

EMISSION CONTROL UNIT (FORM 1101-G1)

DISTRICT: Butte County Air Quality Management District	➤ DISTRICT USE ONLY ◀
	DISTRICT ID:
COMPANY NAME:	FACILITY NAME:

I. PERMIT NUMBER: _____

II. EQUIPMENT DESCRIPTION

1. General process description: _____
2. Equipment type: _____
3. Equipment description: _____
4. Equipment make, model & serial number: _____
5. Emission unit(s) served by this equipment: _____
6. Maximum design or rated capacity: _____

III. EQUIPMENT DESIGN INFORMATION

1. Exhaust gas: Temperature: _____ (F) Flow Rate: _____ (SCFM)
 Moisture: _____ (%) Oxygen: _____ (%)
 CO₂: _____ (%)
2. General: Manufacturer: _____ Pressure Drop: _____ (in-Hg)
 Inlet Temp.: _____ (F) Outlet Temp.: _____ (F)
3. Catalyst data: Catalyst Type/Material: _____
 Catalyst Life: _____ (years) Volume: _____ (Ft³)
 Space Velocity: _____ (Ft³/Ft) NH₃ inj. Rate: _____ (gal/hr)
 NH₃ Inj. Temp.: _____ (F)
4. Baghouse data: Design: [] Positive Pressure [] Negative Pressure
 Cleaning Method: _____
 Fabric Material: _____
 Flow Rate: _____ (SCFM) Air/Cloth Ratio: _____
5. ESP data: Number of fields: _____ Cleaning Method: _____
 Power Input: _____
6. Scrubber data: Type/design: _____ Sorbent Type: _____
7. Other Control Devices (include appropriate design information): _____

EMISSION CONTROL UNIT (FORM 1101-G2)

IV. OPERATIONAL INFORMATION

1. Operating schedule: _____(hours/day) _____(hours/year)
2. Raw products used by control device: _____
3. Operating information: _____

POLLUTANTS AND EMISSION CONTROL INFORMATION

POLLUTANT (name)	INLET CONCENTRATION (ppm or gr/DSCF ¹)	OUTLET CONCENTRATION (ppm or gr/DSCF ¹)	CONTROL EFFICIENCY (% weight)

¹ Specify percent O₂ or percent CO₂.