NON-TITLE V PERMIT APPLICATION INSTRUCTIONS
PROPOSED SCHEDULE OF CORRECTIVE ACTION (APC 115)

This form should be used to describe methods and planned schedule for a facility not currently in compliance to achieve compliance.

The items below give a brief explanation of the information being requested on the form. The following numbers refer to the specific box on the form:

1.-4. Site and Contact Information should be consistent with information on file with the Tennessee Division of Air Pollution Control as contained in the facility’s APC 100.

1. The organization’s legal name is the name under which the company is registered with the Tennessee Secretary of State (SOS). The organization’s legal name and SOS control number can be found on the SOS website at https://tnbear.tn.gov/Ecommerce/FilingSearch.aspx. If the organization is not registered with the SOS, then the owner’s name must be listed.

2. The site name should be indicated if different from the organization’s legal name.

3. Site address should indicate as clearly as possible the actual air contaminant source location. This need not be a mailing address. If it is a rural location, indicate the direction and approximate distance from a well-established reference point such as a town or major road intersection.

4. The Responsible Person may be the owner, president, vice-president, general partner, plant manager, environmental/health/safety coordinator, or other person that is able to represent and bind the facility in environmental permitting affairs.

5. Enter a general description of processes at the facility (i.e. products manufactured, work performed at the facility).

6. Enter the details of operations and emissions, especially those that are not in compliance.

7. Describe the emission and proposed method of control. The description should be sufficient to enable the Division to evaluate the situation. Include the efficiency of each piece of control equipment to be used.

8. Describe what action you have already taken, if any, to correct this situation. For example, control equipment installation, control equipment replacement, etc.

9. Outline proposed schedule of applicable actions to correction compliance situation.

10. Use the comment section to describe any other aspects of the compliance situation that are not described elsewhere on the form.

11. This form should be signed by the responsible person listed in Item 4. An unsigned and/or undated form will not be processed.

The bottom section of this form is for use by the Tennessee Division of Air Pollution Control. The Division will indicate whether the proposed schedule and/or equipment and methods are acceptable or not acceptable.