

Air Quality Permit Application

Form 7.0: Control Equipment Information

FACILITY NAME: _____	DATE: _____
DWEE Facility ID: _____	Emission Point ID: _____

Section 7.2: Thermal Oxidizer

IMPORTANT: READ THE INSTRUCTIONS ACCOMPANYING THIS SECTION BEFORE COMPLETING.

Do **NOT** use pencil to fill out this application. Please type responses or print using black ink.

General Information

1) Control Equipment ID: _____	2) Installation Date: _____	<input type="checkbox"/> New Unit
3) Control Equipment Name/Description: _____		

4) Unit Information

List all the emission units that are controlled by the thermal oxidizer.
Attach the manufacturer specifications for each unit as part of Step 14.

Unit ID	Unit Type	Unit Name	Maximum Capacity (include units)	Installation Date	New Unit
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

If more than four units' emissions are controlled by this thermal oxidizer, attach additional pages so that all emission units are accounted for.

5) Thermal Oxidizer Information

Attach the manufacturer specifications for the thermal oxidizer as part of Step 14.

Manufacturer: _____	Model Name: _____	Model Number: _____
Regenerative: Yes <input type="checkbox"/> No <input type="checkbox"/>	Combustion Chamber Volume (units): _____	

6) Stack Information ☐ N/A

Height	Top Inside Diameter	Stack Discharge	Exit Velocity of Gas	Exit Temperature of Gas
ft	ft	<input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical <input type="checkbox"/> Vertical with Rain Cap	m/s	°K

Stack Testing Port(s) Present: Yes ☐ No ☐

Operational Information

7) Enter heat input and fuel information:

Maximum Rated Heat Input Capacity (MMBtu): _____	Maximum Hourly Potential Fuel Use (units): _____
Auxiliary Fuel Type: _____	Maximum Annual Potential Fuel Use: _____

8) Complete all temperature information:

Minimum Chamber Temperature: _____ °C <input type="checkbox"/> _____ °F <input type="checkbox"/>	Combustion Temperature: _____ °C <input type="checkbox"/> _____ °F <input type="checkbox"/>
Minimum Inlet Temperature: _____ °C <input type="checkbox"/> _____ °F <input type="checkbox"/>	Maximum Inlet Temperature: _____ °C <input type="checkbox"/> _____ °F <input type="checkbox"/>
Minimum Outlet Temperature: _____ °C <input type="checkbox"/> _____ °F <input type="checkbox"/>	Maximum Outlet Temperature: _____ °C <input type="checkbox"/> _____ °F <input type="checkbox"/>

9) Temperature Monitoring:

Continuous: Yes <input type="checkbox"/> No <input type="checkbox"/>	Other (describe): _____
Device: _____	Procedure(s): _____
Continuous: _____	_____

10) Minimum Pollutant Residence Time Within Thermal Oxidizer (second): _____

11) Describe Maintenance: _____

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Section 7.2: Thermal Oxidizer (continued)

12) Control Information	
Uncontrolled Emission Rate (lb/hr):	Controlled Emission Rate (lb/hr):
Pollutant:	Capture Efficiency (%):
Pollutant:	Capture Efficiency (%):
Pollutant:	Capture Efficiency (%):
Test or Manufacturer's Data Available: Yes <input type="checkbox"/> No <input type="checkbox"/>	Test or Manufacturer's Data Attached: Yes <input type="checkbox"/> No <input type="checkbox"/>
13) Attach Potential to Emit Calculations <input type="checkbox"/>	
14) Attach Manufacturer Specifications for Each Emission Unit Listed in #4, and the Thermal Oxidizer listed in #5	
15) Additional Information Attached? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Complete the following ONLY if completing this Section as Part of an Operating Permit Application

16) Actual Operating Information					
Provide the operating hours and fuel use of this thermal oxidizer for the past five years (past year if new unit):					
Year					
Hours Operated					
Annual Fuel Use (units)					
Average Hourly Fuel Use (units)					
17) Attach Actual Emission Calculations <input type="checkbox"/>					
18) Additional Information Attached? <input type="checkbox"/> YES <input type="checkbox"/> NO					