

Title V Operating Permit
SEMI-ANNUAL MONITORING REPORT
(Due each September 30 and March 31)

Part 1M - Facility Information and Certification

This form, or the equivalent information, is required with all Semi-Annual Monitoring Report submittals.

Facility Name: _____

Facility Location (street address and city): _____

Facility Number (##-##-####): _____

TV Operating Permit Number: _____ **Issuance Date:** _____

Reporting Period Start Date: _____ **End Date:** _____

	Responsible Official	Permit Contact Person
Name		
Title		
Mailing Address		
Phone Number		

Responsible Official and Permit Contact changes must be made in SLEIS and EASYAir. For links and guidance please visit [eAir Services](#) webpage.

This form must be saved as a PDF file and submitted electronically to the DNR or mailed to the Air Quality Bureau (AQB) and Field Office or local program.

If submitting electronically, this form does not need a wet ink signature. Please visit [Air Quality Records and Reporting \(AQRR\)](#) to submit electronically.

If mailing, the Responsible Official must complete the Statement of Certification of Compliance below. Each copy mailed must include a wet ink signature. Please visit [DNR Staff and Offices](#) webpage for current Field Office and AQB mailing address information.

STATEMENT OF CERTIFICATION OF COMPLIANCE (As required by 567 IAC 24.107(4). The Responsible Official, as defined under 567 IAC 24.100, must sign each copy of this report)

"I certify under penalty of law that, based on information and belief formed after reasonable inquiry, the statements and information contained in this document accurately reflect the compliance status of this facility for this reporting period to date, and are true, accurate, and complete."

Signature of Responsible Official

Title of Responsible Official

Print Name of Responsible Official

Date Signed

Title V Operating Permit
SEMI-ANNUAL MONITORING REPORT
(Due each September 30 and March 31)

Part 2M - Deviation Verification

This form, or the equivalent information, is required with all Semi-Annual Monitoring Report submittals.

Facility Name: _____ **TV Operating Permit Number:** _____

Reporting Period Start Date: _____ **End Date:** _____

Question	Response (Yes or No)
Did your facility have <u>any</u> monitoring deviations from the Title V Operating Permit requirements* during this reporting period?	<input type="checkbox"/> No: Complete Part 1M and 2M. <input type="checkbox"/> Yes: Complete Parts 1M, 2M, 3M, and/or 4M

***Required monitoring may include:** Recordkeeping requirements, source (stack) testing, continuous emissions monitoring systems (CEMS), continuous opacity monitoring systems (COMS), observations for no visible emissions, Method 9 visual emissions (opacity) observations, and operation and maintenance (O&M) plans. See **DNR Instructions** for details on possible deviations from required monitoring

Title V Operating Permit
SEMI-ANNUAL MONITORING REPORT
(Due each September 30 and March 31)

Part 3M – Monitoring Deviation Report

This form, or the equivalent, must be completed if the monitoring deviation has not been reported to the Department in an Excess Emissions, NESHAP, NSPS, CEMs/COMs or other report. This form should also be used if the previously submitted report did not include all information requested on this form. See SAMR and ACC instruction for more information.

Facility Name: _____ **Operating Permit Number:** _____
Reporting Period Start Date: _____ **End Date:** _____

You may be able to use Part 4M to report some or all of your monitoring deviations. Please see DNR Instructions, and Part 4M, for details.

1. EP # (if appl.)	2. EU # (if appl.)	3. Pollutant (if appl.)	4. Monitoring Method*	5. Monitoring Deviation Description	6. Deviation Date	7. Deviation Duration	8. Suspected Cause of Deviation	9. Corrective Action Taken

Attach additional pages, as needed. (If more than one page is submitted, indicate Page _____ of _____)

***Monitoring Method Abbreviations:** Recordkeeping Requirements (RR), Source Testing (ST), Continuous Emissions Monitoring (CEMS), Continuous Opacity Monitoring (COMS), No Visible Emissions (NVE), Method 9 Opacity Observations (OP), and Operation & Maintenance Plans (OMP).

Title V Operating Permit
SEMI-ANNUAL MONITORING REPORT
(Due each September 30 and March 31)

Part 4M – Additional Monitoring Reports Summary

This form, or the equivalent, may be used instead of Part 3M to reference deviation reports previously submitted to the Department for this reporting period. Part 3M should be used if the previously submitted report did not include all information requested on Part 3M. See SAMR and ACC instruction for more information.

Facility Name: _____ **Operating Permit Number:** _____
Reporting Period Start Date: _____ **End Date:** _____

Please complete the table below to summarize reports submitted to the DNR Air Quality Bureau (or the Linn or Polk county air program office, if applicable) for this reporting period.

NOTE: The reports referenced below should include, at a minimum, the information required in **Part 3M** for each monitoring deviation. If the reports do **not** contain this information, report the deviation(s) on **Part 3M**.

Emission Unit Description	Emission Unit #	Reporting Requirement*	Date Report Submitted

Attach additional pages, as needed. (If more than one page is submitted, indicate Page _____ of _____)

*Other **monitoring deviation** reports submitted to AQB may include, but are not limited to, the following:

- CEMS and/or COMS reports;
- NSPS, NESHAP and/or MACT reports;
- PSD reporting requirements; or
- DNR Construction Permit reporting requirements