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):

Fixed Location Vario

Various Locations

SECTION A: EQUIPMENT DESCRIPTION							
Equipment	Manufacturer:	Model:					
Туре	Catalytic Oxidizer Recuperativec Oxidizer Thermal (direct fired) Oxidizer Regenerative Thermal Oxidizer (RTO) – Number of Chambers: Is a Rotoconcentrator for VOC part of the design? Yes No						
	Media type for Regenerative Oxidizer Saddles Monolith	For Recuperative Oxidizer, type of heat exchanger Shell and Tube Plate					
Type of Burner	Other Gas Fired Btu Rating:	Other Electric KW Rating: Oil Fired Btu/Rating:					
	Make:	Model:					
	Blower scfm: Blower H.P.: Manufacturer's emission guarantee for burners for: NOx: ppm@ % O ₂ CO: ppm@ % O ₂						
Design Criteria	Retention time at normal operating tempera secs at °F	ature: Combustion Chamber Volume: Design Gas Flow: cubic feet (ft³) scfm					
Pre-Treatment	Is a pre-treatment device for particulate removal present?	If yes, indicate type: Cyclone Precooler Preheater Knock-Out Chamber Baghouse Other:					
Auxiliary Fuel Data	Auxiliary fuel available? Yes No	If yes, indicate type:					
	Fuel Usage: Cubic Feet (Ft³)/Hour OR Gallon	Maximum Minimum Average ns/Hour					
For Catalytic Oxidizer	Catalyst Manufacturer:						
	Low Temperatu Type of Catalyst: Commercial No	hila Matal					
	Other	no (ii yes, check the type(s))					
	Estimated Catalyst Life: y	years Halogen Heavy Metal Silicone Sulfur Compounds					
	Catalyst Cleaning Frequency: Method of Cleaning:	months Phosphorous Compound Particulate Matter					
Process Blower	Blower: HP Design Flow F	Rate: SCFM Draft: Forced Induced					

GASEOUS EMISSION CONTROL FORM AFTERBURNER/OXIDIZER

SECTION B: PROCESS STREAM CHARACTERISTICS								
Brief Description of Process	Please attach a process flow diagram and engineering drawing of the process and the control system configuration. In the space provided, indicate what equipment is vented to the control equipment.							
		Air Contami	nant		Concentration -ppmv	Destruction Efficiency %		
Emission Data								
	Describe instrumen necessary):	ntation data for measurin	ng temperatui	e, pressure dro	p and other operating para	neter (attach description, if		
Instrumentation Data								
Bake or Burnout Process	Is bakeout a feature	e of the process? Yo	es No					
				Maximum	Minimum Avera	nge		
	Operating Temperature °F							
	Exit Gas Temperature °F							
Operating Conditions	Pressure Inches -H₂O							
	Moisture Content -%							
	Gas Volume- SCFM							
	Gas Velocity in duct-ft/min							
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.								
		TITLE OF PREPARER			S TELEPHONE NUMBER:			
				PREPARER'S	S E-MAIL ADDRESS:			
CONTACT PERSON FOR	IIS EQUIPMENT:	CONTACT	PERSON'S		DATE SIGNED:			
			TELEPHO	NE NUMBER:				
E-MAIL ADDRESS:			FAX NUME	BER:				

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.