

**Schedule D – DRY FERTILIZER STORAGE, HANDLING AND BLENDING**

Facility Name \_\_\_\_\_

Project Location \_\_\_\_\_  
City Street Address County

Documents and information required by this schedule are to verify that dry fertilizer storage, handling, and blending operations conform with the requirements of Sections 255.140 and 255.150. Narrative, drawings, or schematic flow diagrams may be used to describe the facility storage methods and operational processes and to illustrate your plans for containment and recovery of spillage and to minimize emissions.

1. PLOT PLAN: On the facility plot plan (Schedule A) or a separate drawing, show the storage building, blending area, unloading and loading locations, and the distance and location of nearest residence and commercial building.
2. PROCESS FLOW DIAGRAM: Provide a schematic flow diagram of all processes including: Truck/Rail Unloading, Storage, Weighing, Blending, Impregnation, Applicator/Truck Loading, and all associated conveyor and front-end loader transfer operations. Identify each function or process, show flow rates and type of conveyors, blender and other equipment. Show by graphics or notations the processes that are enclosed or under roof.
3. STORAGE FACILITIES: Describe storage buildings and, if necessary, provisions to prevent ground or surface water pollution.
4. CONTAINMENT AND RECOVERY OF SPILLAGE: Describe the containment or collection of spillage and the clean-up practices or recovery methods planned for all exposed outdoor operational processes. These may include unloading, loading, conveying, front-end loader handling, weighing, and blending. Describe the provisions for the diversion of surface water flow around the operations.
5. Describe or provide drawings of operational containment and recovery systems for pesticide impregnation operations including provisions for blender/equipment wash water collection.
6. PARTICULATE EMISSION CONTROL: Describe methods, equipment or techniques used to minimize particulate matter/dust emissions.
7. BLENDING OPERATIONS, HERBICIDE IMPREGNATION, and COMPLIANCE TIME SCHEDULE: Provide information requested in summary.
8. IEPA – APC PERMIT: For facilities holding a current Division of Air Pollution Control Permit for blending operations, provide the following:

Permit No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

**Schedule D SUMMARY**

Facility Name \_\_\_\_\_

1. Dry fertilizer facilities, distance and location of nearest residence(s) and/or commercial building(s) shown on:

(check) \_\_\_\_\_ Plot Plan \_\_\_\_\_ Separate Drawing

2. PROCESS FLOW DIAGRAM is attached: ( ) Yes ( ) No

On each process below, place an "E" to designate enclosed, "R" to designate under-roof only, or an "O" for any exposed outdoor operation:

\_\_\_\_\_ Unloading    \_\_\_\_\_ Storage    \_\_\_\_\_ Front End Loader Handling  
\_\_\_\_\_ Weighing    \_\_\_\_\_ Blending    \_\_\_\_\_ Loading    \_\_\_\_\_ Conveyor

Type and Model of Blender ..... \_\_\_\_\_

Average Blending & Loading Time ..... \_\_\_\_\_ Min./Batch  
Typical Batch size ..... \_\_\_\_\_ Tons  
Annual Blender Through-Put ..... \_\_\_\_\_ Tons  
Annual Blender Operating Time (total) ..... \_\_\_\_\_ Hours  
Blending Rate (for actual operating time) ..... \_\_\_\_\_ Tons/Hour  
Typical Unloading Rate (receiving) ..... \_\_\_\_\_ Tons/Hour

3. STORAGE FACILITIES: Describe (if additional space is needed, attach a separate sheet) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. CONTAINMENT AND RECOVERY OF SPILLAGE: Describe for each process exposed outdoors and note drawing number(s): (if additional space is needed, attach a separate sheet) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. PARTICULATE EMISSION CONTROL: Describe for each process exposed outdoors:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. BLENDING OPERATIONS, HERBICIDE IMPREGNATION, and COMPLIANCE TIME SCHEDULE.

Herbicide Impregnation process in blender? ( ) No ( ) Yes, then provide:

| Herbicides Used | Annual Amounts |
|-----------------|----------------|
| _____           | _____          |
| _____           | _____          |
| _____           | _____          |
| _____           | _____          |
| _____           | _____          |

Odor Emission Control Methods: (If additional space is needed, attach a separate sheet) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Compliance Time Schedule: Estimated date that dry facilities will be in full compliance: (\_\_\_\_/\_\_\_\_/\_\_\_\_)