

**Major Source Operating Permit Application
Incineration**

Form 70-07

1	Facility Name			
2	Equipment Identification #:			
3	Incinerator Description			
4	Stack ID (or flow diagram identification)			
IF THIS INCINERATOR IS CONTROLLED FOR COMPLIANCE UTILIZING ADD-ON CONTROL EQUIPMENT, ATTACH AN APPROPRIATE AIR POLLUTION CONTROL SYSTEM FORM				
5	Type of incinerator (check one)	<input type="checkbox"/> Stepped Hearth	<input type="checkbox"/> Controlled Air	<input type="checkbox"/> Multiple Chamber
		<input type="checkbox"/> Single Chamber	<input type="checkbox"/> Rotary Kiln	<input type="checkbox"/> Fixed Hearth
		<input type="checkbox"/> Other-specify		
6	Year of construction or last modification			
7	DESCRIBE ALL MATERIALS TO BE BURNED IN THIS UNIT			
	Type of material to be burned	Weight percentage of total charge	Heating value	
8	Type of incinerator charging	A. <input type="checkbox"/> Batch feed		<input type="checkbox"/> Continuous feed
		B. Maximum charging rate in lbs/hr:		
		C. Waste charging method		
9	Type of Chamber: Combustion	Design temperature (°F)	Size (million BTU/hr)	Burner fuels
	Primary Chamber			
	Secondary Chamber			
10	Residence time of gas in the secondary chamber			
11	If this incinerator is equipped with a heat recovery system, what is the projected energy production rate? (i.e. pounds of steam per hour)			
12	Normal operating schedule			Hours/Day
				Days/Week
				Days/Year
13	IF THIS INCINERATOR'S EMISSIONS AND/OR OPERATIONS ARE MONITORED FOR COMPLIANCE, PLEASE ATTACH THE APPROPRIATE COMPLIANCE DEMONSTRATION FORM			
14	Location of this equipment in UTM coordinates:	North	East	
15	If this incinerator is regulated under RCRA, please provide the permit number (the waste materials burned in RCRA permitted incinerator(s) are not required to be listed in item 7 above).			
16	Page Number	Revision Number	Date of Revision	