ABD00066733

A

STATE OF MISSISSIPPI
DEPARTMENT OF NATURAL RESOURCES
BUREAU OF POLLUTION CONTROL
P.O. BOX 10385
JACKSON, MISSISSIPPI 39209

For Agency Use
FACILITY NUMBER

Date Received

Month Day Year

APPLICATION FOR PERMIT TO CONSTRUCT AND/OR
OPERATE AIR EMISSIONS EQUIPMENT - GENERAL FORM

APPLICATION FOR: X CONSTRUCTION _____ PERMIT RENEWAL - PLEASE CHECK APPROPRIATE BOX

1. Name, Address, Location, and Telephone Number
   A. Name Vista Polymers, A Division of Vista Chemical Company
   B. Mailing Address of Applicant
      1. Street Address or P.O. Box P. O. BOX 91
      2. City Aberdeen 3. State MS
      4. Zip Code 39730 5. Telephone No. (601) 369-8111
   C. Location of Facility
      1. Street Highway 25
      2. City Aberdeen 3. State MS
      4. Zip Code 39730 5. Telephone No. (601) 369-8111
   D. If the facility is located outside the City limits, please provide a sketch or description showing the approximate location and attach to this application.
2. SIC Code 2821
3. Number of Employees 248
4. Principal Product PVC- Polyvinyl Chloride
5. Principal Raw Materials VCM - Vinyl Chloride Monomer
6. Principal Process Polymerization
7. Maximum amount of principal product produced or raw material consumed per day 455 million pounds
8. (A) Check here if operation which generates air pollutant emissions occurs all year X, or specify the months the operation occurs: _____
   (B) Specify how many days per week the operation occurs: 7
   (C) Specify how many hours per day the operation occurs: 24
9. If this application is for existing facility permit renewal only, has the facility been modified in any way (including production rate, fuel, and/or raw material changes) during period covered by the Operating Permit _____ Yes _____ No or since 1972? _____ Yes _____ No
   If Yes, give year(s) in which modification(s) occurred. _____
10. ALL APPLICATIONS MUST BE SIGNED BY THE APPLICANT.

I certify that I am familiar with the information contained in the application and that to the best of my knowledge and belief such information is true, complete, and accurate, and that I am the owner or chief corporate officer, or his designated representative, responsible for complying with air pollution control laws and regulations.

Frank G. Jeanson — Printed Name of Person Signing

Environmental Coordinator — Title

3-3-89 — Date Application Signed

Frank G. Jeanson — Signature of Applicant

PLEASE COMPLETE FOLLOWING PAGES WHERE APPLICABLE

A

FOR ALL APPLICANTS, WHETHER NEW CONSTRUCTION, EXISTING FACILITY, OR RENEWAL

CONTROL EQUIPMENT COVERED UNDER THIS APPLICATION - PLEASE CHECK ALL APPLICABLE AND INDICATE NUMBER OF UNITS.

PARTICULATE EMISSIONS CONTROL EQUIPMENT

1. Cyclone(s) _____
2. Water Scrubber _____
3. Baghouse X-5
4. Electrostatic Precipitator _____
5. Venturi Scrubber _____
6. Cyclonic Baghouse _____
7. Cyclonic Scrubber _____
8. Other _____

GASEOUS EMISSIONS CONTROL EQUIPMENT

1. Water Scrubber _____
2. Activated Carbon Bed _____
3. Other _____

WASTE DISPOSAL SYSTEMS

1. Solid Waste Incinerator _____
2. Liquid Waste Incinerator _____
3. Wood or Other Waste Fuel Recovery Boiler _____
4. Gaseous Waste Flare _____
5. Liquid Waste Flare _____
6. Other _____

Pneumatic Conveying System _____

Other (please describe)

FOR ALL APPLICANTS

FUEL BURNING EQUIPMENT
(Except for Refuse Disposal)

This form has 3 pages; each is a continuation of the equipment information from the page before. Please fill in as completely as possible, listing all fuel burning equipment. Reasons should be given explaining any data not filled in.

PAGE 1

1. Fill in company name and address, plus year for which data is given (if existing facility) at top of page. Use data for most recent calendar year available.
2. Reference Number. Use an identifying number for each boiler, furnace, kiln, etc., and use the same reference number on each of the three pages to identify information for the same unit.
3. Manufacturer and Model Number. Nameplate data for boiler, furnace, kiln, etc. Waste gas flares and stationary internal combustion engines should also be included on this form.
4. Rated Capacity in Millions of BTU per hour.
5. Type of Burner Unit. Use Codes (1*) at bottom of form. If not listed put (11) and specify.
6. Usage. Type of fuel burning equipment. Use codes (2*) at bottom of form. If not listed put (5) and specify.
7. Heat Usage. Percent of heat used for process and percent for space heating.

Company Name	Address	FOR AGENCY USE
VISTA POLYMERS	P. O. BOX 91 Aberdeen, MS 39730	

FACILITY NUMBER	Information for Calendar Year	Date
1840 00014	19 89	

Reference Number	Process or Unit Operation Name	Rated Process Capacity Tons/Hour	Feed Input		Number of Emission Points To Air	Product Output*	
			Quantity Per Hour	Quantity Per Year		Quantity Per Hour	Quantity Per Year
002	PVC Drying Area	86.7	1.58×10^5	1.39×10^9	9(2)	51,940	4.55×10^8
NOTES:							
	1. This is the reference number used						
	on the last permit application for						
	this area (June 23, 1987).						
	2. Of these 9 emission points, five(5)						
	baghouses will be replaced.						

*Specify Units of Measure Used

(FOR AGENCY USE ONLY)

MANUFACTURING PROCESS OPERATIONS

Reference Number	Stack Data				Air Pollution Control Equipment			
	Height Feet	Inside Unit Dia. Feet	Exit Gas Velocity Feet/Sec.	Exit Gas Temperature °F	Manufacturer and Model Number	Type* (use Table 1)	Collection Efficiency	
							Design	Actual
002-3(1)	45	5.95ft^2	56	170	DCE, Inc. Model No. DLM 5-8-15	35	99.99%	
002-4(1)	45	5.95ft^2	56	170	DCE, Inc. Model No. DLM 5-8-15	35	99.99%	
002-5(1)	48.5	4.72ft^2	71	170	DCE, Inc. Model No. DLM 5-8-15	35	99.99%	
002-6(1)	48.5	4.72ft^2	71	170	DCE, Inc. Model No. DLM 5-8-15	35	99.99%	
002-7(1)	48.5	4.81ft^2	69	170	DCE, Inc. Model No. DLM 5-8-15	35	99.99%	
NOTES:								
1. This is the reference number used on the 1987 permit application.								
The above described baghouses will replace the existing baghouses								
which were described on the 1987 permit application.								

*For Wet Scrubbers Give Gallons per minute Water Flow and Water Pressure if known.

A

PAGE 3

(FOR AGENCY USE ONLY)

MANUFACTURING PROCESS OPERATIONS

11 12

Reference Number	Process Emissions*			Basis for Estimation	(Agency Comments Only)
	Particulates	Sulfur Oxides	Others (Specify by chemical composition)		
002	14.6 lb/hr 64 ton/yr	0	---------	See Attached Calculation.	

*Please Express Emissions as Tons per Year and Pounds per Hour and Identify Units Being Used.

4

ADDITIONAL INFORMATION

1. Two copies of construction site plot plan.
2. Two copies of detailed equipment drawings.
3. Two copies of a detailed explanation of the process and control equipment.
4. Two copies of a flow diagram of the of the process or operation showing control devices.

SIGNATURES: If for construction, the application must be submitted in duplicate and both copies should also be signed and stamped by an engineer registered in the State of Mississippi. If application is for Existing Facility or Renewal of Permit to Operate, registered engineer's signature not required. All signatures and stamps must be originals on all copies, not photocopies.

James L. White 5609
TYPED NAME & MISSISSIPPI REGISTRATION NUMBER

James L. White 3/3/89
SIGNATURE OF ENGINEER REGISTERED IN MISSISSIPPI

Seal of Engineer
Registered in Mississippi