



SIP AIR PERMIT APPLICATION

EPD Use Only

Date Received: _____ Application No. _____

FORM 1.00: GENERAL INFORMATION

1. Facility Information

Facility Name: Packaging Corporation of America – Valdosta Mill
AIRS No. (if known): 04-13- 185 – 0001
Facility Location: Street: 5495 Lake Park-Clyattville Road
City: Clyattville Georgia Zip: 31601 County: Lowndes
Is this facility a "small business" as defined in the instructions? Yes: No:

2. Facility Coordinates

Latitude: 30° 41' 39" NORTH Longitude: 83° 18' 11" WEST
UTM Coordinates: 279,320 EAST 3,397,975 NORTH ZONE 17

3. Facility Owner

Name of Owner: Packaging Corporation of America
Owner Address Street: 1 North Field Court
City: Lake Forest State: IL Zip: 60045

4. Permitting Contact and Mailing Address

Contact Person: Kurt Parks Title: EHS Manager
Telephone No.: (229) 559-2257 Ext. _____ Fax No.: _____
Email Address: kparks@packagingcorp.com
Mailing Address: Same as: Facility Location: Owner Address: Other:
If Other: Street Address: _____
City: _____ State: _____ Zip: _____

5. Authorized Official

Name: Kirk Thomas Title: Facility Air Responsible Official
Address of Official Street: 5495 Lake Park-Clyattville Road
City: Clyattville State: GA Zip: 31601

This application is submitted in accordance with the provisions of the Georgia Rules for Air Quality Control and, to the best of my knowledge, is complete and correct.

Signature: Date: 12-6-18

6. Reason for Application: (Check all that apply)

- New Facility (to be constructed)
 Revision of Data Submitted in an Earlier Application
 Existing Facility (initial or modification application)
 Application No.: _____
 Permit to Construct
 Date of Original Submittal: _____
 Permit to Operate
 Change of Location
 Permit to Modify Existing Equipment:
 Affected Permit No.: 2631-185-0001-V-03-0

7. Permitting Exemption Activities (for permitted facilities only):

Have any exempt modifications based on emission level per Georgia Rule 391-3-1-.03(6)(i)(3) been performed at the facility that have not been previously incorporated in a permit?

- No
 Yes, please fill out the SIP Exemption Attachment (See Instructions for the attachment download)

8. Has assistance been provided to you for any part of this application?

- No
 Yes, SBAP
 Yes, a consultant has been employed or will be employed.

If yes, please provide the following information:

Name of Consulting Company: ALL4
 Name of Contact: Chuck Doyno
 Telephone No.: _____ Fax No.: _____
 Email Address: cdoyno@all4inc.com
 Mailing Address: Street: 300 Chastain Center Blvd.
 City: Kennesaw State: GA Zip: 30144

Describe the Consultant's Involvement:

ALL4 prepared the permit modification application including application forms, emissions calculations, and modeling.

9. Submitted Application Forms: Select only the necessary forms for the facility application that will be submitted.

No. of Forms	Form
1	2.00 Emission Unit List
0	2.01 Boilers and Fuel Burning Equipment
0	2.02 Storage Tank Physical Data
0	2.03 Printing Operations
0	2.04 Surface Coating Operations
0	2.05 Waste Incinerators (solid/liquid waste destruction)
1	2.06 Manufacturing and Operational Data
0	3.00 Air Pollution Control Devices (APCD)
0	3.01 Scrubbers
0	3.02 Baghouses & Other Filter Collectors
0	3.03 Electrostatic Precipitators
0	4.00 Emissions Data
0	5.00 Monitoring Information
0	6.00 Fugitive Emission Sources
0	7.00 Air Modeling Information

10. Construction or Modification Date

Estimated Start Date: March 2019

11. If confidential information is being submitted in this application, were the guidelines followed in the "Procedures for Requesting that Submitted Information be treated as Confidential"?

No Yes

12. New Facility Emissions Summary *Not Applicable*

Criteria Pollutant	New Facility	
	Potential (tpy)	Actual (tpy)
Carbon monoxide (CO)		
Nitrogen oxides (NOx)		
Particulate Matter (PM) (filterable only)		
PM <10 microns (PM10)		
PM <2.5 microns (PM2.5)		
Sulfur dioxide (SO ₂)		
Volatile Organic Compounds (VOC)		
Greenhouse Gases (GHGs) (in CO ₂ e)		
Total Hazardous Air Pollutants (HAPs)		
Individual HAPs Listed Below:		

13. Existing Facility Emissions Summary *See submitted application for emissions summary*

Criteria Pollutant	Current Facility		After Modification	
	Potential (tpy)	Actual (tpy)	Potential (tpy)	Actual (tpy)
Carbon monoxide (CO)				
Nitrogen oxides (NOx)				
Particulate Matter (PM) (filterable only)				
PM <10 microns (PM10)				
PM <2.5 microns (PM2.5)				
Sulfur dioxide (SO ₂)				
Volatile Organic Compounds (VOC)				
Greenhouse Gases (GHGs) (in CO ₂ e)				
Total Hazardous Air Pollutants (HAPs)				
Individual HAPs Listed Below:				

14. 4-Digit Facility Identification Code:

SIC Code: 2631 SIC Description: Paperboard Mills
 NAICS Code: 322130 NAICS Description: Paperboard Mills

15. Description of general production process and operation for which a permit is being requested. If necessary, attach additional sheets to give an adequate description. Include layout drawings, as necessary, to describe each process. References should be made to source codes used in the application.

See application narrative that was submitted on November 20, 2018 for complete description of the process operations and proposed project.

16. Additional information provided in attachments as listed below:

- Attachment A - _____
- Attachment B - _____
- Attachment C - _____
- Attachment D - _____
- Attachment E - _____
- Attachment F - _____

17. Additional Information: Unless previously submitted, include the following two items:

- Plot plan/map of facility location or date of previous submittal: 11/20/2018
- Flow Diagram or date of previous submittal: 11/20/2018

18. Other Environmental Permitting Needs:

Will this facility/modification trigger the need for environmental permits/approvals (other than air) such as Hazardous Waste Generation, Solid Waste Handling, Water withdrawal, water discharge, SWPPP, mining, landfill, etc.?

- No Yes, please list below:

19. List requested permit limits including synthetic minor (SM) limits.

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