



FORM 400-E-2c
GASEOUS EMISSION CONTROL FORM
FLARE

Mail Application To:
 SCAQMD
 P.O. Box 4944
 Diamond Bar, CA 91765
 Tel: (909) 396-3385
www.aqmd.gov

This form must be accompanied by a completed Application for a Permit to Construct/Operate -Form 400A, Form CEQA, Plot Plan and Stack Form

Permit to be issued to (Business name of operator to appear on permit):
Address where the equipment will be operated (for equipment which will be moved to various location in AQMD's jurisdiction, please list the initial location site):

SECTION A: EQUIPMENT DESCRIPTION

Equipment	Manufacturer:	Model No:	Make:	
Type	<input type="checkbox"/> Elevated <input type="checkbox"/> Ground Level <input type="checkbox"/> Pit	How Is Flare Assisted?	<input type="checkbox"/> Air Assisted <input type="checkbox"/> Steam Assisted <input type="checkbox"/> Non-Assisted	
Operation (See Rule 1118 for definition)	<input type="checkbox"/> Clean Service Flare <input type="checkbox"/> Emergency Service Flare <input type="checkbox"/> General Service Flare			
Dimension	Flare Height ft.	Flare Tip Inside Diameter ft.		
Design Criteria for Waste Gas Stream	Retention Time at Normal Operating Temperature: secs at °F	Velocity At Tip (Feet per Second)	Minimum	Maximum
	Combustion Chamber Volume: cubic feet			
	Design Waste Stream Flow: scfm	Flow Rate (scfm)		
For Steam Injection	Steam Pressure (psig)		Design Basis for Steam Injected (lb steam/lb hydrocarbons): Total Steam Flow rate (pounds/hour): Number of Jets:	
	Minimum	Maximum		
	Temperature: °F	Diameter of Jets: (inches)	Velocity (Feet per Second):	
For Water Injection	Water Pressure (psig)		Total Water Flow rate (gpm)	
	Minimum	Maximum	Minimum	Maximum
	Number of Water		Diameter of Water Jets: (inches)	
Auxiliary Fuel Data	Auxiliary Fuel Available? Yes No If yes, indicate			
	Number of Pilots:		Fuel Rate (scfm [70 °F & 14.7psia] per pilot):	
	Fuel Usage (Select One):	Maximum	Minimum	Average
	Cubic Feet/Hour OR Gallons/Hour			

SECTION B: WASTE GAS STREAM CHARACTERISTICS

Brief Description of Process	Describe equipment vented to this Flare. Also describe the type of ignition system and its method of operation. Provide an explanation of the control system for steam flow and rate and other operating variables. Please supply an assembly drawing, dimensioned to scale, to show clearly the operation of the flare system. Show interior dimensions and features of the equipment necessary to calculate its performance.				
Waste Gas Stream	Material	Flow rate scfm (70 F & 14.7 psia)			Btu Rating
		Minimum	Average	Maximum	
Instrumentation Data	Describe instrumentation data for measuring temperature, pressure drop and other operating parameters (attach description, if necessary).				
Operating Schedule	Normal:	hours/day	days/week	weeks/yr	
	Maximum:	hours/day	days/week	weeks/yr	

SECTION C: APPLICANT CERTIFICATION STATEMENT

I hereby certify that all information contained herein and information submitted with this application is true and correct.

SIGNATURE OF PREPARER:	TITLE OF PREPARER:	PREPARER'S TELEPHONE NUMBER:
		PREPARER'S E-MAIL ADDRESS:
CONTACT PERSON FOR INFORMATION ON THIS EQUIPMENT:	CONTACT PERSON'S TELEPHONE NUMBER:	DATE SIGNED:
E-MAIL ADDRESS:	FAX NUMBER:	

CONFIDENTIAL INFORMATION

Under the California Public Records Act, all information in your permit application will be considered a matter of public record and may be disclosed to a third party. If you wish to keep certain items as confidential, please complete the following steps:

- (a) Make a copy of any page containing confidential information blanked out. Label this page "public copy."
- (b) Label the original page "confidential." Circle all confidential items on the page.
- (c) Prepare a written justification for the confidentiality of each confidential item. Append this to the confidential copy.