



Coal Combustion Residual Surface Impoundment Permitting Program

Application Form CCR 1: General Provisions

This form must be submitted for all construction and operating permit applications. Two sets of the applications must be submitted. Items which are self-explanatory are omitted in these instructions. Signatures on at least one (1) submittal must be original.

The owner or operator must place in the facility's operating record all permit applications submitted to the Agency and all permits issued under 35 Ill. Adm. Code 845 as required by 35 Ill. Adm. Code 845.800(d)(1).

DESCRIPTION OF CCR PERMIT APPLICATIONS FORMS

The application forms for Coal Combustion Residual (CCR) Surface Impoundment Permits include the following:

Form CCR 1 – General Provisions (included in this packet)

Form CCR 2 – Forms Based on Activity Type (Not included in this packet):

2CN New Construction

2CA Corrective Action Construction

2CC Closure Construction

2N Initial Operating Permit for a New CCR Surface Impoundment and Any Lateral Expansion of a CCR Surface Impoundment

2R Renewal Operating Permit

2E Initial Operating Permit for Existing or Inactive CCR Surface Impoundments that have not completed an Agency-approved closure before July 30, 2021

2OE Initial Operating Permit for Existing or Inactive CCR Surface Impoundments that have completed an Agency-approved closure before July 30, 2021

2OI Initial Operating Permit for Inactive Closed CCR Surface Impoundments

DETERMINING APPLICABILITY

| Applicants <u>not</u> required to Submit a Permit Application | |
|---|--|
| <p>1. Was the CCR generated at a facility that is <u>not</u> part of electric utility or independent power producer, such as manufacturing facilities, universities, and hospitals?</p> <p>If yes, STOP. Do not complete Form CCR 1. You do not need a CCR Surface Impoundment Permit under 35 Ill. Adm. Code 845.</p> | <p>2. Is the CCR placement at active or abandoned underground or surface coal mines?</p> <p>If yes, STOP. Do not complete Form CCR 1. You do not need a CCR Surface Impoundment Permit under 35 Ill. Adm. Code 845.</p> |
| <p>3. Was the CCR generated primarily from the combustion of fuels other than coal for the purpose of generating electricity?</p> <p>If No, proceed to question 4.</p> <p>If Yes, answer the following question below:</p> | <p>4. Are you a <u>landfill</u> that receives CCR?</p> <p>If yes, STOP. Do not complete Form CCR 1. You do not need a CCR Surface Impoundment Permit under 35 Ill. Adm. Code 845.</p> |
| <p>Did the fuel burned consist of less than 50% coal on a total heat input or mass input basis, whichever results in the greater mass feed rate of coal?</p> <p>If yes, STOP. Do not complete Form CCR 1. You do not need a CCR Surface Impoundment Permit under 35 Ill. Adm. Code 845.</p> | |

| Applicants Required to Submit a Permit Application | |
|---|---|
| <p>1. Are you an owner and/or operator of new and existing CCR surface impoundments, including any lateral expansions of CCR surface impoundments that dispose of or otherwise engage in solid waste management of CCR generated from the combustion of coal at electric utilities and independent power producers?</p> | <p>2. Are you an owner and/or operator of an inactive CCR surface impoundment at active and inactive electric utilities or independent power producers?</p> |
| <p>Yes → Complete Form CCR 1</p> | <p>Yes → Complete Form CCR 1</p> |

ACTIVITIES REQUIRING A CCR SURFACE IMPOUNDMENT PERMIT (35 Ill. Adm. Code Subpart B)

| | |
|---|---|
| <p>1. Are you building a new CCR surface impoundment, lateral expansion or a CCR surface impoundment, or retrofitting an existing CCR surface impoundment?</p> <p style="text-align: center;">Yes → Complete Forms CCR 1 and 2CN</p> | <p>2. Are you performing corrective action under Subpart F of the Rule?</p> <p style="text-align: center;">Yes → Complete Forms CCR 1 and 2CA</p> |
| <p>3. Are you closing a CCR surface impoundment under Subpart G of the Rule?</p> <p style="text-align: center;">Yes → Complete Forms CCR 1 and 2CC</p> | <p>4. Are you submitting an Initial Operating Permit for a new CCR surface impoundment and any lateral expansion of a CCR surface impoundment?</p> <p style="text-align: center;">Yes → Complete Forms CCR 1 and 2N</p> |
| <p>5. Are you renewing an Operating Permit?</p> <p style="text-align: center;">Yes → Complete Forms CCR 1 and 2R</p> | <p>6. Are you submitting an Initial Operating Permit for an existing or inactive CCR surface impoundment that <u>has not</u> completed an Agency-approved closure prior to July 30, 2021?</p> <p style="text-align: center;">Yes → Complete Forms CCR 1 and 2E</p> |
| <p>7. Are you submitting an Initial Operating Permit for existing or inactive CCR surface impoundment that <u>has</u> completed an Agency-approved closure prior to July 30, 2021, <u>and</u> where the impoundment <u>is not</u> an inactive closed CCR surface impoundment?</p> <p style="text-align: center;">Yes → Complete Forms CCR 1 and 2OE</p> | <p>8. Are you submitting an Initial Operating Permit for an inactive closed surface impoundment? An inactive closed surface impoundment is an inactive CCR surface impoundment that completed closure prior to October 19, 2015 with an Agency-approved closure plan.</p> <p style="text-align: center;">Yes → Complete Forms CCR 1 and 2OI</p> |

CONTENTS OF FORM CCR 1 PACKAGE

Form CCR 1 – General Instructions
 Form CCR 1 – Line-by-line Instructions
 Form CCR 1 - Application

FORM CCR 1 – GENERAL INSTRUCTIONS

Who Must Apply for a CCR Surface Impoundment Permit?

Owners and operators of new and existing CCR surface impoundments, including any lateral expansions of CCR surface impoundments that dispose of or otherwise engage in solid waste management of CCR generated from the combustion of coal at electric utilities and independent power producers.

What other forms must be completed?

Form CCR 1 collects general information only. You must also complete a more detailed application based upon your proposed activity as follows:

- If your facility is building a new CCR surface impoundment, lateral expansion of a CCR surface impoundment, or retrofit of an existing CCR surface impoundment; you must also complete Form CCR 2CN for each new CCR surface impoundment, lateral expansion of a CCR surface impoundment, or retrofit of an existing CCR surface impoundment.
- If your facility will be performing any corrective action under Subpart F of 35 Ill. Adm. Code 845, you must also complete Form CCR 2CA for each CCR surface impoundment undergoing corrective action.

- If your facility is closing a CCR surface impoundment under Subpart G of 35 Ill. Adm. Code 845, you must also complete Form CCR 2CC for each CCR surface impoundment you will be closing.
- If your facility is applying for an initial operating permit for a new CCR surface impoundment and any lateral expansion of a CCR surface impoundment, you must also complete Form CCR 2N for each new CCR surface impoundment and any lateral expansion of a CCR surface impoundment.
- If your facility is renewing an operating permit, you must also complete Form CCR 2R for each CCR surface impoundment subject to the renewal.
- If your facility comprises an existing or inactive CCR surface impoundment that has not completed an Agency-approved closure prior to July 30, 2021; you must also complete Form CCR 2E for each existing or inactive CCR surface impoundment that has not completed an Agency-approved closure prior to July 30, 2021.
- If your facility comprises existing or inactive CCR surface impoundment that has completed an Agency-approved closure prior to July 30, 2021, and where the impoundment is not an inactive closed CCR surface impoundment; you must also complete Form CCR 2OE for each existing or inactive surface impoundment that has completed an Agency-approved closure prior to July 30, 2021.
- If your facility comprises an inactive closed CCR surface impoundment, you must complete Form CCR 2OI for each inactive closed CCR surface impoundment. An inactive closed CCR surface impoundment is an inactive CCR surface impoundment that completed closure prior to October 19, 2015 with an Agency-approved closure plan.

Exhibit 1-1. Filing Dates for CCR Surface Impoundments Permit Applications

| Permit Application | When to File |
|---|--|
| CCR 2R – Renewal Operating Permit | At least 180 days before the expiration of the existing permit unless the Agency has granted a waiver. |
| CCR 2E – Initial Operating Permit for Existing or Inactive CCR Surface Impoundments that <u>have not</u> completed an Agency-approved closure prior to July 30, 2021. | Must be submitted by October 31, 2021. |
| CCR 2OE – Initial Operating Permit for Existing or Inactive CCR Surface Impoundments that <u>have</u> completed an Agency-approved closure prior to July 30, 2021, <u>and</u> where the impoundment <u>is not</u> an inactive closed CCR surface impoundment. | Must be submitted by October 31, 2021. |
| CCR 2OI – Initial Operating Permit for Inactive Closed CCR surface impoundments. | Must be submitted by October 31, 2021. |

FORM 1 – LINE-BY-LINE INSTRUCTIONS

Section 1: Facility, Operator, and Owner information

Item 1.1 Enter the facility's official or legal name. Do not use a colloquial name.

Item 1.2 Provide your Illinois EPA CCR Surface Impoundment permit number if you have an existing facility. If your facility is new (i.e., not yet constructed), write or type "New Facility." If your facility is existing, but you are filing an initial permit, write or type "Initial Permit."

Item 1.3 Give the name (first and last), title, work telephone number, and e-mail address of the person who is thoroughly familiar with the operation of the facility and with the facts reported in this application. The IEPA will contact the person listed if they have questions on the material submitted.

Item 1.4 Give the complete mailing address of the office to which the IEPA should send correspondence.

Item 1.5 Give the address or location of the facility identified under Item 3.1. If the facility lacks a street name or route number, give the most accurate, alternative geographic information (e.g., section number or quarter section number from county records or “at intersection of routes 425 and 22”). Also provide the county name, county code (if known), city or town, state, and zip code.

Item 1.6 Give the legal name of the person, firm, public organization, or other entity that operates the facility described in this application. This may or may not be the same as the facility’s name. The operator of the facility is the legal entity that controls the facility’s operation rather than the plant or site manager. Do not use a colloquial name.

Item 1.7 Give the name (first and last), title, work telephone number, and e-mail address of the person who is thoroughly familiar with the operation of the facility and with the facts reported in this application. The IEPA will contact the person listed if they have questions on the material submitted.

Item 1.8 Enter the address of the Owner/Operator.

Section 2: Legal Description

Item 2.1 Provide the legal description of the facility boundary.

Section 3: Publicly Accessible Internet Site Requirement

Item 3.1 Enter the web address.

Item 3.2 Select yes, to indicate that the website is titled, “Illinois CCR Rule Compliance Data and Information.”

Section 4: Impoundment identification

Item 4.1 List all the Impoundment Identification numbers for your facility and check the corresponding box to indicate that you have attached a written description for each impoundment.

Section 5: Checklist and Certification

Item 5.1 Review the checklist provided. In Column 1, mark the sections of Form CCR1 that you have completed and are submitting with your application. In Column 2, indicate for each section whether you are submitting attachments.

Item 5.2 Certification Statement: The IEPA provides for severe penalties for submitting false information in this application form. 415 ILCS 5/44(a) provides that, “Except as otherwise provided in this Section, it shall be a Class A misdemeanor to violate this Act or regulations thereunder, or any permit or term or condition thereof, or knowingly to submit any false information under this Act or regulations adopted thereunder, or under any permit or term or condition thereof. A court may, in addition to any other penalty herein imposed, order a person convicted of any violation of this Act to perform community service for not less than 100 hours and not more than 300 hours of community service is available in the jurisdiction. It shall be the duty of all State and local law-enforcement officers to enforce such Act and regulations, and all such officers shall have authority to issue citations for such violations.”

All permit applications must be signed by the owner, operator, or a duly authorized agent of the operator. 35 Ill. Adm. Code 845.210(b)(2)

An application submitted by a corporation must be signed by a principal executive officer of at least the level of vice president, or his or her duly authorized representative, if that representative is responsible for the overall operation of the facility described in the application form. In the case of a partnership or a sole proprietorship, the application must be signed by a general partner or the proprietor, respectively. In the case of a publicly owned facility, the application must be signed by either the principal executive officer, ranking elected official, or other duly authorized employee. 35 Ill. Adm. Code 845.210(b)(3)

This form must be typewritten or printed legibly. This form may be completed manually or online using Adobe Reader, a copy of it saved locally, printed, and signed before it is submitted to:

Illinois Environmental Protection Agency
Bureau of Land #33
Attn: Part 845 Coal Combustion Residual Rule Submittal
2520 West Iles Avenue
P.O. Box 19276
Springfield, IL 62794-9276



**Illinois Environmental Protection Agency
CCR Surface Impoundment Permit Application
Form CCR 1 – General Provisions**

Bureau of Land ID Number:

For IEPA Use Only

CCR Permit Log Number:

Facility Name:

SECTION 1: FACILITY, OPERATOR, AND OWNER INFORMATION (35 Ill. Adm. Code 845.210(b))

| | | | | |
|--|--|--|----------|--------------|
| Facility, Operator, and Owner Information | 1.1 | Facility Name | | |
| | | | | |
| | 1.2 | Illinois EPA CCR Permit Number (if applicable) | | |
| | | | | |
| | 1.3 | Facility Contact Information | | |
| | | Name (first and last) | Title | Phone Number |
| | | Email address | | |
| | | | | |
| | 1.4 | Facility Mailing Address | | |
| | | Street or P.O. Box | | |
| | | City or Town | State | Zip Code |
| | 1.5 | Facility Location | | |
| | Street, Route Number, or Other Specific Identifier | | | |
| | County Name | County Code (if known) | | |
| | City or Town | State | Zip Code | |
| 1.6 | Name of Owner/Operator | | | |
| | | | | |

| | | | | |
|---|--------------|---|----------|--------------|
| Facility, Operator, and Owner Info | 1.7 | Owner/Operator Contact Information | | |
| | | Name (first and last) | Title | Phone Number |
| | | Email Address | | |
| | 1.8 | Owner/Operator Mailing Address | | |
| | | Street or P.O. Box | | |
| | City or Town | State | Zip Code | |

SECTION 2: LEGAL DESCRIPTION (35 Ill. Adm. Code 845.210(c))

| | | |
|--------------------------|-----|---|
| Legal Description | 2.1 | Legal description of the facility boundary |
| | | |

SECTION 3: PUBLICLY ACCESSIBLE INTERNET SITE REQUIREMENTS (35 Ill. Adm. Code 845.810)

| | | | |
|--------------------------|-----|---|--------------------------|
| Internet Site | 3.1 | Web address(es) to publicly accessible internet site(s) (CCR website) | |
| | | | |
| | 3.2 | Is/are the website(s) titled "Illinois CCR Rule Compliance Data and Information" | |
| <input type="checkbox"/> | | Yes | <input type="checkbox"/> |

SECTION 4: IMPOUNDMENT IDENTIFICATION

| | | | |
|-----------------------------------|-----|---|------------------------------|
| Impoundment Identification | 4.1 | List all the impoundment identification numbers for your facility and check the corresponding box to indicate that you have attached a written description for each impoundment. | |
| | | <input type="checkbox"/> | Attached written description |
| | | <input type="checkbox"/> | Attached written description |
| | | <input type="checkbox"/> | Attached written description |
| | | <input type="checkbox"/> | Attached written description |
| | | <input type="checkbox"/> | Attached written description |
| | | <input type="checkbox"/> | Attached written description |

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| | | | Attached written description |
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SECTION 5: CHECKLIST AND CERTIFICATION STATEMENT

| | | | | |
|--|-----|---|--|-----------------|
| Checklist and Certification Statement | 5.1 | In Column 1 below, mark the sections of Form 1 that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing. | | |
| | | Column 1 | | Column 2 |
| | | Section 1: Facility, Operator, and Owner Information | | w/attachments |
| | | Section 2: Legal Description | | w/attachments |
| | | Section 3: Publicly Accessible Internet Site Requirement | | w/attachments |
| | | Section 4: Impoundment Identification | | w/attachments |
| | 5.2 | Certification Statement | | |
| | | I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. | | |
| | | Name (print or type first and last name) of Owner/Operator | | Official Title |
| | | Signature | | Date Signed |