

Supplement to Air Pollutant Emission Notice (APEN) For Incinerators

Permit Number _____ **AIRS Number** _____

Company Name: _____
 Incinerator Location: _____ County: _____
 Person to Contact: _____ Phone Number: _____
 Contact Title: _____ Fax Number: _____
 E-mail Address: _____

 Signature of Responsible Official (not a vendor or consultant) Date

 Name of Responsible Official (Please Print) Title

Stack Height: _____ Feet (Above Grade) Stack Diameter: _____ Feet
 Stack Temperature: _____ ° F Stack Moisture Content: _____ %
 Stack Flow Rate: _____ ACFM Stack Velocity: _____ Feet per minute

Equipment Information

Make Model Serial No. Class

Where is the incinerator installed? _____ (Indoors / Outdoors)

Is there a Spark Arrester: Yes / No

Check the applicable charging methods:

- Side Manual
- Top Automatic

Type of Draft: Natural Induced Forced
 Type of Damper: Barometric Mechanical

Primary Combustion Chamber

Volume _____ Ft³
 Grate Area _____ Ft²
 Hearth Area _____ Ft²
 Heat Release _____ BTU/Sq Ft-Hour
 Burner Capacity _____ BTU/Hour
 Number of Burners _____
 Type of Fuel _____

Secondary Combustion Chamber

Volume _____ Ft³
 Flame Port Area _____ Ft²
 Cross Sectional Area _____ Ft²
 Horizontal Distance Traveled _____ Ft
 Burner Capacity _____ BTU/Hour
 Number of Burners _____
 Type of Fuel _____

Process Information

Give Description and Source of Waste:

Design Rate:	_____	Pounds per hour
Waste Heat Value	_____	BTU per pound
Excess Air:	_____	Percent
Residence Time:	_____	Hours
Air Applied Overfire:	_____	Percent
Requested Process Rate	_____	Tons per year

Give Any Additional Process Information

GIVE DETAILS OF CONTROL EQUIPMENT ON THE CONTROL EQUIPMENT SUPPLEMENT FORM

Attach assembly drawings, building layouts, draft control dimensions, manufacturer's brochures, descriptions of fans and motors showing clearly the equipment size, location and design features. Also attach emission test data/calculations with date and location.