AIR QUALITY BUREAU
502 E 9th St
Des Moines IA 50319

Title V Operating Permit Application - Part 1

FORM 1.4: POTENTIAL TOXIC EMISSIONS - SIGNIFICANT ACTIVITIES

Form 1.4 Page _____ of _____

1. Company/Facility Name _____ 2. EIQ No. _____

HAZARDOUS AIR POLLUTANT (TOXICS) and ADDITIONAL REGULATED POLLUTANT POTENTIAL EMISSIONS Summary by pollutant name of total facility emissions of each Hazardous and additional Regulated Air Pollutant		
3. CAS No.	4. Pollutant Name	5. Potential Emissions (Tons/Year)
6. Totals this Page (Toxics only) in Tons/Year		
7. Facility Totals – Potential Emissions (Toxics Only) in Tons/Year **Place facility totals on First page of Form 1.4**		