

BOILERS, STEAM GENERATORS, AND PROCESS HEATERS
SUPPLEMENTAL FORM

Section I - Facility/Owner Information

- 1.1. Business Name: _____
- 1.2. Contact Name: _____
Phone No.: _____ Fax No.: _____ E-mail: _____
Address: _____
- 1.3. Address of Boiler: _____
- 1.4. FRAQMD Permit No.: _____ (if unknown, leave blank)
- 1.5. Do you claim confidentiality of data? No Yes (attach explanation)

Section II - General Equipment Information (Complete all items to the best of your ability)

- 2.1. Type of Equipment:
 Boiler Steam Generator Process Heater Other (specify): _____
- 2.2. Equipment Manufacturer: _____
- 2.3. Equipment Model: _____ Serial Number: _____
- 2.4. Year of Manufacture: _____ Year of Installation: _____
- 2.5. Equipment Rating: _____ MMBtu/hr (input) OR _____ horsepower (hp)
- 2.6. Fuel Information:
 Diesel Natural Gas Propane/LPG Gasoline Digester Gas
 Landfill Gas Other Fuel: _____ If Dual Fuel: _____
- 2.7. Tracking Equipment: Hour Meter Dedicated Fuel Meter None
- 2.8. Burner Information:
- A. Primary Burner
Manufacturer: _____ Model: _____
Maximum Heat Input Rating _____ MMBtu/hr
Type: Standard Low NOx Ultra Low NOx
- B. Secondary Burner
Manufacturer: _____ Model: _____
Maximum Heat Input Rating _____ MMBtu/hr
Type: Standard Low NOx Ultra Low NOx

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Section II - General Equipment Information (Complete all items to the best of your ability)

2.9. Additional Emission Control Devices (Check all that apply) :

- Flue Gas Recirculation (FGR) Staged Air Combustion Staged Fuel Combustion
- Selective Non-catalytic Reduction (SNCR) Selective Catalytic Reduction (SCR)
- Other (specify): _____

Section III - Operation Information

3.1. Describe the General Use of the equipment:

3.2. Emission Data: (if unknown, leave blank)

Pollutants	Maximum Emissions before Control Device			Maximum Emissions after Control Device		
	gm / bhp	lb / hour	ppmv ⁽¹⁾	gm / bhp	lb / hour	ppmv ⁽¹⁾
NMHC	_____	_____	_____	_____	_____	_____
NOx	_____	_____	_____	_____	_____	_____
CO	_____	_____	_____	_____	_____	_____
PM10	_____	_____	_____	_____	_____	_____
SOx	_____	_____	_____	_____	_____	_____

NOTE ⁽¹⁾ - DRY, CORRECTED TO 3% O₂.

Source of Emission Data:

- Attached Manufacturer Emission Data Attached Source Test Results Attached AP-42 Data
- Attached Other (specify) _____

3.3. District Rule 3.21 Compliance Options: Please circle one of the following options if you are subject to Rule 3.21.

If the equipment is rated greater than or equal to 1 MMBtu/hr and less than 5 MMBtu/hr:

- A. Operate the equipment using less than 90,000 therms of annual heat input.
- B. Operate in a manner that maintains stack gas oxygen concentration at less than or equal to 3% by volume.
- C. Operate with a stack gas oxygen trim system set at 3% by volume oxygen.
- D. Tune the unit at least once a year by a qualified technician in accordance with District Rule 3.21.
- E. Operate in compliance with the emission limits specified in Rule 3.21-Table 1.

If the equipment is rated greater than or equal to 5 MMBtu/hr:

- F. Operate the equipment using less than 90,000 therms of annual heat input AND Circle one additional compliance option between Section 3.3B-3.3E.
- G. Operate in compliance with the emission limits specified in Rule 3.21-Table 1.

