



INTERNAL COMBUSTION ENGINE PROCESS

Organization Name: _____

No. of units included in this application _____ (use a separate form for units which are not identical)

Manufacturer: _____ Model: _____ EPA Family Number: _____ Serial No.: _____

Location*: Latitude: _____ Longitude: _____ Hour meter reading: _____
*(A site plan, screenshot of Google Earth pin, or marked map are also acceptable if clear) (if pre-existing)

EQUIPMENT TYPE: (enclose a copy of the manufacturer's specification sheet)

- stationary, rich-burn*, lean-burn*, engine size: _____ hp @ _____ rpm
portable, dual-fire, diesel, generator mfg: _____ and rating: _____ kw
skid mount, 2-cycle, 4-cycle, year of mfg: _____ installed: _____ (if pre-existing)
other, turbine, reciprocating, fuel use rate: _____ gal/hr (liq) or _____ cfh (gas)
*<4% O2, in exhaust prior to control is "rich-burn" and 4% O2 or greater is "lean burn"

PROCESS OR CONTROL EQUIPMENT: (include any test results)

- non-selective catalyst, turbocharger, aftercooler, electronic fuel injection
air/fuel control, fuel injection, non-resettable run-hour
oxidative catalyst, particulate trap, oxidative particulate trap
other: _____ catalyst/trap mfg: _____ Model: _____
Reduction efficiency of air pollution control device(s): _____ % of _____ (give pollutant)

PRIMARY USE:

- backup generator - maint. operation: _____ min/day, _____ min/mo; testing: _____ hr/yr
pump, compressor, cogeneration, other: _____
prime use electrical generation (includes load shedding under an interruptible electric service contract)

TYPE OF FUEL:

HEAT CONTENT

SULFUR

ANNUAL FUEL USE

OPERATING HOURS

- natural gas, Btu/cf, n/a, therms, hr/yr
highway diesel, Btu/gal, wt%, mgal, hr/yr
propane, Btu/cf, n/a, mgal, hr/yr
gasoline, Btu/gal, n/a, mgal, hr/yr
other: Btu/, mgal, hr/yr

EXHAUST STACK:

full load exhaust flow: _____ acfm and temperature: _____ F°
standby generator maintenance: _____ % of full load, exhaust flow: _____ acfm, and temperature: _____ F°
stack diameter: _____ inches, stack height above ground: _____ feet
discharge direction: up, down, horizontal, other: _____

ESTIMATED EMISSIONS: (attach emissions calculations and cite reference)

Table with 8 columns: NOx, units*, CO, units*, VOC**, units*, PM-10, units*

* provide units in parts per million (ppm) at 15% O2 or grams per brake horsepower-hour (g/bhph) and pounds per hour (lb/hr)
**ppm VOC must be as methane

(APCD use only)

Application No. _____