



South Coast Air Quality Management District

Form 400-A

Application Form for Permit or Plan Approval

List only one piece of equipment or process per form.

Mail To: SCAQMD P.O. Box 4944 Diamond Bar, CA 91765-0944 Tel: (909) 396-3385 www.aqmd.gov

Section A - Operator Information
1. Facility Name (Business Name of Operator to Appear on the Permit): Ameresco Chiquita Energy LLC
2. Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD): 140373
3. Owner's Business Name (If different from Business Name of Operator):

Section B - Equipment Location Address
4. Equipment Location Is: [X] Fixed Location [] Various Location
29201 Henry Mayo Dr
Street Address
Castaic, CA 91355
City Zip
Stephen Simmons, Mgr, Plant Operations
Contact Name Title
(831) 970-1026
Phone # Ext Fax #
E-Mail: ssimmons@ameresco.com

Section C - Permit Mailing Address
5. Permit and Correspondence Information:
[] Check here if same as equipment location address
111 Speen St, Suite 410
Address
Framingham, MA 01701
City State Zip
Sarah Simon, Env. Compliance Manager
Contact Name Title
(508) 661-2231
Phone # Ext Fax #
E-Mail: sasimon@ameresco.com

Section D - Application Type
6. The Facility Is: [] Not In RECLAIM or Title V [] In RECLAIM [X] In Title V [] In RECLAIM & Title V Programs
7. Reason for Submitting Application (Select only ONE):
7a. New Equipment or Process Application:
[] New Construction (Permit to Construct)
[] Equipment On-Site But Not Constructed or Operational
[] Equipment Operating Without A Permit *
[] Compliance Plan
[] Registration/Certification
[] Streamlined Standard Permit
7b. Facility Permits:
[X] Title V Application or Amendment (Also submit Form 500-A1)
[] RECLAIM Facility Permit Amendment
7c. Equipment or Process with an Existing/Previous Application or Permit:
[] Administrative Change
[] Alteration/Modification
[] Alteration/Modification without Prior Approval *
[] Change of Condition
[] Change of Condition without Prior Approval *
[] Change of Location
[] Change of Location without Prior Approval *
[] Equipment Operating with an Expired/Inactive Permit *

8a. Estimated Start Date of Construction (mm/dd/yyyy):
8b. Estimated End Date of Construction (mm/dd/yyyy):
8c. Estimated Start Date of Operation (mm/dd/yyyy):

9. Description of Equipment or Reason for Compliance Plan (list applicable rule): Title V Renewal Application
10. For identical equipment, how many additional applications are being submitted with this application? (Form 400-A required for each equipment / process)

11. Are you a Small Business as per AQMD's Rule 102 definition? (10 employees or less and total gross receipts are \$500,000 or less OR a not-for-profit training center) [X] No [] Yes
12. Has a Notice of Violation (NOV) or a Notice to Comply (NC) been issued for this equipment? If Yes, provide NOV/NC#: [X] No [] Yes

Section E - Facility Business Information
13. What type of business is being conducted at this equipment location? Resource Recovery Landfill Gas to Energy Facility
14. What is your business primary NAICS Code? (North American Industrial Classification System) 221119
15. Are there other facilities in the SCAQMD jurisdiction operated by the same operator? [X] No [] Yes
16. Are there any schools (K-12) within 1000 feet of the facility property line? [X] No [] Yes

Section F - Authorization/Signature I hereby certify that all information contained herein and information submitted with this application are true and correct.

17. Signature of Responsible Official: [Signature]
18. Title of Responsible Official: EVP
19. I wish to review the permit prior to issuance. (This may cause a delay in the application process.) [] No [X] Yes
20. Print Name: Joseph DeManche
21. Date: 12-12-2011
22. Do you claim confidentiality of data? (If Yes, see instructions.) [X] No [] Yes

23. Check List: [X] Authorized Signature/Date [X] Form 400-CEQA [X] Supplemental Form(s) (ie., Form 400-E-xx) [X] Fees Enclosed

AQMD USE ONLY
APPLICATION # 530377
APPROVAL # 198424
PAYMENT TRANS # 079753
DATE 1/12/12
APPROVAL DATE
CLASS III
BASIC CONTROL
EQUIPMENT CATEGORY CODE 555002
TEAM A
REASON/ACTION TAKEN



South Coast Air Quality Management District
Form 500-A1
Title V Permit Application Supplemental

Mail To:
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 Tel: (909) 396-3385
 www.aqmd.gov

Section I - Operator Information

1. Facility Name (Business Name of Operator That Appears On Permit): Ameresco Chiquita Energy LLC
 2. Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD): 140373

3. Facility Is Located In Title V Area:

- 1 All other zip codes not listed below
- 2

92201	92202	92203	92210	92211	92234	92235	92236	92239*	92240	92241	92247	92248
92253	92254	92255	92258	92260	92261	92262	92263	92264	92270	92274	92275	92276
92282	92292	92561										
- 3 92239*

* If your zip code is 92239, please call (909) 396-3385 to verify your Title V area.

Section II - Title V Application

1. This is an application for a(n) (Check all applicable boxes and provide the requested information as appropriate):

- a. Initial Title V Permit
- b. Permit Renewal: (Provide current permit expiration date) 6/14/2012
- c. Administrative Change (check all that apply)
 - Change of Operator. (Complete and attach equipment-specific Form 400-E-XX series forms)
 - Change of Facility Information
 - Other, Please specify: _____
- d. Title V Permit Revision
- e. Title V Exemption Plan
- f. MACT Part 1
- g. Permit Shield

Complete and attach equipment specific Form 400-E-XX series form(s) to this form if your application involves permit action for new construction, change of location, non-administrative permit revision, alternative operating scenario (AOS), permit shield, streamlined permit conditions, or temporary source permit.

2. Is this facility required to prepare a Risk Management Plan (RMP) for another agency? Yes No

Section III - Title V Submittal Checklist

1. Enter the quantity of each type form submitted in the space provided:

<u>1</u> 400-A (REQUIRED)	<u>1</u> 500-C1 (REQUIRED)	_____ 500-F1	_____ 500-H (REQUIRED)
<u>1</u> 400-CEQA (REQUIRED)	_____ 500-C2	_____ 500-F2	_____ 500-MACT PART 1
<u>1</u> 500-A2 (REQUIRED)	_____ 500-D	_____ 500-F3	_____ OTHER (SPECIFY): _____
<u>1</u> 500-B (REQUIRED)	_____ 500-E	_____ 500-F4	

2. Additional information referenced in this application submitted:



South Coast Air Quality Management District
Form 500-A2
Title V Application Certification

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Section I - Operator Information

1. Facility Name (Business Name of Operator That Appears On Permit): Ameresco Chiquita Energy LLC

2. Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD): 140373

3. This Certification is submitted with a (Check one):

a. Title V Application (Initial, Revision or Renewal)

b. Supplement/Correction to a Title V Application

c. MACT Part 1

4. Is Form 500-C2 included with this Certification? Yes No

Section II - Responsible Official Certification Statement

Read each statement carefully and check each that applies - You must check 3a or 3b.

1. For Initial, Permit Renewal, and Administrative Application Certifications:

a. The facility, including equipment that are exempt from written permit per Rule 219, is currently operating and will continue to operate in compliance with all applicable requirement(s) identified in Section II and Section III of Form 500-C1.

i. except for those requirements that do not specifically pertain to such devices or equipment and that have been identified as "Remove" on Section III of Form 500-C1.

ii. except for those devices or equipment that have been identified on the completed and attached Form 500-C2 that will not be operating in compliance with the specified applicable requirement(s).

b. The facility, including equipment that are exempt from written permit per Rule 219, will meet in a timely manner, all applicable requirements with future effective dates.

2. For Permit Revision Application Certifications:

a. The equipment or devices to which this permit revision applies, will in a timely manner comply with all applicable requirements identified in Section II and Section III of Form 500-C1.

3. For MACT Hammer Certifications:

a. The facility is subject to Section 112(j) of the Clean Air Act (Subpart B of 40 CFR part 63), also known as the MACT "hammer." The following information is submitted with a Title V application to comply with the Part 1 requirements of Section 112(j).

b. The facility is not subject to Section 112(j) of the Clean Air Act (Subpart B of 40 CFR part 63).

Section III - Authorization/Signature

I certify under penalty of law that I am the responsible official for this facility as defined in AQMD Regulation XXX and that based on information and belief formed after reasonable inquiry, the statement and information in this document and in all attached application forms and other materials are true, accurate, and complete.

1. Signature of Responsible Official: 	2. Title of Responsible Official: <u>EVP</u>
3. Print Name: <u>Joseph DeManche</u>	4. Date: <u>12-12-2011</u>
5. Phone #: <u>(508) 661-2266</u>	6. Fax #:

7. Address of Responsible Official:

111 Speen St, Suite 410 Framingham MA 01701

Street # City State Zip

Acid Rain Facilities Only: Please Complete Section IV

Acid Rain facilities must certify their compliance status of the devices subject to applicable requirements under Title IV by an individual who meets the definition of Designated (or Alternate) Representative in 40 CFR Part 72.

Section IV - Designated Representative Certification Statement

For Acid Rain Facilities Only. I am authorized to make this submission on behalf of the owners and operators of the affected source or affected units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

1. Signature of Designated Representative or Alternate:	2. Title of Designated Representative or Alternate:
3. Print Name of Designated Representative or Alternate:	4. Date:
5. Phone #:	6. Fax #:
7. Address of Designated Representative or Alternate:	
Street #	City
State	Zip



South Coast Air Quality Management District

Form 500-C1

Title V Compliance Status Report

To provide the compliance status of your facility with applicable federally enforceable requirements and identify other local-only requirements, complete this form and attach it to a completed compliance certification Form 500-A2. As appropriate, all submittals of Form 500-C2 as appropriate should also be attached to this form.

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Section I - Operator Information

1. Facility Name (Business Name of Operator That Appears On Permit):

Ameresco Chiquita Energy LLC

2. Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD):

140373

PROCEDURES FOR DETERMINING COMPLIANCE STATUS

1. **Equipment verification:** Review the list of pending applications, and either the preliminary Title V facility permit or the list of current permits to operate that the AQMD provided you, to determine if they completely and accurately describe all equipment operating at the facility. Attach a statement to describe any discrepancies.
2. **Identify applicable requirements*:** Use the checklist in Section II to identify all applicable and federally-enforceable local, state, and federal rules and regulations, test methods, and monitoring, recordkeeping and reporting (MRR) requirements that apply to any equipment or process (including equipment exempt from a permit by Rule 219) at your facility. The potential applicable requirements, test methods and MRR requirements are identified and listed adjacent to each given equipment/process description. Check off each box adjacent to the corresponding requirement as it applies to your particular equipment/process.
Note: Even if there is only one piece of equipment that is subject to a particular requirement, the appropriate box should be checked.
3. **Identify additional applicable requirements*:** Use Section III to identify any additional requirements not found in Section II. Section II is not a complete list of all applicable requirements. It does not include recently adopted NESHAP regulations by EPA or recent amendments to AQMD rules. Do not add rules listed in Section V here.
4. **Identify any requirements that do not apply to a specific piece of equipment or process:** Also use Section III to identify any requirements that are listed in Section II but that do not apply to a specific piece of equipment or process. Fill out Section III of this form and attach a separate sheet to explain the reason(s) why the identified rules do not apply. Note: Listing any requirement that does not apply to a specific piece of equipment will not provide the facility with a permit shield unless one is specifically requested by completing Form 500-D and is approved by AQMD.
5. **Identify SIP-approved rules that are not current AQMD rules:** Use Section IV to identify older versions of current AQMD rules that are the EPA-approved versions in the State Implementation Plan (SIP), and that are still applicable requirements as defined by EPA. The facility is not required to certify compliance with the items checked in Section IV provided that the non-SIP approved rule in Section II is at least as stringent as the older SIP-approved version in Section IV. **
6. **Identify Local-Only Enforceable Regulatory Requirements:** Use Section V to identify AQMD rules that are not SIP-approved and are not federally enforceable.
7. **Determine compliance:** Determine if all equipment and processes are complying with all requirements identified in Sections II and III. If each piece of equipment complies with all applicable requirements, complete and attach Form 500-A2 to certify the compliance status of the facility. If any piece of equipment is not in compliance with any of the applicable requirements, complete and attach Form 500-C2 in addition to Form 500-A2.

* The following AQMD rules and regulations are not required to be included in Section II and do not have to be added to Section III: Regulation I, List and Criteria in Regulation II, Rule 201, Rule 201.1, Rule 202, Rule 203, Rule 205, Rule 206, Rule 207, Rule 208, Rule 209, Rule 210, Rule 212, Rule 214, Rule 215, Rule 216, Rule 217, Rule 219, Rule 220, Rule 221, Regulation III, Regulation V, Regulation VIII, Regulation XII, Regulation XV, Regulation XVI, Regulation XIX, Regulation XXI, Regulation XXII, and Regulation XXX.

** Emission units adversely affected by the gap between current and SIP-approved versions of rules may initially be placed in a non-Title V portion of the permit

Section II - Applicable Requirements, Test Methods, & MRR Requirements

Equipment/Process	Applicable Requirement	Test Method	MRR Requirement
<input checked="" type="checkbox"/> All Air Pollution Control Equipment Using Combustion (RECLAIM & non-RECLAIM sources)	<input checked="" type="checkbox"/> Rule 480 (10/07/77)	N/A	N/A
<input checked="" type="checkbox"/> All Coating Operations (12/15/00)	<input checked="" type="checkbox"/> Rule 442	<input checked="" type="checkbox"/> Rule 442(f)	<input checked="" type="checkbox"/> Rule 442(g)
<input type="checkbox"/> All Combustion Equipment, ≥ 555 Mmbtu/Hr (except for NOx RECLAIM sources)	<input type="checkbox"/> Rule 474 (12/04/81)	<input type="checkbox"/> AQMD TM 7.1 or 100.1	
<input checked="" type="checkbox"/> All Combustion Equipment Except Internal Combustion Engines (RECLAIM & non-RECLAIM sources)	<input checked="" type="checkbox"/> Rule 407 (04/02/82) <input checked="" type="checkbox"/> Rule 409 (08/07/81)	<input checked="" type="checkbox"/> AQMD TM 100.1 or 10.1, 307-91 <input checked="" type="checkbox"/> AQMD TM 5.1, 5.2, or 5.3	
<input checked="" type="checkbox"/> All Combustion Equipment Using Gaseous Fuel (except SOx RECLAIM sources)	<input checked="" type="checkbox"/> Rule 431.1 (06/12/98)	<input checked="" type="checkbox"/> Rule 431.1(f)	<input checked="" type="checkbox"/> Rule 431.1(d) & (e)
<input type="checkbox"/> All Combustion Equipment Using Liquid Fuel (except SOx RECLAIM sources)	<input type="checkbox"/> Rule 431.2 (09/15/00)	<input type="checkbox"/> Rule 431.2(g)	<input type="checkbox"/> Rule 431.2(f)
<input type="checkbox"/> All Combustion Equipment Using Fossil Fuel (except SOx RECLAIM sources)	<input type="checkbox"/> Rule 431.3 (05/07/76)		
<input checked="" type="checkbox"/> All Equipment	<input checked="" type="checkbox"/> Rule 401 (11/09/01) <input checked="" type="checkbox"/> Rule 405 (02/07/86) <input checked="" type="checkbox"/> Rule 408 (05/07/76) <input checked="" type="checkbox"/> Rule 430 (07/12/96) <input checked="" type="checkbox"/> Rule 701 (06/13/97) <input checked="" type="checkbox"/> New Source Review, BACT <input checked="" type="checkbox"/> Rule 1703 (10/07/88) <input checked="" type="checkbox"/> 40 CFR68 - Accidental Release Prevention	<input checked="" type="checkbox"/> California Air Resources Board Visible Emission Evaluation <input checked="" type="checkbox"/> AQMD TM 5.1, 5.2, or 5.3 N/A See Applicable Subpart	<input checked="" type="checkbox"/> Rule 430(b) See Applicable Subpart
<input type="checkbox"/> All Equipment Processing Solid Materials	<input type="checkbox"/> Rule 403 (06/03/05)	<input type="checkbox"/> Rule 403(d)(3)	<input type="checkbox"/> Rule 403(f)
<input checked="" type="checkbox"/> All Equipment With Exhaust Stack (except cement kilns subject to Rule 1112.1)	<input checked="" type="checkbox"/> Rule 404 (02/07/86)	<input checked="" type="checkbox"/> AQMD TM 5.1, 5.2, or 5.3	
<input type="checkbox"/> All Facilities Using Solvents to Clean Various Items or Equipment	<input type="checkbox"/> Rule 109 (05/02/03) <input type="checkbox"/> Rule 1171 (05/01/09) <input type="checkbox"/> 40 CFR63 SUBPART T	<input type="checkbox"/> Rule 109(g) <input type="checkbox"/> Rule 1171(e) See Applicable Subpart	<input type="checkbox"/> Rule 109(c) <input type="checkbox"/> Rule 1171(c)(6) See Applicable Subpart
<input type="checkbox"/> All RECLAIM Equipment (NOx & SOx)	<input type="checkbox"/> Reg. XX - RECLAIM	<input type="checkbox"/> Rule 2011, App. A (05/06/05) <input type="checkbox"/> Rule 2012, App. A (05/06/05)	<input type="checkbox"/> Rule 2011, App. A (05/06/05) <input type="checkbox"/> Rule 2012, App. A (05/06/05)
<input type="checkbox"/> Abrasive Blasting	<input type="checkbox"/> Rule 1140 (08/02/85)	<input type="checkbox"/> Rule 1140(d) & (e), AQMD Visible Emission Method	

KEY ABBREVIATIONS:

Reg. = AQMD Regulation
Rule = AQMD Rule

App. = Appendix
AQMD TM = AQMD Test Method

CFR = Code of Federal Regulations
CCR = California Code of Regulations

