



## FORM 32: STAND-BY/BACKUP GENERATORS

Permit Holder Name \_\_\_\_\_

Contact \_\_\_\_\_

Use this form to report data for all Standby and Backup Generators at all facilities for which you report usage data. Retain a copy for your records. (The first line in the table is an example.) **Please refer to NOTES section at bottom of page for explanation of requested data for each column.**

**----- Include a copy of the operating log for calendar year 2020 as required by your Permit to Operate. -----**

Equipment Identification				Annual Fuel Consumption (Required)				Annual Hours Used (Required)			
APCD Permit No.	APCD Facility ID	Device Description <sup>(1)</sup> <small>(as described on your Permit to Operate)</small>	Equipment Rating (hp) <sup>(2)</sup>	Fuel Type <sup>(3,4)</sup>	Amount	Units <sup>(5)</sup>	Method <sup>(6)</sup>	Total Hours <sup>(7)</sup>	Non-emergency Hours <sup>(8)</sup>	Meter Reading <sup>(9)</sup>	Date of Meter Reading <sup>(10)</sup>
123-4	1234	Example: 99KW Cummins Model ABC789	170 hp	Diesel	20	Gal	E	5	4	18.7	Jan 10, 2021

- NOTES**
- (1) Refer to the equipment description on your permit.
  - (2) For internal combustion engines, specify horsepower (hp). Include units of measure.
  - (3) Examples: natural gas, propane gas, diesel fuel, fuel oil. If fuel oil is burned, specify grade (example: fuel oil No. 2).
  - (4) If a device burns more than one fuel, use a separate line for each fuel.
  - (5) Examples of acceptable units of measure (therms, mcf, mmcf, gal, mgal, bbl, or mbbbl). **Be sure that your units of measure are correct.**
  - (6) How annual fuel use was determined. Use the following codes: M = measured or metered, E = Estimated based on fuel purchases/deliveries, H = Estimated based on hours run, O = Other. If the method is Other (O), please briefly described.
  - (7) The total number of hours the device was run in 2020.
  - (8) The total number of non-emergency hours the device was run in 2020, including all hours used for testing, maintenance, and repairs.
  - (9) The end of year hour meter reading from the device.
  - (10) Date on which the reported meter reading was taken.