

## General Order Application: Gaseous Fossil Fuel-Powered Emergency Generators

## I. INSTRUCTIONS

	This application applies statewide for facilities under the Department of Ecology's jurisdiction. Fill out the form completely in order to obtain coverage.				
	Fill out the application completely, sign it, and	d date it.			
	Enclose manufacturer's specification sheets fo	or each engine and generator.			
	The maximum annual hours of operation of the generator must be 500 hours per year or less for this general order to apply.				
	Enclose a check to the Department of Ecology for the application fee.				
	State Environmental Policy Act (SEPA) compliance:				
	□ \$500 application fee if SEPA review i SEPA determination (e.g. DNS, MDNS)	is complete – Include a copy of the final SEPA checklist and S, EIS) with your application.			
	fill out a SEPA checklist and submit it online at <a href="https://ecology.wa.gov/Regul">https://ecology.wa.gov/Regul</a>	is required – If SEPA review has not been conducted, please with your application. You can find a SEPA checklist ations-Permits/SEPA/Environmental-review/SEPA-			
	guidance.	Department of Ecology			
	Mail the complete application package to:	Cashiering Unit			
	For Fiscal Office Use Only: 001-NSR-216-0299-000404	P.O. Box 47611 Olympia, WA 98504-7611			
Cl	Check the box for the location of your proposal. For assistance, call the appropriate office listed below:				
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Check the box for the location of your proposal. For assistance, call the appropriate office listed below:				
	Chelan, Douglas, Kittitas, Klickitat, or Okanogan County Ecology Central Regional Office (509) 575-2490	CRO		
	Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Stevens, Walla Walla, or Whitman County Ecology Eastern Regional Office (509) 329-3400	ERO		
	San Juan County Ecology Northwest Regional Office (425) 649-7000	NWRO		
	For actions taken at Kraft and Sulfite Paper Mills and Aluminum Smelters only Ecology Industrial Section (360) 407-6900	IND		
	For actions taken on the US Department of Energy Hanford Reservation only Ecology Nuclear Waste Program (509) 372-7950	NWP		

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	II.	<b>COMPA</b>	NY	INFO	)RMA	ATION
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1. Company Name:			
2. Company Mailing Address (street, cit	ty, state, zip):		
3. Installation Location:	4	·. County:	
5. Company Contact Person, Title:	6. Company Phone Number:	7. Company FAX Number:	
8. Contact Person Phone:	9. E-Mail Address:		
II. LOCATION INFORMATION			
1. Proposed installation date (if known):			

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IV. ANNUAL OPERATING SCHEDU	LE				
1. Maintenance operation frequency:		2. Total maintenance operational hours per year: (total must be less than 30 hours/year)			
3. Will the power generated from the genera	ator be sold to t	he electric grid?	Yes 🗆 No		
4. Describe all intended uses of the generate	or:				
V. EQUIPMENT INFORMATION	aceta for the or	cine and the consuct			
(Attach Manufacturer's Specification Sh			or) 		
1. Manufacturer and model of the engine an	nd the generator	r:			
2. Year of manufacture:		3. Engine serial nu	3. Engine serial number:		
4. Maximum engine horsepower rating: (must be greater than 500 and less than 850 horsepower)		5. Generator electrical rating: (must be less than 635 kilowatts)			
6. Engine stack height from ground level:		7. Highest point of building from ground level:			
8. Does the engine meet EPA Tier Emission (include EPA Model Year Certificate of Co		☐ Yes ☐ No			
9. Engine manufacturer NOx guarantee:		10. Engine manufacturer carbon monoxide guarantee:			
VI. ENGINE FUEL DATA					
	Pr	imary Fuel	Secondary Fuel		
1. Type of fuel					
2. Maximum fuel consumption per hour					
3. Percent sulfur					
VII. SIGNATURE BLOCK					
I certify, based on information and belief formed after reas	sonable inquiry, the	statements and information in	this application are true, accurate, and complete.		
Printed name		Title			
Signature		Date			

To request ADA accommodation, call Ecology at (360) 407-6800, 711 (relay service), or (877) 833-6341 (TTY).

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