

State of Alaska - Air Permits Program  
Owner Requested Limit Letter of Approval

STATIONARY SOURCE IDENTIFICATION:

FINAL ORL NO. AQ0399ORL02

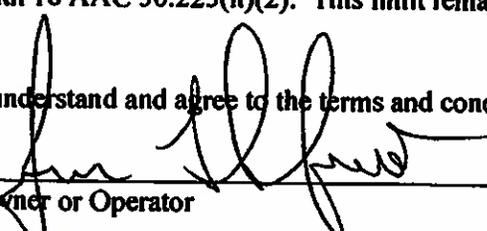
Owner/Operator:	Greater Fairbanks Community Hospital Foundation
Facility Name:	Fairbanks Memorial Hospital and Denali Center
Facility Location:	1650 Cowles Street Fairbanks, AK 99701
Latitude/Longitude:	64° 50' 02" N / 147° 42' 10" W
Facility Contact:	Jon Lundquist
Phone Number:	907-458-5495

The above named owner/operator has submitted a complete application for an owner-requested limit under 18 AAC 50.225(b) for the Fairbanks Memorial Hospital and Denali Center. The Department grants an owner-requested limit to restrict the stationary source allowable emissions and potential to emit. The Department certifies that the owner-requested limit is effective as of the date noted below.

In accordance with 18 AAC 50.225(f), the applicant has agreed to the conditions listed on the following pages.

The owner or operator may revise this limit under 18 AAC 50.225(h)(1) by submitting a new request under 18 AAC 50.225(b). The owner or operator may request the Department to revoke the limit in accordance with 18 AAC 50.225(h)(2). This limit remains in effect until the Department approves a new limit or revokes it.

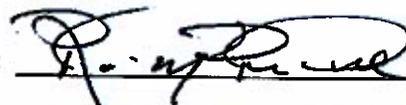
I understand and agree to the terms and conditions of this approval.

  
Owner or Operator

JON T. LUNDQUIST  
Printed Name

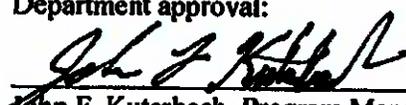
Title: ASSOC ADMIN, PLANT OPS/SUPPORT

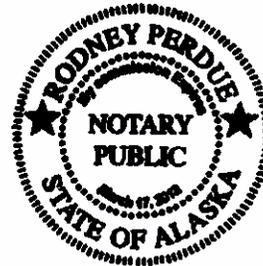
This certifies that on 8/12/09 (date) the person named above appeared before me, a notary public in 4TH Jurisdiction and for the State of ALASKA, and signed the above statement in my presence.

Notary Signature & Seal: 

My commission expires: MARCH 17, 2012

Department approval:

  
John F. Kuterbach, Program Manager  
Air Operating Permits



10/24/09  
Owner Requested Limit Effective Date

## CONDITIONS:

The Owner Requested Limits listed below are designed to avoid emitting 100 tons per year of regulated air pollutants.

1. **Owner Requested Limit.** The owner/operator shall limit the operation of the Emergency Generators, Source IDs 1, 6 and 7 from Table 1 to 500 hours each per 12 month rolling period.
  - 1.1 **Monitoring.** The owner/operator shall record the hours of operation for Source IDs 1, 6 and 7. The records shall be updated monthly, no later than the last day of the month following the end of the consecutive 12-month period for which the record relates;
  - 1.2 **Recordkeeping.** The owner/operator shall keep all records required by the permit for at least five years from the date of collection;
  - 1.3 **Reporting.** The owner/operator shall report the monthly hours of operation for Source IDs 1, 6 and 7 in the annual compliance report as described in Condition 7;
  - 1.4 **Reporting.** The owner/operator shall report as an Excess Emission if hours of operation exceed the 500 hour limit within a 12-month period, as described in Condition 8.
  
2. **Owner Requested Limit.** The owner/operator shall burn only Diesel No. 1 or No. 2 grade fuel in Source IDs 1 through 10. The distillate fuel burned shall not exceed fuel sulfur content to 0.50% by weight.
  - 2.1 **Monitoring.** The owner/operator shall obtain the percent sulfur by weight from the distributor for each fuel shipment that is used in Source IDs 1 through 10 at the facility;
  - 2.2 **Recordkeeping.** The owner/operator shall obtain a record from the shipper that specifies the grade of fuel used in Source IDs 1 through 10 as well as the fuel delivery date;
  - 2.3 **Reporting.** The owner/operator shall report the fuel sulfur content analysis or a summary of fuel received, including the fuel grade, for fuel burned in Source IDs 1 through 10 to demonstrate compliance in the annual compliance report as described in Condition 7;
  - 2.4 **Reporting.** The owner/operator shall report as an Excess Emission if the percent sulfur exceeds the 0.50 percent sulfur by weight limit, as described in Condition 8.
  
3. **Owner Requested Limit.** The owner/operator shall limit the total natural gas consumption in Source IDs 3, 4, and 5 in Table 1, to no more than 300 million standard cubic feet in any consecutive 12-month period.
  - 3.1 **Monitoring.** The owner/operator shall monitor the total standard cubic feet of natural gas combusted each month and a calculation of the total of each fuel burned in any consecutive 12-month period for Source IDs 3, 4, and 5 to demonstrate compliance in the annual compliance report as described in Condition 7;

- 3.2 **Recordkeeping.** The owner/operator shall keep all records required by the permit for at least five years from the date of collection;
  - 3.3 **Reporting.** The owner/operator shall report the total standard cubic feet of natural gas combusted each month and a calculation of the total of each fuel burned in any consecutive 12-month period for Source IDs 3, 4, and 5 to demonstrate compliance in the annual compliance report as described in Condition 7.
4. **Owner Requested Limit.** The owner/operator shall limit the total No. 1 or No. 2 diesel consumption in Source IDs 3, 4, and 5 in Table 1, to no more than 2,225,000 gallons in any consecutive 12-month period.
  - 4.1 **Monitoring.** The owner/operator shall monitor the total No. 1 and No. 2 diesel combusted each month and a calculation of the total of each fuel burned in any consecutive 12-month period for Source IDs 3, 4, and 5;
  - 4.2 **Recordkeeping.** The owner/operator shall keep all records required by the permit for at least five years from the date of collection;
  - 4.3 **Reporting.** The owner/operator shall report the total No. 1 and No. 2 diesel combusted each month and a calculation of the total of each fuel burned in any consecutive 12-month period for Source IDs 3, 4, and 5 to demonstrate compliance in the annual compliance report as described in Condition 7.
5. **Owner Requested Limit.** The owner/operator shall burn only pipeline quality natural gas in Source IDs 3, 4, 5, 8, 9, and 10. Pipeline quality means natural gas with a total sulfur content not to exceed 12 grains per 100 standard cubic feet of gas.
  - 5.1 **Monitoring.** The owner/operator shall monitor the natural gas combusted in Source IDs Source IDs 3, 4, 5, 8, 9, and 10 to ensure it is of pipeline quality;
  - 5.2 **Recordkeeping.** The owner/operator shall keep all records required by the permit for at least five years from the date of collection;
  - 5.3 **Reporting.** The owner/operator shall report as a Permit Deviation whenever natural gas combusted does not meet the requirement of Condition 5.
6. **Recordkeeping Requirements.** The stationary source shall keep all records required by this ORL for at least five years from the date of collection.
7. **Annual Operating Reports.** Submit the original and one copy of an annual operating report for the stationary source to: Alaska Department of Environmental Conservation, Attn: Compliance Technician, Air Permits Program, 610 University Avenue, Fairbanks, Alaska 99709-3643 by February 1 for the preceding calendar year. Certify the report as specified in 18 AAC 50.205 by having the responsible official sign after the following statement, "Based on information and belief formed after reasonable inquiry, I certify that the statements and information in and attached

to this document are true, accurate, and complete.” Attach copies of all excess emission and deviation forms submitted to ADEC during the reporting period pursuant to Condition 8.

- 8. Excess Emissions and Deviation Reports.** Report all emissions or operations that exceed or deviate from the requirements of this owner requested limit as follows:
- 8.1 In accordance with 18 AAC 50.240(c), as soon as possible after the event commences or is discovered, report emissions that present a potential threat to human health or safety; and excess emissions believed to be unavoidable;
  - 8.2 Report all other excess emissions and deviations:
    - a. within 30 days of the end of the month in which the emissions or deviation occurs, except as provided in condition 8.2b; and
    - b. if a continuous or recurring excess emissions is not corrected within 48 hours of discovery, report within 72 hours of discovery unless ADEC provides written permission to report under condition 8.2a.
  - 8.3 When reporting excess emissions and deviations, use either ADEC’s on-line form, which is in Attachment A and at <http://www.dec.state.ak.us/air/ap/docs/eeform.pdf>, or provide all information called for by that form.
  - 8.4 If requested by ADEC, provide a more detailed written report as requested to follow up an excess emissions report.

**Statement of Avoided Requirement:**

The potential to emit of the sources listed in Table 1 plus insignificant emission units will be less than 100 tons per year for any regulated air contaminant under the terms of this ORL. By limiting the hours of operation for Source ID 1, 6 and 7 to 500 hours per year, limiting the fuel use by Source IDs 3, 4, and 5 and limiting the sulfur content of the fuel to no greater than 0.50% by weight for Source IDs 1 through 10, emission limits will not be exceeded.

Consistent with the definition of “potential to emit” listed in AS 46.14.990(23), the capacity of the stationary source to emit an air contaminant is verifiable through the monitoring, recordkeeping, and reporting contained in this approval. By limiting the potential to emit of the sources listed in Table 1, the owner/operator is avoiding the requirement to obtain an operating permit for a facility that is classified under AS 46.14.130(b) and 18 AAC 50.325(a).

**Table 1 – Emission Unit Inventory Subject to Limits**

<b>ID</b>	<b>Source Name</b>	<b>Source Description / Fuel Type</b>	<b>Heat Input</b>	<b>ORL Limit</b>
1	#1 Emergency Generator	Kohler Diesel	1,000 kW	500 operating hours in any consecutive 12 month period
3	#1 Boiler	Cleaver Brooks Dual Fired Diesel / Natural Gas	29,291,000 BTU/HR	See Conditions 2, 3, and 4
4	#2 Boiler	Cleaver Brooks Dual Fired Diesel / Natural Gas	29,291,000 BTU/HR	See Conditions 2, 3, and 4
5	#3 Boiler	Cleaver Brooks Dual Fired Diesel / Natural Gas	29,291,000 BTU/HR	See Conditions 2, 3, and 4
6	#2 Emergency Generator	CAT Diesel	1,500 kW	500 operating hours in any consecutive 12 month period
7	#3 Emergency Generator	CAT Diesel	1,500 kW	500 operating hours in any consecutive 12 month period

**Table 2 – Insignificant Emission Unit Inventory**

**Information in this table provided for information purposes only**

<b>ID</b>	<b>Source Name</b>	<b>Source Description / Fuel Type</b>	<b>Heat Input</b>
8	Imaging Center Boiler #1	Weil-McLain Dual Fired Diesel / Natural Gas	33 GPHR 4,763,000 BTU/HR
9	Imaging Center Boiler #2	Weil-McLain Dual Fired Diesel / Natural Gas	4,763,000 BTU/HR
10	Imaging Center Water Heater	Bock Dual Fired Diesel / Natural Gas	400,000 BTU/HR

**Attachment A. ADEC Notification Form**

Stationary Source Name \_\_\_\_\_

Air Quality ORL Number \_\_\_\_\_

Company Name \_\_\_\_\_

**When did you discover the Excess Emissions/Deviation?**

Date: // Time::

**When did the event/deviation?**

Begin: Date: // Time:: (please use 24hr clock)

End: Date: // Time:: (please use 24hr clock)

**What was the duration of the event/deviation:: (hrs:min) or days**

(total # of hrs, min, or days, if intermittent then include only the duration of the actual emissions/deviation)

**Reason for notification:** (please check only 1 box and go to the corresponding section)

- Excess Emissions - Complete Section 1 and Certify
- Deviation from ORL Conditions - Complete Section 2 and Certify
- Deviation from COBC, CO, or Settlement Agreement - Complete Section 2 and Certify

**Section 1: Excess Emissions**

(a) Was the exceedance  Intermittent or  Continuous

(b) Cause of Event (Check one that applies):

- Start Up/Shut Down
- Control Equipment Failure
- Bad fuel/coal/gas
- Natural Cause (weather/earthquake/flood)
- Scheduled Maintenance/Equipment Adjustments
- Upset Condition
- Other

(c) Description

Describe briefly what happened and the cause. Include the parameters/operating conditions exceeded, limits, monitoring data and exceedance.

(d) Emission Units Involved:

Identify the emission unit involved in the event, using the same identification number and name as in the ORL. Identify each emission standard potentially exceeded during the event and the exceedance.

Unit ID	Unit Name	ORL Condition Exceeded/Limit/Potential Exceedance

(e) Type of Incident (please check only one):

- Opacity%
- Fugitive Emissions
- Marine Vessel Opacity
- Other:
- Venting (gas/scf)
- Emission Limit Exceeded
- Failure to monitor/report
- Control Equipment Down
- Record Keeping Failure
- Flaring

(f) Unavoidable Emissions:

Do you intend to assert that these excess emissions were unavoidable?

YES

NO

Do you intend to assert the affirmative defense of 18 AAC 50.235?

YES

NO

Certify Report (go to end of form)

**Section 2. Deviations**

(a) Deviation Type (check one only box, corresponding with the section in the ORL)

Emission Unit Specific

General Source Test/Monitoring Requirements

Recordkeeping/Reporting/Compliance Certification

Standard Conditions Not Included in ORL

Generally Applicable Requirements

Reporting/Monitoring for Diesel Engines

Insignificant Emission Unit

Stationary Source Wide

Other Section:(title of section and section number of your ORL)

(b) Emission Unit Involved:

Identify the emission unit involved in the event, using the same identification number and name as in the ORL. List the corresponding ORL condition and the deviation.

Unit ID	Unit Name	ORL Condition /Potential Deviation

(c) Description of Potential Deviation:

Describe briefly what happened and the cause. Include the parameters/operating conditions and the potential deviation.

(d) Corrective Actions:

Describe actions taken to correct the deviation or potential deviation and to prevent future recurrence.

Certification:

**Based on information and belief formed after reasonable inquiry, I certify that the statements and information in and attached to this document are true, accurate, and complete.**

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**To Submit this Report:**

Fax to: 907-451-2187;

Email to: [airreports@dec.state.ak.us](mailto:airreports@dec.state.ak.us) - *if emailed, the report must be certified within the operating report required for the same reporting period;*

Mail to: ADEC, Air Permits Program, 610 University Avenue, Fairbanks, AK 99709-3643;

Phone Notification: 907-451-5173 - *phone notifications require a written follow-up report within the deadline listed in condition 8; OR*

Online Submission: *(Website is not yet available) - if submitted online, the report must be certified within the operating report required for the same reporting period.*