



CITY OF PHILADELPHIA
 DEPARTMENT OF PUBLIC HEALTH
 PUBLIC HEALTH SERVICES
 AIR MANAGEMENT SERVICES

Air Management Services
 7801 Essington Avenue
 Philadelphia PA 19153-3240
 Phone: (215) 685-7572
 FAX: (215) 685-7593

INSTALLATION PERMIT APPLICATION FOR INTERNAL COMBUSTION ENGINES
(Prepare all information completely in print or type)

SECTION I: FACILITY AND CONTACT INFORMATION

Location of Source (Street Address)	Facility Name	Tax ID No.	
Owner	Mailing Address	Email:	Telephone
Contact Person	Mailing Address	Email:	Telephone

SECTION II: PROJECT INFORMATION

Is this a reconstruction, conversion, alteration, or replacement of an existing installation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where Unit is to be Installed <input type="checkbox"/> Roof <input type="checkbox"/> Outside <input type="checkbox"/> Inside ___Floor	Building Height (ft):	Completion Date:
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Type of internal combustion engine to be installed:
 Emergency generator Fire Pump Peak Shaving Generator Chiller Other _____

Description of apparatus to be installed (Attach plans and specifications) and other notes (i.e., if temporary, max duration in days):

SECTION III: UNIT, GENSET, OR FIRE PUMP SET INFORMATION

Unit/Genset/Fire Pump Set Manufacturer:	Unit/ Genset/ Fire Pump Set Power (Horsepower or kW):
Unit/Genset/ Fire Pump Set Model:	Unit/ Genset /Fire Pump Set Serial No:

SECTION IV: ENGINE INFORMATION

Engine Manufacturer:	Engine Power (Horsepower or kW):	Fuel Type (Diesel/No. 2 Fuel Oil/Natural Gas/Other):
Engine Model:	Manufactured Date of Engine:	Engine Serial No:
If natural gas powered <input type="checkbox"/> Four Stoke Lean Burn <input type="checkbox"/> Four Stoke Rich Burn <input type="checkbox"/> Two Stroke Lean Burn		Maximum hourly fuel consumption rate: Gallons SCF
Maximum hours of operation per year (hours) (default is 500 hours for emergency engines):	Frequency and duration of testing (minutes/month):	Nitrogen Oxides Emission factor grams/hp-hr lbs/MMBtu
If over 1000 hp (745.5 kW), maximum operating hours during May 1st through September 30th:		Heat Input (BTU/hr) for natural gas engines:

Please list any control devices that have been installed to control emissions from the engine:

Maximum operating hours during May 1st through September 30th (hours):	Heat Input (BTU/hr) for natural gas engines:
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SECTION V: STACK INFORMATION

Stack Height (ft):	Stack Diameter (in):	Exhaust Gas Flow Rate (scfm):
Minimum Distance to Property line (ft):	Minimum Distance to Nearest Occupied Property (ft):	Minimum Exhaust Temperature (°C):

Please attach any supporting data (manufacturer specifications, stack tests, control efficiencies, engine nameplate photo if available, etc.) or relevant information that you have for your unit.

I certify that I have the authority to submit this Permit Application on behalf of the applicant named herein and that the information provided in this application is true and correct to the best of my knowledge and information

Signature _____ Date _____ Address _____

Name & Title _____ Phone _____ Fax _____

Instructions

INSTALLATION PERMIT APPLICATION FOR INTERNAL COMBUSTION ENGINES

1. This permit is issued for the construction and temporary operation of the equipment listed in the application until Air Management Services performs a conformance test and issues the air pollution License or include the unit in an Operating Permit. This application can be used for an internal combustion engine with a Nitrogen Oxide (NO_x) emission of less than less than 6.6 tons per 12 month rolling period, 2.75 tons per ozone season, 1000 pounds per day, or 100 pounds per hour.
2. Complete the application form and submit along with the application fee payable to the "City of Philadelphia". The fee is \$645.
3. All information in the application is available to the public, if you wish to keep some information confidential, please place the stamped confidential information separately along with the requested letter. AMS will review the confidential request and advise you as appropriate.
4. Please note that for installation permits to be issued, all installations will need to be exempt from the risk assessment requirements of Air Management Regulation (AMR) VI or will need to pass risk per AMR VI. The risk assessment threshold limits for various HAPs are listed in the Technical Guidance Document. The facility may propose operation limits (such as taking a 100 hour limit per year for an engine).to be exempt from the risk assessment requirements More information about AMR VI, technical guidance document, and the Air Toxic Screening Worksheet can be found at:

Amendment to AMR VI

https://www.phila.gov/media/20240116100611/AMR_VI_CONTROL_OF_EMISSIONS_OF_TOXIC_AIR_CONTAMINANTS_2023amendments.pdf

Technical Guidance Document:

https://www.phila.gov/media/20240116100609/ExhibitA_to_AMR_VI_TechnicalGuidelines_Sept2023.pdf

Air Toxic Screening Worksheet:

https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.phila.gov%2Fmedia%2F20241213143616%2FExhibitC_to_AMR_VI_RiskScreeningWorkbook_Sept2023-3.xlsx&wdOrigin=BROWSELINK

The Air Toxic Screening Worksheet can be used for sources that have stacks or emission points at least 15 feet tall.

5. All submissions and correspondence should be directed to:
Source Registration
Air Management Services
7801 Essington Avenue
Philadelphia, PA 19153-3240.
Phone 215-685-7572
E-mail DPHAMS_Service_Requests@Phila.Gov

Applications may also be submitted online at www.citizenserve.com/philadelphia.

Directions of online submittal can be found at the following:

<https://www.phila.gov/media/20241209141627/ConstructionPermitAppInWebPortal-December-2024-Corrected-ZipCode.pdf>

6. Term

- Tax ID No.: This is the Federal Tax ID or Social security number. If the applicant has an Employer Identification number (EIN), this number must be used.