs.

e. Summary of all out-of-control periods including corrective actions taken when CEMS was determined out-of-control, as described in sections 4 and 5.

7.1.2 If the accuracy audit results show the CEMS to be out-of-control, you must report both the audit results showing the CEMS to be out-of-control and the results of the audit following corrective action showing the CEMS to be operating within specifications.

8.0 Bibliography

1. EPA Traceability Protocol for Assay and Certification of Gaseous Calibration Standards, U.S. Environmental Protection Agency office of Research and Development, EPA/600/R-12/531, May 2012.

2. Method 205, "Verification of Gas Dilution Systems for Field Instrument Calibrations," 40 CFR part 51, appendix M.

9.0 Tables, Diagrams, Flowcharts—[Reserved]

[52 FR 21008, June 4, 1987; 52 FR 27612, July 22, 1987, as amended at 56 FR 5527, Feb. 11, 1991; 69 FR 1816, Jan. 12, 2004; 72 FR 32768, June 13, 2007; 74 FR 12590, Mar. 25, 2009; 75 FR 55040, Sept. 9, 2010; 79 FR 11274, Feb. 27, 2014; 79 FR 28441, May 16, 2014; 80 FR 38649, July 7, 2015; 81 FR 59824, Aug. 30, 2016]

APPENDIX G TO PART 60—PROVISIONS FOR AN ALTERNATIVE METHOD OF DEMONSTRATING COMPLIANCE WITH 40 CFR 60.43 FOR THE NEWTON POWER STATION OF CENTRAL ILLINOIS PUBLIC SERVICE COMPANY

1. Designation of Affected Facilities

1.1 The affected facilities to which this alternative compliance method applies are the Unit 1 and 2 coal-fired steam generating units located at the Central Illinois Public Service Company's (CIPS) Newton Power Station in Jasper County, Illinois. Each of these units is subject to the Standards of Performance for Fossil-Fuel-Fired Steam Generators for Which Construction Commenced After August 17, 1971 (subpart D).

2. Definitions

2.1 All definitions in subparts D and Da of part 60 apply to this provision except that:

24-hour period means the period of time between 12:00 midnight and the following midnight.

Boiler operating day means a 24-hour period during which any fossil is combusted in either the Unit 1 or Unit 2 steam generating unit and during which the provisions of §60.43(e) are applicable.

CEMs means continuous emission monitoring system.

Coal bunker means a single or group of coal trailers, hoppers, silos or other containers that:

- (1) are physically attached to the affected facility; and
- (2) provide coal to the coal pulverizers.

DAFGDS means the dual alkali flue gas desulfurization system for the Newton Unit 1 steam generating unit.

3. Compliance Provisions

3.1 If the owner or operator of the affected facility elects to comply with the 470 ng/J (1.1 lbs/MMBTU) of combined heat input emission limit under §60.43(e), he shall notify the Regional Administrator, of the United

States Environmental Protection Agency (USEPA), Region 5 and the Director, of the Illinois Environmental Protection Agency (IEPA) at least 30 days in advance of the date such election is to take effect, stating the date such operation is to commence. When the owner or operator elects to comply with this limit after one or more periods of reverting to the 520 ng/J heat input (1.2 lbs/MMBTU) limit of §60.43(a)(2), as provided under 3.4, he shall notify the Regional Administrator of the USEPA, Region 5 and the Director of the (IEPA) in writing at least ten (10) days in advance of the date such election is to take effect.

3.2 Compliance with the sulfur dioxide emission limit under §60.43(e) is determined on a continuous basis by performance testing using CEMs. Within 60 days after the initial operation of Units 1 and 2 subject to the combined emission limit in §60.43(e), the owner or operator shall conduct an initial performance test, as required by §60.8, to determine compliance with the combined emission limit. This initial performance test is to be scheduled so that the thirtieth boiler operating day of the 30 successive boiler operating days is completed within 60 days after initial operation subject to the 470 ng/J (1.1 lbs/MMBTU) combined emission limit. Following the initial performance test, a separate performance test is completed at the end of each boiler operating day Unit 1 and Unit 2 are subject to §60.43(e), and a new 30 day average emission rate calculated.

3.2.1 Following the initial performance test, a new 30 day average emission rate is calculated for each boiler operating day the affected facility is subject to §60.43(e). If the owner or operator of the affected facility elects to comply with §60.43(e) after one or more periods of reverting to the 520 ng/J heat input (1.2 lbs/MMBTU) limit under §60.43(a)(2), as provided under 3.4, the 30 day average emission rate under §60.43(e) is calculated using emissions data of the current boiler operating day and data for the previous 29 boiler operating days when the affected facility was subject to §60.43(e). Periods of operation of the affected facility under §60.43(a)(2) are not considered boiler operating days. Emissions data collected during operation under §60.43(a)(2) are not considered relative to 4.6 and emissions data are not included in calculations of emission under §60.43(e).

3.2.2 When the affected facility is operated under the provisions of §60.43(e), the Unit 1 DAFGDS bypass damper must be fully closed. The DAFGDS bypass may be opened only during periods of DAFGDS startup, shutdown, malfunction or testing as described under sections 3.5.1, 3.5.2, 3.5.3, 3.5.4, and 4.8.2.

3.3 Compliance with the sulfur dioxide emission limit set forth in §60.43(e) is based on the average combined hourly emission