### **INLAND ENERGY, INC.**

April 19, 2007

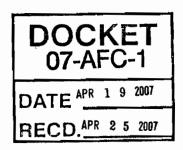
Mr. John Kessler Project Manager California Energy Commission 1516 Ninth Street Sacramento, CA 95814

Re - Docket # 07-AFC-1

Dear Mr. Kessler:

3501 Jamboree Road SouthTower Suite 606 Newport Beach, CA 92660 Ph 949 856-2200 / Fax 949 856-2313 www.InlandEnergy.Com





Attached are copies of the <u>Applications for Authority to Construct and Permit to Operate</u> that were submitted to the Mojave Desert Air Quality Management District.

If you have any questions regarding these or other Victorville 2 documents, please call me @ 760-843-5450.

Regards,

Antonio D. Penna Jr.

Inland Energy

Xc:

Mr. Thomas Barnett, Inland Energy

A. D. Penna fr.

Ms. Sara Head, ENSR

Mr. Eldon Heaston, MDAQMD (w/out attachments)

14306 Park Avenue, Victorville, CA 92392-2310 (760) 245-1661 Fa&inile: (260) 245-2822

www.mdaqmd.ca.gov

Eldon Heaston

Executive Director

#### APPLICATION FOR AUTHORITY TO CONSTRUCT AND PERMIT TO OPERATE

Page 1 of 2: please type or print REMIT S	\$212.00 WITH THIS DOCUMENT (\$121.00 FOR CHANGE OF OWNER)
1. Permit To Be Issued To (company name to receive permit):	1a. Federal Tax ID No.:
City of Victorville	95 2235918
2. Mailing/Billing Address (for above company name):	<u></u>
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001	
THOSE SIND BIND, T. S. BOX SSS I, VISICIVIIIC, GA SECON SSS I	
3. Facility or Business License Name (for equipment location):	
Victorville 2 Hybrid Power Project	
Facility Address - Location of Equipment (if same as for contact the contact that it is a second to the contact that it is a second to the contact that it is a second to the contact that is a second to the contact that it	npany, enter "Same"): Location UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be rena	
5. Contact Name/Title:	Email Address: Phone/Fax Nos.:
Jon B. Roberts, City Manager	iroberts@ci.victorville.ca. 760-955-5000/760-245-7243
	<u>us</u>
6. Application is hereby made for Authority To Construct (ATC	
Natural gas fired combustion turbine-generator #1 with heat re-	covery steam generator
Air Pollution Control Equipment, if any (note that most APCE r	equire a separate application):
Selective catalytic reduction with oxidation catalyst	
7. Application is for:	For modification or change of owner:
X New Construction Modification* Change of	of Owner*  *Current Permit Number:
8. Type of Organization (check one):	
☐Individual Owner ☐Partnership ☐Corporation ☐Utili	ity X Local Agency State Agency Federal Agency
9. General Nature of Business:	Principal Product: SIC Code (if known):
	or odd (ii kilowil).
Electrical generating facility	Electricity 4 9 1 1
10. Distances (feet and direction to closest):	
500 S Fenceline 60 W Residence	e 7 0 0 0 SE Business 16200 SE School
11. Facility Annual Throughput by Quarters (percent):	12. Expected Facility Operating Hours:
The Facility Affidair Throughput by Quarters (percent).	12. Expected Facility Operating Flours.
<u>25</u> % <u>25</u> % <u>25</u> % <u>25</u> %	<u>24</u> <u>7</u> <u>52</u> <u>8760</u>
Jan-Mar Apr-Jun Jul-Sep Oct-Dec	Hrs/Day Days/Wk Wks/Yr Total Hrs/Yr
13. Do you claim Confidentiality of Data (if yes, state nat	ure of data on reverse in Remarks)?
14. Signature of Responsible Official:	Official Title:
1/4	
Typed or Printed Name of Responsible Official:	City Manager
ryped of Printed Name of Responsible Official.	Phone Number: Date Signed:
Jon B. Roberts	760-955-5000 4-13-07
	ct Use Only -
Application Number: Invoice Number:	Permit Number: Company/Facility Number:
VID 8971 18203	46/2948

### MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT GENERAL APPLICATION, continued

1 145 feet 18.5 feet 195.3 °F 1,001,784 acfm 3,727 ft/min  2 3	. Otaon Lin	issions Information	on:			
3  (list additional stacks on a separate sheet)  Stack Height is the distance above ground level to discharge point (feet)  Stack Diameter is the diameter (or equivalent circular diameter) of discharge point (nearest tenth foot)	Stack No.	Stack Height	Stack Diameter	Exhaust Temp	Exhaust Flow Rate	Exhaust Velocit
(list additional stacks on a separate sheet)  Stack Height is the distance above ground level to discharge point (feet)  Stack Diameter is the diameter (or equivalent circular diameter) of discharge point (nearest tenth foot)  If using cross-sectional area (A in square feet), equivalent diameter is D = (1.273A)^0.5  Exhaust Temp in degrees F, acutal or estimated to nearest 50 deg F  Exhaust Flow Rate at discharge point in actual cubic feet per minute (ACFM)  Exhaust Velocity in feet per second, design or measured  6. Remarks (basis for confidentiality of data, process description, modification description, etc.):  Exhaust temp, flow rate, and exhaust velocity are representative of normal operating case: 100% load with no duct burner in use, with the local average ambient temperature of 77 °F and a relative	1	145 feet	18.5 feet	195.3 °F	1,001,784 acfm	3,727 ft/min
(list additional stacks on a separate sheet)  Stack Height is the distance above ground level to discharge point (feet)  Stack Diameter is the diameter (or equivalent circular diameter) of discharge point (nearest tenth foot)  If using cross-sectional area (A in square feet), equivalent diameter is D = (1.273A)^0.5  Exhaust Temp in degrees F, acutal or estimated to nearest 50 deg F  Exhaust Flow Rate at discharge point in actual cubic feet per minute (ACFM)  Exhaust Velocity in feet per second, design or measured  S. Remarks (basis for confidentiality of data, process description, modification description, etc.):  Exhaust temp, flow rate, and exhaust velocity are representative of normal operating case: 100% load with no duct burner in use, with the local average ambient temperature of 77 °F and a relative	2	- 40,77	.,,			
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Exhaust temp, flow rate, and exhaust velocity are representative of normal operating case: 100% load with no duct burner in use, with the local average ambient temperature of 77 °F and a relative	Exhaust Tei Exhaust Flo	mp in degrees F, w Rate at discha	acutal or estimated rge point in actual c	to nearest 50 deg ubic feet per minut	F	73A)^0.5
numidity of 40%	vith no duct	burner in use, wi	_	-	_	
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						•
						-

If you wish to specify process information as proprietary or confidential, space is provided for this purpose. The kinds and rates of emissions may not be held confidential; emissions are subject to public disclosure.

14306 Park Avenue, Victorville, CA 92392-2310 (760) 245-1661 Facsimile: (760) 245-2022 (760) 245-2022

www.mdaqmd.ca.gov Eldon Heaston **Executive Director** 

#### APPLICATION FOR EXTERNAL COMBUSTION ENGINE (BOILER, ETC.) ONLY

Page 1 of 2: please type or print REMIT \$	212.00 WITH THIS DOCUMENT	(\$121.00 FOR CHANGE OF OWNER)
1. Permit To Be Issued To (company name to receive permit):		1a. Federal Tax ID No.:
City of Victorville		95 2235918
Mailing/Billing Address (for above company name):		
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001		
3. Facility or Business License Name (for equipment location):		
Victorville 2 Hybrid Power Project		
4. Facility Address - Location of Equipment (if same as for con	npany, enter "Same"):	Facility UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be rena	med Perimeter Road]	NAD27 11 466122 E 3832139 N
5. Contact Name/Title:	Email Address:	Phone/Fax Nos.:
Jon B. Roberts, City Manager	iroberts@ci.victorville.ca.	760-955-5000/760-245-7243
	us	
6. Application is hereby made for Authority To Construct (ATC)	and Permit To Operate (PT	O) the following equipment:
Duct burner #1, 424.28 MMBTU/hr heat capacity		
7. Application is for:	For modification	on or change of owner:
		•
X   New Construction   Modification*   Change of	Owner*  *Current Perm	it Number:
8. Type of Organization (check one):		
│	y X Local Agency Stat	e Agency Federal Agency
9. Distances (feet and direction to closest):		
500 O Francis COOO W Building	7000 OF D	4.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0
500 S Fenceline 6000 W Residence		ess <u>1 6 2 0 0 SE</u> School
10. General Nature of Business:	11. Principal Product:	
Electrical generating facility	Electricity	
12. Facility Annual Throughput by Quarters (percent):	13. Facility Operating Ho	urs:
	6 7	5.0
	6 7 Hrs/Day Days/Wk	5 2 2 0 0 0 Total Hrs/Yr
14. Do you claim Confidentiality of Data (if yes, state natu		
15. Signature of Responsible Official:	Official Title:	
- OBTILL	<u> </u>	
Typed or Printed Name of Responsible Official:	City Manager Phone Number:	Date Signed:
ryped of Filined Name of Responsible Official.	Phone Number.	
	760-955-5000	4-13-07
	t Use Only -	
Application Number: Invoice Number:	Permit Number:	Company/Facility Number:
		TUIXTYO

# MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT EXTERNAL COMBUSTION APPLICATION, continued

Page 2 of 2: please type or print

14306 Park Avenue, Victorville, CA 92392-2310

(760) 245-1661

Facsimile: (760), 245-2022 3: 03

www.mdaqmd.ca.gov Eldon Heaston Executive Director

### APPLICATION FOR AUTHORITY TO CONSTRUCT AND PERMIT TO OPERATE

Page 1 of 2: please type or print REMIT \$	212.00 WITH THIS DOCUMENT (\$121.00 FOR CHANGE OF OWNER)
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City of Victorville	95 2235918
2. Mailing/Billing Address (for above company name):	
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001	
3. Facility or Business License Name (for equipment location):	
Victorville 2 Hybrid Power Project	
Trocertine 2 rayona r over reject	
4. Facility Address - Location of Equipment (if same as for com	npany, enter "Same"): Location UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be renar	med Perimeter Road] NAD27 11 466122 E 3832139 N
	· · · · · · · · · · · · · · · · · · ·
5. Contact Name/Title:	Email Address: Phone/Fax Nos.:
Jon B. Roberts, City Manager	jroberts@ci.victorville.ca. 760-955-5000/760-245-7243
	<u>us</u>
Application is hereby made for Authority To Construct (ATC)	
Oxidation catalyst system for combustion turbine power train #1	
Air Pollution Control Equipment, if any (note that most APCE re	equire a senarate application):
All I cliation control Equipment, if any those that most Ar GE to	equire a separate application).
7. Application is for:	For modification or change of owner:
VNew Construction DModification Change	f Ownerst   tOwnerst Descrit November
X New Construction Modification* Change of	f Owner*
8. Type of Organization (check one):	
☐ Individual Owner ☐ Partnership ☐ Corporation ☐ Utili	ty XLocal Agency State Agency Federal Agency
9. General Nature of Business:	Principal Product: SIC Code (if known):
	,
Electrical generating facility	Electricity 4 9 1 1
10. Distances (feet and direction to closest):	
5 0 0 S Fenceline 6 0 W Residence	e 7 0 0 0 SE Business 16200 SE School
11. Facility Annual Throughput by Quarters (percent):	12. Expected Facility Operating Hours:
The racinty Annual Throughput by Quarters (percent).	12. Expected Facility Operating Hours.
<u>25</u> % <u>25</u> % <u>25</u> % <u>25</u> %	24 7 52 8760
Jan-Mar Apr-Jun Jul-Sep Oct-Dec	2 4         7         5 2         8 7 6 0           Hrs/Day         Days/Wk         Wks/Yr         Total Hrs/Yr
13. Do you claim Confidentiality of Data (if yes, state natu	
14. Signature of Responsible Official:	Official Title:
14. digriduale of responsible difficial.	Official Title.
73122	City Manager
Typed or Printed Name of Responsible Official:	Phone Number: Date Signed:
	4-13-07
Jon B. Roberts	760-955-5000
	t Use Only -
Application Number: Invoice Number:	Permit Number: Company/Facility Number:
DUUU TYII LOOU J	46 M7 78

# MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT GENERAL APPLICATION, continued

Stack No.	nissions Informati Stack Height	Stack Diameter	Exhaust Temp	Exhaust Flow Rate	Exhaust Velocity
1	145 feet	18.5 feet	195.3 °F	1,001,784 acfm	3,727 ft/min
2				1,00,1,00,000	
3					
3		(list additional	stacks on a separa	ate sheet)	
Stack Diam Exhaust Te Exhaust Flo	eter is the diame If using cross-se mp in degrees F, ow Rate at discha	above ground level ter (or equivalent cir	to discharge point cular diameter) of cular feet), equivale to nearest 50 degubic feet per minut	(feet) discharge point (neares ent diameter is D = (1.2 F	
Exhaust ter	np, flow rate, and t burner in use, w	exhaust velocity are	e representative of	nodification description, normal operating case ture of 77 °F and a rela	: 100% load

14306 Park Avenue, Victorville, CA 92392-2310

(760) 245-1661

Facsimile: (760) 245-202207 473 15 43 8: 03

www.mdaqmd.ca.gov *Eldon Heaston* Executive Director

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Victorville 2 Hybrid Power Project		
4. Facility Address - Location of Equipment (if same as for com	npany, enter "Same"):	Location UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be renar		NAD27 11 466122 E 3832139 N
5. Contact Name/Title:	Email Address:	Phone/Fax Nos.:
Jon B. Roberts, City Manager		760-955-5000/760-245-7243
	us	
6. Application is hereby made for Authority To Construct (ATC)		
Selective catalytic reduction and ammonia injection system for	combustion turbine power tra	MU # 1
Air Pollution Control Equipment, if any (note that most APCE re	equire a separate application	):
7. Application is for:	For modification	on or change of owner:
	1	-
X New Construction Modification* Change of 8. Type of Organization (check one):	f Owner*   *Current Perm	it Number:
Individual Owner Partnership Corporation Utili	ty 🔯 sood Agongy - 🗆 Stat	a Aganay   Tradeval Aganay
9. General Nature of Business:		
9. General Nature of Business.	Principal Product:	SIC Code (if known):
Electrical generating facility	Electricity	4 9 1 1
10. Distances (feet and direction to closest):		
500 S Fenceline 60 W Residence	e <u>7000</u> SE Busine	ess 16200 SE School
11. Facility Annual Throughput by Quarters (percent):	12. Expected Facility Ope	erating Hours:
_25 % _25 % 25 % 25 %	2 4 7	52 8760
Jan-Mar Apr-Jun Jul-Sep Oct-Dec	Hrs/Day Days/Wk	5 2 8 7 6 0 Wks/Yr Total Hrs/Yr
13. Do you claim Confidentiality of Data (if yes, state natu	re of data on reverse in R	
14. Signature of Responsible Official:	Official Title:	
JB KLT	City Manager	
Typed or Printed Name of Responsible Official:	City Manager Phone Number:	Date Signed:
	1	4-13-07
Jon B. Roberts	760-955-5000	7-73-07
- For Distric Application Number: Invoice Number:	t Use Only - Permit Number:	Company/Facility Number:
0000 8974 18203	i	410/2948

# MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT GENERAL APPLICATION, continued

	issions Information	on: Stack Diameter	Exhaust Temp	Exhaust Flow Rate	Exhaust Velocit
Stack No.	Stack Height 145 feet	18.5 feet	195.3 °F	1,001,784 acfm	3,727 ft/min
1 _	145 leet	10.5 leet	190.0 1	1,001,704 aciiii	3,727 1011111
2					
3 _		/link additional	otooka on o oonara	ato shoot)	
Stock Maigh	at is the distance	above ground level	stacks on a separa		
Stack Diam Exhaust Te Exhaust Flo	eter is the diamet If using cross-sec mp in degrees F, w Rate at dischal	er (or equivalent cir	cular diameter) of our uare feet), equivale to nearest 50 deg ubic feet per minut	discharge point (neares ent diameter is D = (1.2 F	
numidity of	TO /0				

The kinds and rates of emissions may not be held confidential; emissions are subject to public disclosure.

14306 Park Avenue, Victorville, CA 92392-2310

(760) 245-1661

Facsimile: (760) 245-2022 8: 03

www.mdaqmd.ca.gov Eldon Heaston Executive Director

### APPLICATION FOR AUTHORITY TO CONSTRUCT AND PERMIT TO OPERATE

Page 1 of 2: please type or print REMIT \$	3212.00 WITH THIS DOCUMEN	T (\$121.00 FOR CHANGE OF OWNER)
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City of Victorville		9 5 2 2 3 5 9 1 8
2. Mailing/Billing Address (for above company name):		
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001		
3. Facility or Business License Name (for equipment location):		
Victorville 2 Hybrid Power Project		
4. Facility Address - Location of Equipment (if same as for con	npany, enter "Same"):	Location UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be rena	med Perimeter Road]	NAD27 11 466122 E 3832139 N
5. Contact Name/Title:	Email Address:	Phone/Fax Nos.:
Jon B. Roberts, City Manager	jroberts@ci.victorville.ca.	760-955-5000/760-245-7243
	us	
6. Application is hereby made for Authority To Construct (ATC)		the following equipment:
Natural gas fired combustion turbine-generator #2 with heat rec	covery steam generator	
Air Pollution Control Equipment, if any (note that most APCE re	equire a separate application	):
Selective catalytic reduction with oxidation catalyst		
7. Application is for:	For modification	on or change of owner:
		-
X New Construction Modification* Change o	f Owner* *Current Perm	it Number:
Type of Organization (check one):	_	_
Individual Owner Partnership Corporation Utili	ty X Local Agency State	e Agency Federal Agency
General Nature of Business:	Principal Product:	SIC Code (if known):
Electrical generating facility	Electricity	4911
10. Distances (feet and direction to closest):		
550 SE Fenceline 6100 W Residence	e <u>6900</u> <u>SE</u> Busine	ess 16100SE School
11. Facility Annual Throughput by Quarters (percent):	12. Expected Facility Ope	erating Hours:
25 % 25 % 25 % 25 %	2 4 7	52 8760
<u>25 % 25 % 25 % 25 %</u> Jan-Mar Apr-Jun Jul-Sep Oct-Dec	Hrs/Day Days/Wk	<u> 5 2 8 7 6 0 Wks/Yr Total Hrs/Yr</u>
13. Do you claim Confidentiality of Data (if yes, state natu		
14. Signature of Responsible Official:	Official Title:	
JO PLLY	City Manager	
Typed or Printed Name of Responsible Official:	City Manager Phone Number:	Date Signed:
Typed of Fillited Name of Nesponsible Official.	i none ramber.	4-13-07
Jon B. Roberts	760-955-5000	7/30/
- For Distric Application Number: Invoice Number:	t Use Only - Permit Number:	Company/Facility Number
000 8973 8203	T GITTIK TYGITIDET.	Company/Facility Number

# MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT GENERAL APPLICATION, continued

5. Stack Em Stack No. 1	issions Information Stack Height				
	Stack Height	Ot I. D' 1			
1	- 10.0	Stack Diameter	Exhaust Temp	Exhaust Flow Rate	Exhaust Velocity
	145 feet	18.5 feet	195.3 °F	1,001,784 acfm	3,727 ft/min
2					
3	100				
		(list additional	stacks on a separa	ite sheet)	
Stack Diame I Exhaust Ter Exhaust Flov	eter is the diamet f using cross-sec np in degrees F, w Rate at dischal	•	cular diameter) of o uare feet), equivale to nearest 50 deg ubic feet per minut	discharge point (neares ent diameter is D = (1.27 F	
Exhaust tem	ip, flow rate, and burner in use, wi	exhaust velocity are	e representative of	odification description, normal operating case: ure of 77 °F and a relat	100% load

14306 Park Avenue, Victorville, CA **92392**2310 11 8: 02 (760) 245-1661 Facsimile: (760) 245-2022

www.mdaqmd.ca.gov Eldon Heaston Executive Director

### APPLICATION FOR EXTERNAL COMBUSTION ENGINE (BOILER, ETC.) ONLY

Page 1 of 2: please type or print REMIT \$	212.00 WITH THIS DOCUMENT (\$121.00 FOR CHANGE O	F OWNER)
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3. Facility or Business License Name (for equipment location)	:	
Victorville 2 Hybrid Power Project		
4. Facility Address - Location of Equipment (if same as for cor	mpany, enter "Same"): Facility UTM or Lat/Long	<b>]</b> :
Helendale Road, Victorville, CA 92393 [Note: Street to be rena	med Perimeter Road] NAD27 11 466122 E 3832	2139 N
5. Contact Name/Title:	Email Address: Phone/Fax Nos.:	
Jon B. Roberts, City Manager	jroberts@ci.victorville.ca. 760-955-5000/760-245-7	7243
	<u>us</u>	
6. Application is hereby made for Authority To Construct (ATC	) and Permit To Operate (PTO) the following equipme	nt:
Duct burner #2, 424.28 MMBTU/hr heat capacity		
7. Application is for:	For modification or change of owner:	
New Construction Modification* Change or	f Owner* *Current Permit Number:	
8. Type of Organization (check one):		
Individual Owner Partnership Corporation Utili	ty X Local Agency State Agency Federal A	gency
Distances (feet and direction to closest):		
5 5 0 SE Fenceline 6 1 W Residence	e 6900 SE Business 16100SE S	School
10. General Nature of Business:	11. Principal Product:	
To. General Nature of Business.		
Electrical generating facility	Electricity	
12. Facility Annual Throughput by Quarters (percent):	13. Facility Operating Hours:	1
25 % 25 % 25 % 25 %	6 7 52 20	000
Jan-Mar Apr-Jun Jul-Sep Oct-Dec		Hrs/Yr
14. Do you claim Confidentiality of Data (if yes, state nati	ure of data in attachment)?	No
15. Signature of Responsible Official:	Official Title:	
LA ZLE		ł
To Deleted Name of Beauty in the Official	City Manager	
Typed or Printed Name of Responsible Official:	Phone Number: Date Signed:	_ [
Jon B. Roberts	760-955-5000 4-13-0	/
	t Use Only -	- ,
Application Number: Invoice Number:	Permit Number: Company/Facility Num	nber:

### MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT EXTERNAL COMBUSTION APPLICATION, continued

Page 2 of 2: please type or print

16. INFORMATION ON EQUIPMENT:  ☐ Boiler ☐ Dryer ☐ Furnace ☐ Hea	ater Kiln Oven XO	ther, specify: Duct bu	rner
Manufacturer: T B D		<del>-</del>	
	Serial No.: TBD		
Maximum heat input rating (use Higher		24.3	MMBtu/hr or kW
Burner Manufacturer: TBD	Burner N	Model No.: TBD	
Number of burners: TBD B	lurner max heat input rating:	TBD	MMBtu/hr or kW
Percent excess air (or n/a): T B D	Operating temps (C o	or F): <u>TBD</u> Av.	TBD_Max
Specify Primary Fuel (*attach fuel analys	sis for these fuels specifying	HHV and sulfur conten	t):
X Natural Gas LPG (Propane)			
☐ Digester Gas* ☐ Landfill Gas* ☐ R	-		
Max hourly primary fuel usage:4	1 4 4 0 0 Fuel unit	s (ft³, gal, etc.):ft³_	
If secondary fuel is proposed, specify:	NA	Max hourly usage:	
Feedstock type and max process rate (s		2000450 00 11	
Critic Law Loring of Critic Cool director.	NAD27 Zone 11 466080.94 E		
Max annual hours: 2000 E	xhaust Stack Height (feet):	1 4 5 Inside Diameter	(inches): 222
17. EMISSION CONTROLS: Check all that	apply:		
Low NOx Burner Oxygen Trim			
Oxidation Catalyst		•	Reduction (SNCR)
Afterburner ESP Baghouse	Other - Please spe	cify:	
18. MAX EMISSION RATES (CONTROLLE	•	Concentration	Mass
Pollutant Oxides of Nitrogen (NOx)		mvd or gr/dscf	pounds/hour 6 1
Oxides of Nilfoger (NOX) Oxides of Sulfur (SOx)			0.48
Carbon Monoxide (CO)			12.6
Total Particulates (TSP or PM30)			
Coarse Respirable Particulates (PM10	))		1 2
Fine Respirable Particulates (PM2.5)			
Total Organics (TOG)			
Volatile Organic Compounds (VOC, R	OG or NMOG)		
19. DRYERS ONLY Check one:			4.56
			4.56
Centrifugal Chip Fluidized Bed		er, specify:	4.56
Centrifugal Chip Fluidized Bed  20. FURNACE ONLY Check one:	Rotary Spray Othe		
Centrifugal Chip Fluidized Bed  20. FURNACE ONLY Check one: Annealing Burnoff Calcining	Rotary Spray Othe	Diffusion Electric	Forge Pot
Centrifugal Chip Fluidized Bed  20. FURNACE ONLY Check one: Annealing Burnoff Calcining Holding Heat Treating Melting	Rotary Spray Othe	Diffusion Electric	
Centrifugal Chip Fluidized Bed  20. FURNACE ONLY Check one: Annealing Burnoff Calcining Holding Heat Treating Melting  21. OVEN ONLY Check one:	Rotary Spray Othe	Diffusion ☐Electric ☐Sweating ☐Oxid	Forge Pot
Centrifugal Chip Fluidized Bed  20. FURNACE ONLY Check one: Annealing Burnoff Calcining Holding Heat Treating Melting  21. OVEN ONLY Check one:	Rotary Spray Othe	Diffusion Electric Sweating Oxider	Forge Pot de Growth

14306 Park Avenue, Victorville, CA 92392-2310

245-1661 Facsimile: (760) 245-2022 Executive Di
APPLICATION FOR AUTHORITY TO CONSTRUCT AND PERMIT TO OPERATE (760) 245-1661

www.mdaqmd.ca.gov Eldon Heaston **Executive Director** 

Page 1 of 2: please type or print REMIT S	\$212.00 WITH THIS DOCUMENT (\$121.00 FOR CHANGE OF OWNER
Permit To Be Issued To (company name to receive permit):	
City of Victorville	9 5 2 2 3 5 9 1 8
2. Mailing/Billing Address (for above company name):	
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001	
3. Facility or Business License Name (for equipment location).	
Victorville 2 Hybrid Power Project	
4. Facility Address - Location of Equipment (if same as for cor	mpany, enter "Same"): Location UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be rena	
5. Contact Name/Title: Jon B. Roberts, City Manager	Email Address: Phone/Fax Nos.: iroberts@ci.victorville.ca. 760-955-5000/760-245-7243
John B. Noberts, City Manager	<u>iroberts@ci.victorville.ca.</u> 760-955-5000/760-245-7243
Application is hereby made for Authority To Construct (ATC)	
Oxidation catalyst system for combustion turbine power train #	
Air Pollution Control Equipment, if any (note that most APCE r	equire a separate application):
7. Application is for:	For modification or change of owner:
l _ ``	
X New Construction Modification* Change of	f Owner* *Current Permit Number:
8. Type of Organization (check one):	. Помер Петер
Individual Owner Partnership Corporation Util	
General Nature of Business:	Principal Product: SIC Code (if known):
Electrical generating facility	Electricity 4 9 1 1
10. Distances (feet and direction to closest):	
F.F.O. OF Faractics C.4.O.O. W. Bosidosa	- COOO OF Business 4 C 4 O 0 OF Cohool
550 SE Fenceline 6100 W Residenc	
11. Facility Annual Throughput by Quarters (percent):	12. Expected Facility Operating Hours:
25_% 25_% 25_% 25_%	24 7 52 8760
Jan-Mar Apr-Jun Jul-Sep Oct-Dec	Hrs/Day Days/Wk Wks/Yr Total Hrs/Yr
13. Do you claim Confidentiality of Data (if yes, state nat	ure of data on reverse in Remarks)?
14. Signature of Responsible Official:	Official Title:
- BRLL	
Tuned or Printed Name of Responsible Official:	City Manager   Phone Number:   Date Signed:
Typed or Printed Name of Responsible Official:	
Jon B. Roberts	760-955-5000 4-13-07
	ct Use Only -
Application Number: Invoice Number	Permit Number: Company/Facility Number:
1000 1915 10200	46/2948

# MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT GENERAL APPLICATION, continued

		GENERAL AF	PPLICATION,	continued	
Page 2 of 2:	please type or pri	nt			
15. Stack Em	nissions Informati				
Stack No.	Stack Height	Stack Diameter	Exhaust Temp	Exhaust Flow Rate	Exhaust Velocity
1 _	145 feet	18.5 feet	195.3 °F	1,001,784 acfm	3,727 ft/min
2		12.11.11			
3					
_		(list additional	stacks on a separa	ate sheet)	
_		above ground level		•	
			-	discharge point (neares	•
	_	acutal or estimated		ent diameter is D = (1.2 F	13A)^U.5
Exhaust Flo	w Rate at discha	rge point in actual c	ubic feet per minut		
Exhaust Ve	locity in feet per s	second, design or m	easured		
				odification description,	
	•	•	•	normal operating case	
		ith the local average	e ambient temperat	ture of 77 °F and a rela	tive
humidity of	40%				

If you wish to specify process information as proprietary or confidential, space is provided for this purpose. The kinds and rates of emissions may not be held confidential; emissions are subject to public disclosure.

14306 Park Avenue, Victorville, CA 92392-2310

(760) 245-1661

www.mdaqmd.ca.gov Eldon Heaston

# 245-1661 Facsimile: (760) 245-2022 07 2021 5 20 8: 03 Executive Director APPLICATION FOR AUTHORITY TO CONSTRUCT AND PERMIT TO OPERATE

Page 1 of 2: please type or print REMIT \$	212.00 WITH THIS DOCUMENT	T (\$121.00 FOR CHANGE OF OWNER)
1. Permit To Be Issued To (company name to receive permit):		1a. Federal Tax ID No.:
City of Victorville		95 2235918
Mailing/Billing Address (for above company name):		: 
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001		
The feed of the privacy is a Box book, that of this privacy of the		
3. Facility or Business License Name (for equipment location):		
Victorville 2 Hybrid Power Project		
Facility Address - Location of Equipment (if same as for com	pany, enter "Same"):	Location UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be renar		NAD27 11 466122 E 3832139 N
E. Oaste Albana Gibb	IT	Di
5. Contact Name/Title: Jon B. Roberts, City Manager	Email Address:	Phone/Fax Nos.: 760-955-5000/760-245-7243
oon B. Noberts, Oity Manager	us	100-933-3000/700-243-7243
Application is hereby made for Authority To Construct (ATC)	·	O) the following equipment:
Selective catalytic reduction and ammonia injection system for	-	
Air Pollution Control Equipment, if any (note that most APCE re	equire a separate application	):
7. Application is for:	For modification	on or change of owner:
X   New Construction	f Owner* *Current Perm	it Number:
8. Type of Organization (check one):	<u> </u>	
Individual Owner Partnership Corporation Utility	tv XLocal Agency Stat	e Agency   Federal Agency
General Nature of Business:	Principal Product:	SIC Code (if known):
Electrical generating facility	Electricity	4911
10. Distances (feet and direction to closest):		
<u>550 SE Fenceline</u> 6100 W Residence	e 6900 SE Busin	ess 16100SE School
11. Facility Annual Throughput by Quarters (percent):	12. Expected Facility Op-	erating Hours:
25 % 25 % 25 % 25 %	2.4 7	52 8760
<u>2 5 % 2 5 % 2 5 % 2 5 %                </u>	Hrs/Day Days/Wk	5 2 8 7 6 0 Wks/Yr Total Hrs/Yr
13. Do you claim Confidentiality of Data (if yes, state natu		
14. Signature of Responsible Official:	Official Title:	
2-12 71-T		
	City Manager	
Typed or Printed Name of Responsible Official:	Phone Number:	Date Signed:
Jon B. Roberts	760-955-5000	4-13-07
- For Distric	# · · · · · ·	
Application Number: Invoice Number:	Permit Number:	Company/Facility Number:
(XVV 8977)		4612948

# MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT GENERAL APPLICATION, continued

	please type or pri				
	nissions Information				
Stack No.	Stack Height	Stack Diameter	Exhaust Temp	Exhaust Flow Rate	Exhaust Velocity
1 .	145 feet	18.5 feet	195.3 °F	1,001,784 acfm	3,727 ft/min
2					
3					
		•	stacks on a separa	,	
Stack Diam Exhaust Te Exhaust Flo	neter is the diamet If using cross-sec emp in degrees F, ow Rate at dischal	• •	cular diameter) of uare feet), equivale to nearest 50 deg ubic feet per minut	discharge point (neares ent diameter is D = (1.2 F	,
Exhaust ter	np, flow rate, and t burner in use, w	exhaust velocity are	e representative of	nodification description, normal operating case ture of 77 °F and a rela	: 100% load
				ential, space is provided missions are subject to	

14306 Park Avenue, Victorville, CA 92392-2310

(760) 245-1661

Facsimile: (760):245-2022 3:03

www.mdaqmd.ca.gov Eldon Heaston Executive Director

#### APPLICATION FOR AUTHORITY TO CONSTRUCT AND PERMIT TO OPERATE

Page 1 of 2: please type or print REMIT \$	3212.00 WITH THIS DOCUMENT	T (\$121.00 FOR CHANGE OF OWNER)
1. Permit To Be Issued To (company name to receive permit):		1a. Federal Tax ID No.:
City of Victorville		95 2235918
Mailing/Billing Address (for above company name):	V-190- V-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001		
3. Facility or Business License Name (for equipment location):		
Victorville 2 Hybrid Power Project		
4. Facility Address - Location of Equipment (if same as for com	npany, enter "Same"):	Location UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be renai	med Perimeter Road]	NAD27 11 466122 E 3832139 N
5. Contact Name/Title:	Email Address:	Phone/Fax Nos.:
Jon B. Roberts, City Manager	!	760-955-5000/760-245-7243
C. Application in basely, and for Authority To Construct (ATC)	US	2) 46 - 6-11-11-11-11-11-11-11-11-11-11-11-11-11
<ol><li>Application is hereby made for Authority To Construct (ATC)</li><li>Cooling tower</li></ol>	and Permit 10 Operate (P10	ر the following equipment:
Air Pollution Control Equipment, if any (note that most APCE re	equire a separate application	):
	, , , , , , , , , , , , , , , , , , ,	'
7. Application is for:	For modification	on or change of owner:
X New Construction ☐ Modification* ☐ Change o	f Owner* *Current Perm	it Number:
8. Type of Organization (check one):	<u> </u>	
☐ Individual Owner ☐ Partnership ☐ Corporation ☐ Utili	ty 🛛 Local Agency 🔲 State	e Agency Federal Agency
9. General Nature of Business:	Principal Product:	SIC Code (if known):
Electrical generating facility	Electricity	4911
10. Distances (feet and direction to closest):	•	
150 E Fenceline 6400 W Residence	e <u>6600</u> SE Busine	ess <u>1 5 7 0 0 SE</u> School
11. Facility Annual Throughput by Quarters (percent):	12. Expected Facility Ope	erating Hours:
25 % 25 % 25 % 25 %	2 4 7	52 8760
2 5 % 2 5 % 2 5 % 2 5 % 2 5 % Jan-Mar Apr-Jun Jul-Sep Oct-Dec	2 4 7 Hrs/Day Days/Wk	Wks/Yr Total Hrs/Yr
13. Do you claim Confidentiality of Data (if yes, state natu	ire of data on reverse in R	emarks)? Yes XNo
14. Signature of Responsible Official:	Official Title:	
JO MIL	City Manager	
Typed or Printed Name of Responsible Official:	Phone Number:	Date Signed:
Jon B. Roberts	760-955-5000	4-13-07
	t Use Only -	
Application Number: Invoice Number: 18203	Permit Number:	Company/Facility Number:

### MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT GENERAL APPLICATION continued

. Stack En	nissions Informati	on:			
Stack No.	Stack Height	Stack Diameter	Exhaust Temp	Exhaust Flow Rate	Exhaust Veloci
1	62.34 ft	28 ft / cell	98 °F	1,528,000 cfm / fan	41.37 ft/sec
2					
3					
-		(list additional	stacks on a separa	ite sheet)	
Stack Diam Exhaust Te Exhaust Flo	eter is the diamet If using cross-sec mp in degrees F, ow Rate at discha		cular diameter) of our uare feet), equivalent to nearest 50 degubic feet per minut	discharge point (neares ent diameter is D = (1.2° F	,
. Remarks	(basis for confide	entiality of data, proc	ess description, m	odification description,	
				osest cooling tower cell	

14306 Park Avenue, Victorville, CA (92392-2310) (760) 245-1661 Facsimile: (760) 245-2022 8: 02

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### APPLICATION FOR EXTERNAL COMBUSTION ENGINE (BOILER, ETC.) ONLY

		(\$121.00 FOR CHANGE OF OWNER)
Permit To Be Issued To (company name to receive permit):		1a. Federal Tax ID No.:
City of Victorville		95 2235918
Mailing/Billing Address (for above company name):		
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001		
Facility or Business License Name (for equipment location)	<u>-</u>	
Victorville 2 Hybrid Power Project		
Facility Address - Location of Equipment (if same as for cor	npany, enter "Same"):	Facility UTM or Lat/Long:
Helendale Road, Victorville, CA 92393 [Note: Street to be rena	med Perimeter Road]	NAD27 11 466122 E 3832139 N
5. Contact Name/Title:	Email Address:	Phone/Fax Nos.:
Jon B. Roberts, City Manager	jroberts@ci.victorville.ca.	760-955-5000/760-245-7243
	<u>us</u>	
6. Application is hereby made for Authority To Construct (ATC	) and Permit To Operate (PT	O) the following equipment:
Auxiliary boiler, 35 MMBTU/hr heat capacity		
7. Application is for:	For modification	on or change of owner:
New Construction Modification* Change of	f Owner*	it Number:
8. Type of Organization (check one):		
Individual Owner Partnership Corporation Utili	ty X Local Agency State	e Agency Federal Agency
Distances (feet and direction to closest):		
300 E Fenceline 6300 W Residence	e <u>6600</u> <u>SE</u> Busino	ess <u>1 5 8 0 0 S E</u> School
10. General Nature of Business:	11. Principal Product:	į.
Electrical generating facility	Electricity	
12. Facility Annual Throughput by Quarters (percent):	13. Facility Operating Ho	urs:
25 % 25 % 25 % 25 %	2 7	5 2 5 0 0
Jan-Mar Apr-Jun Jul-Sep Oct-Dec	Hrs/Day Days/Wk	Wks/Yr Total Hrs/Yr
14. Do you claim Confidentiality of Data (if yes, state nat	ure of data in attachment)?	Yes XNo
15. Signature of Responsible Official:	Official Title:	
J-B7267	City Manager	
Typed or Printed Name of Responsible Official:	Phone Number:	Date Signed:
Jon B. Roberts	760-955-5000	4-13-07
	t Use Only -	
Application Number: Invoice Number: 18203	Permit Number:	Company/Facility Number:

### MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT EXTERNAL COMBUSTION APPLICATION, continued

Page 2 of 2: please type or print

16. INFORMATION ON EQUIPMENT:		
X Boiler ☐ Dryer ☐ Furnace ☐ Heater ☐ Kiln ☐	Oven Other, specify:	
Manufacturer: T B D		
Model No.: TBD Serial No.:	T B D	
Maximum heat input rating (use Higher Heating Value):	3 5	_MMBtu/hr or kW
Burner Manufacturer:T B D	Burner Model No.: T B D	)
Number of burners: TBD Burner max heat	input rating: TBD	MMBtu/hr or kW
Percent excess air (or n/a): TBD Operatin	ng temps (C or F): TBD Av.	TBDMax
Specify Primary Fuel (*attach fuel analysis for these fuel	ls specifying HHV and sulfur content	:):
X Natural Gas LPG (Propane) CARB Diesel	Coal* Petroleum Coke*	
☐ Digester Gas* ☐ Landfill Gas* ☐ Refinery Gas*	Other,* specify:	
Max hourly primary fuel usage: 5 0 0 hrs/yr	Fuel units (ft <sup>3</sup> , gal, etc.): f t	3
If secondary fuel is proposed, specify: NA	Max hourly usage:	
Feedstock type and max process rate (specify units):	· 	
Unit Lat/Long or UTM Coordinates: NAD27 Zone 11	, 466142.21 E 3832087.48 N	
Max annual hours: 5 0 0 Exhaust Stack H	eight (feet): 3 0 Inside Diameter	(inches): 2 1
17. EMISSION CONTROLS: Check all that apply:		
X Low NOx Burner Oxygen Trim X Flue or Exha	ust Gas Recirculation (FGR or EGR	)
Oxidation Catalyst Selective Catalytic Reduction	(SCR) Selective Non-Catalytic F	Reduction (SNCR)
Afterburner ESP Baghouse Other	- Please specify:	
18. MAX EMISSION RATES (CONTROLLED):	Concentration	Mass
Pollutant	ppmvd or gr/dscf	pounds/hour
Oxides of Nitrogen (NOx)	9	0.385
Oxides of Sulfur (SOx)	0.6	0.021
Carbon Monoxide (CO)	100	2.59
Total Particulates (TSP or PM30)	7 6	0.260
Coarse Respirable Particulates (PM10)	<u>7.6</u>	0.260
Fine Respirable Particulates (PM2.5)  Total Organics (TOG)		
Volatile Organic Compounds (VOC, ROG or NMOG)	5.5	0.188
19. DRYERS ONLY Check one:		
	pray Other, specify:	
20. FURNACE ONLY Check one:		
Annealing Burnoff Calcining Crucible	Cupola Diffusion Electric	∏Forge ∏Pot
Holding Heat Treating Melting Reverbato		de Growth
21. OVEN ONLY Check one:		
Bakery Baking Curing Drying Fluidized	d Bed Stripping Solder Re	flow
	ring Method: Direct Indire	ect

14306 Park Avenue, Victorville, CA 92392-2310 33 8: 02 (760) 245-1661 Facsimile: (760) 245-2022

www.mdaqmd.ca.gov *Eldon Heaston* Executive Director

### APPLICATION FOR EXTERNAL COMBUSTION ENGINE (BOILER, ETC.) ONLY

Page 1 of 2: please type or print REMIT \$	\$212.00 WITH THIS DOCUMENT (\$121.00 FOR CHANGE OF OWNER)
Permit To Be Issued To (company name to receive permit): City of Victorville	1a. Federal Tax ID No.: 9 5
2. Mailing/Billing Address (for above company name): 14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001	
Facility or Business License Name (for equipment location)     Victorville 2 Hybrid Power Project	:
4. Facility Address - Location of Equipment (if same as for cor Helendale Road, Victorville, CA 92393 [Note: Street to be rena	
5. Contact Name/Title: Jon B. Roberts, City Manager	Email Address: Phone/Fax Nos.: iroberts@ci.victorville.ca. 760-955-5000/760-245-7243 us
<ol> <li>Application is hereby made for Authority To Construct (ATC Heat transfer fluid heater, 40 MMBTU/hr heat capacity</li> </ol>	) and Permit To Operate (PTO) the following equipment:
7. Application is for:  X New Construction	For modification or change of owner:  f Owner*
8. Type of Organization (check one):  Individual Owner Partnership Corporation Utili	ty X Local Agency State Agency Federal Agency
Distances (feet and direction to closest):      4 8 0 SE Fenceline 6 3 W Residence	e <u>7000 SE</u> Business <u>16100 SE</u> School
10. General Nature of Business:  Electrical generating facility	11. Principal Product: Electricity
12. Facility Annual Throughput by Quarters (percent):	13. Facility Operating Hours:
<u>3 0 % 2 0 % 2 0 % 3 0 %</u> Jan-Mar Apr-Jun Jul-Sep Oct-Dec	4         7         5 2         1 0 0 0           Hrs/Day         Days/Wk         Wks/Yr         Total Hrs/Yr
14. Do you claim Confidentiality of Data (if yes, state nat	ure of data in attachment)?
15. Signature of Responsible Official:	Official Title: City Manager
Typed or Printed Name of Responsible Official:  Jon B. Roberts	Phone Number: Date Signed: 4-/3-07
	ot Use Only -
Application Number: Invoice Number:	Permit Number: Company/Facility Number:

### MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT EXTERNAL COMBUSTION APPLICATION, continued

Page 2 of 2: please type or print

16. INFORMATION ON EQUIPMENT:		
Boiler □ Dryer □ Furnace ☒ Heater □ Kiln □ Over	Other, specify:	
Manufacturer: T B D		
Model No.: TBD Serial No.: TB	B D	
Maximum heat input rating (use Higher Heating Value):	4 0	_MMBtu/hr or kW
Burner Manufacturer: TBD	Burner Model No.: TB	<u> </u>
Number of burners: TBD Burner max heat input		
Percent excess air (or n/a): TBD Operating ten	nps (C or F): TBD Av.	TBD Max
Specify Primary Fuel (*attach fuel analysis for these fuels spe	ecifying HHV and sulfur conte	nt):
X Natural Gas ☐ LPG (Propane) ☐ CARB Diesel ☐ (	Coai* Petroleum Coke*	
☐ Digester Gas* ☐ Landfill Gas* ☐ Refinery Gas* ☐ Ott	her,* specify:	
Max hourly primary fuel usage:TBDF	Fuel units (ft³, gal, etc.): <u>f</u>	3
If secondary fuel is proposed, specify: NA	Max hourly usage:	
Feedstock type and max process rate (specify units):		
Unit Lat/Long or UTM Coordinates:	34.72 E 3832196.84 N	
Max annual hours: 1 0 0 0 Exhaust Stack Height	(feet): 3 0 Inside Diameter	r (inches): 2 1
17. EMISSION CONTROLS: Check all that apply:		
X Low NOx Burner Oxygen Trim X Flue or Exhaust G	Sas Recirculation (FGR or EGI	₹)
Oxidation Catalyst Selective Catalytic Reduction (SCF	R) Selective Non-Catalytic	Reduction (SNCR)
Afterburner ESP Baghouse Other - Plea	ase specify:	
18. MAX EMISSION RATES (CONTROLLED):	Concentration	Mass
Pollutant	ppmvd or gr/dscf	pounds/hour
Oxides of Nitrogen (NOx)	9	0.440
Oxides of Sulfur (SOx)	<u>0 .</u> 6	0.023
Carbon Monoxide (CO)	100	2.96
Total Particulates (TSP or PM30)		
Coarse Respirable Particulates (PM10)	<u> </u>	<u>0.297</u>
Fine Respirable Particulates (PM2.5)		
Total Organics (TOG)		0 245
Volatile Organic Compounds (VOC, ROG or NMOG)	<u> 5 . 5                                 </u>	0.215
19. DRYERS ONLY Check one:	_	
Centrifugal Chip Fluidized Bed Rotary Spray	Other, specify:	
20. FURNACE ONLY Check one:		
Annealing Burnoff Calcining Crucible Cupo	ola Diffusion Electric	Forge Pot
Annealing Burnoff Calcining Crucible Cupo		Forge Pot
Annealing Burnoff Calcining Crucible Cupo Holding Heat Treating Melting Reverbatory 21. OVEN ONLY Check one:	Rotary Sweating Ox	cide Growth
Annealing Burnoff Calcining Crucible Cupon Holding Heat Treating Melting Reverbatory  21. OVEN ONLY Check one:  Bakery Baking Curing Drying Fluidized Bed	Rotary Sweating Ox	cide Growth

www.mdaqmd.ca.gov Eldon Heaston Executive Director

### APPLICATION FOR INTERNAL COMBUSTION ENGINE (I.C.E.) ONLY

Page 1 of 2: please type or print REMIT \$	212.00 WITH THIS DOCUMENT	T (\$121.00 FOR CHANGE OF OWNER)
Permit To Be Issued To (company name to receive permit):  City of Victorville	1a. Federal Tax ID No.: 9 5 2 2 3 5 9 1 8	
2. Mailing/Billing Address (for above company name): 14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-5001		<u> </u>
3. Facility or Business License Name (for equipment location): Victorville 2 Hybrid Power Project		
4. Facility Address - Location of Equipment (if same as for con Helendale Road, Victorville, CA 92393 [Note: Street to be rena		Facility UTM or Lat/Long: NAD27 11 466122 E 3832139 N
5. Contact Name/Title: Jon B. Roberts, City Manager	1	Phone/Fax Nos.: 760-955-5000/760-245-7243
<ol><li>Application is hereby made for Authority To Construct (ATC Emergency Generator with Diesel Fuel-Fired Internal Combust</li></ol>	and Permit To Operate (PT	O) the following equipment:
7. Application is for:  New Construction Modification* Change of		on or change of owner:
8. Type of Organization (check one):  Individual Owner Partnership Corporation Utilit	ty X Local Agency State	e Agency Federal Agency
Distances (feet and direction to closest):		ess <u>1 5 8 0 0 SE</u> School
General Nature of Business:  Electrical generating facility	11. Principal Product:	
12. Facility Annual Throughput by Quarters (percent):	13. Expected Operating I	_
2 5 % 2 5 % 2 5 % 2 5 % Oct-Dec	1 1 Days/Wk	5 2 5 0 Wks/Yr Total Hrs/Yr
14. Do you claim Confidentiality of Data (if yes, state nate	ure of data in attachment)?	? Yes XNo
15. Signature of Responsible Official:	Official Title:	
Typed or Printed Name of Responsible Official:	City Manager Phone Number:	Date Signed:
Jon B. Roberts	760-955-5000	4-13-07
Application Number: Invoice Number: 19203	ct Use Only - Permit Number:	Company/Facility Number:

### MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT I.C.E. APPLICATION, continued

Page 2 of 2: please type or print

16. INFORMATION ON I.C.E.:
Manufacturer: TBD
Model No.: T B D Serial No.: T B D
Number of Cylinders: TBD Year of Manufacture: TBD
Rating:         2682         BHP         Speed:         T B D         RPM
I.C.E. is? X New Existing Date Installed (MM/YYYY): T B D
Prime Standby Emergency X Portable (Yes or No)?: No
CARB engine certification: Family:TBD Certification EO#:TBD
Is this engine included in a Demand Response plan?: Yes No X
Type of Fuel(s): Natural Gas 🔲 Digester Gas 🔲 Ethanol 🗌 Landfill Gas 🗌
Propane CARB Diesel X Methanol Other:
Max fuel usage per hour: <u>TBD</u> Fuel units (ft <sup>3</sup> , gal, etc.): <u>g a l</u>
Engine Lat/Long or UTM Coordinates: NAD27 Zone 11 466078.50 E 3832041.01 N
Exhaust Stack Height (feet): 3 0 Inside Diameter (inches): 2 1 Y/N: Vertical? Y Capped? N
Is this I.C.E. (select all that apply):
Direct Injected? TBD After Cooled? TBD
Turbo Charged? TBD Inter Cooled? TBD
Timing Retarded? TBD Other - Please specify: TBD
17. EMISSION RATES: Origin of Emission Rate data:
Pollutant at Max.Load Units Manufacturer or Source Test
Oxides of Sulfus (SOv)  Oxides of Sulfus (SOv)  Oxides of Sulfus (SOv)
Oxides of Sulfur (SOx)         0 . 0 0 5         g/hp-hr         X           Carbon Monoxide (CO)         2 . 6 1         g/hp-hr         X
Carbon Monoxide (CO) 2 . 6 1 g/hp-hr X  Particulates (PM10) 0 . 1 5 g/hp-hr X
Total Hydrocarbons (VOC) 0 . 2 4 g/hp-hr X
18. EMISSION CONTROL EQUIPMENT: Add on emission control equipment? Yes X No
If yes: Manufacturer: Model No.:
Serial No.: *CARB EO#:
Type: SCR: Particulate Trap*: Ammonia Injection: Water Injection:
Non-S CR: Exhaust Gas Recirc*: Oxidation Catalyst*:
Other - Please specify:
19. INFORMATION OF ITEM BEING POWERED: This I.C.E. is used to power:
Electrical Generator X Compressor Pump
Paint Spray Gun Conveyor or Drive Fire Pump
Other - Please specify:
Manufacturer: T B D
Model No.: TBD Serial No.: TBD
Type, Size or Rating: T B D

14306 Park Avenue, Victorville, CA 92392-2340 (1) 8: 02 (760) 245-1661 Facsimile: (760) 245-2022

www.mdaqmd.ca.gov Eldon Heaston Executive Director

### APPLICATION FOR INTERNAL COMBUSTION ENGINE (I.C.E.) ONLY

Page 1 of 2: please type or print REMIT	\$212.00 WITH THIS DOCUMENT (\$121.00 FOR CHANGE OF OWNER)
1. Permit To Be Issued To (company name to receive permit	t): 1a. Federal Tax ID No.:
City of Victorville	95 2235918
2. Mailing/Billing Address (for above company name):	
14343 Civic Drive, P. O. Box 5001, Victorville, CA 92393-500	11
3. Facility or Business License Name (for equipment location	n):
Victorville 2 Hybrid Power Project	
4. Facility Address - Location of Equipment (if same as for co	ompany, enter "Same"): Facility UTM or Lat/Long:
Helendale Road, Victorville, CA [Note: Street to be renamed	Perimeter Road] NAD27 11 466122 E 3832139 N
5. Contact Name/Title:	Email Address: Phone/Fax Nos.:
Jon B. Roberts, City Manager	jroberts@ci.victorville.ca. 760-955-5000/760-245-7243
	<u>us</u>
6. Application is hereby made for Authority To Construct (AT	
Diesel Fuel-Fired Internal Combustion Engine Operating Fire	Ритр 
7. Application is for:	For modification or change of owner:
X New Construction Modification* Change	of Owner*  *Current Permit Number:
8. Type of Organization (check one):	
☐ Individual Owner ☐ Partnership ☐ Corporation ☐ Uti	ility X Local Agency State Agency Federal Agency
Distances (feet and direction to closest):	
470 SE Fenceline 62 W Residence	ce 6900 SE Business 16100 SE School
10. General Nature of Business:	11. Principal Product:
Electrical generating facility	Electricity
12. Facility Annual Throughput by Quarters (percent):	13. Expected Operating Hours of IC Engine:
25 % 25 % 25 % 25 %	1 1 52 50
Jan-Mar Apr-Jun Jul-Sep Oct-Dec	Hrs/Day Days/Wk Wks/Yr Total Hrs/Yr
14. Do you claim Confidentiality of Data (if yes, state na	
15. Signature of Responsible Official:	Official Title:
- BMLT	Oit Manage
Typed or Printed Name of Responsible Official:	City Manager Phone Number: Date Signed:
	1 12 17
Jon B. Roberts	
Application Number: Invoice Number:	ict Use Only - Permit Number: Company/Facility Number:
0000 8966 18203	461 2948

I.C.E. APPLICATION, continued Page 2 of 2: please type or print

16. INFORMATION ON I.C.E.:	1
Manufacturer: TBD	
Model No.: <u>T B D</u> Serial No.: <u>T B D</u>	
Number of Cylinders: T B D Year of Manufacture: T B D	
Rating: <u>2 6 8 2</u> BHP Speed: <u>T B D</u> RPM	
I.C.E. is? X New Existing Date Installed (MM/YYYY): T B D	
Prime Standby Emergency X Portable (Yes or No)?: No	
CARB engine certification: Family: TBD Certification EO#: TBD	
Is this engine included in a Demand Response plan?: Yes No X	1
Type of Fuel(s): Natural Gas Digester Gas Ethanol Landfill Gas	
Propane CARB Diesel X Methanol Other:	
Max fuel usage per hour:TBD Fuel units (ft³, gal, etc.):g a l	
Engine Lat/Long or UTM Coordinates: NAD27 Zone 11 466112.98 E 3832164.05 N	
Exhaust Stack Height (feet): 3 0 Inside Diameter (inches): 6 Y/N: Vertical? Y Capped? N	
Is this I.C.E. (select all that apply):	
Direct Injected? TBD After Cooled? TBD	
Turbo Charged? TBD Inter Cooled? TBD	466112.980 3832164.050
Timing Retarded? TBD Other - Please specify: TBD	
17. EMISSION RATES: Origin of Emission Rate data:	
Pollutant at Max.Load Units Manufacturer or Source Test	
Oxides of Nitrogen (NOx) 2 . 8 3 g/hp-hr X	
Oxides of Sulfur (SOx) 0 . 0 0 5 g/hp-hr X	
Carbon Monoxide (CO) 2 . 6 1 g/hp-hr X	
Particulates (PM10)	
18. EMISSION CONTROL EQUIPMENT: Add on emission control equipment? Yes X No	
If yes: Manufacturer: Model No.:	
Serial No.: *CARB EO#:	
Type: SCR: Particulate Trap*: Ammonia Injection: Water Injection:	
Non-S CR: Exhaust Gas Recirc*: Oxidation Catalyst*:	
Other - Please specify:	
19. INFORMATION OF ITEM BEING POWERED: This I.C.E. is used to power:	
Electrical Generator Compressor Pump	
Paint Spray Gun Conveyor or Drive Fire Pump X	
Other - Please specify:	
Manufacturer: T B D	
Model No.:         T B D         Serial No.:         T B D	
Type, Size or Rating: T B D	