

## Odor/Miscellaneous Equipment Application

**FORM E013**  
**07/2001**

1. Name of Company: \_\_\_\_\_  
*(As shown on Line 1 of Form E001)*
2. Name of Equipment: \_\_\_\_\_  
*(As shown on Line 9 of Form E001)*
3. Process Classification:     Odor                       Miscellaneous
4. Type of Operation: \_\_\_\_\_
5. Major Raw Materials: \_\_\_\_\_

6. Control Equipment Data:

A.     Emission Uncontrolled     Inertial Separator (File Form E105)  
 Baghouse (File Form E102)     Adsorption System (File Form E108)  
 Wet Collecting Device (File Form E103)                                       Flame or Catalytic Reduction (File Form E109)  
 Electrostatic Precipitator (File Form E104)                                       Masking Agent or Odor Counteragent (File Form E111)  
 Other (specify): \_\_\_\_\_

B. Control Equipment Efficiency:  
*Give control efficiency for each pollutant emitted by this equipment (from appropriate Form E102, E103, E104, E105, E107, or enter zeros if emissions are uncontrolled.*

Pollutant	% Efficiency
Particulate	
SO <sub>x</sub>	
NO <sub>x</sub>	
CO	
Hydrocarbons	

7. Emissions Data:

A. Process Emissions:

Pollutant	Emissions (lbs/hr)
Particulate	
SO <sub>x</sub>	
NO <sub>x</sub>	
CO	
Hydrocarbons*	

B. These emissions were determined by:     Stack Test (Submit report)  
 Calculated (File Form E106 for each pollutant)

C. Emissions may under normal operating conditions cause (check one or more):  
 Odors     Health Effects     Other nuisances outside of plant property  
 Property Damage     Eye Irritations     No Environmental Damage

D. Do the emissions from this equipment contain asbestos, mercury, or beryllium?     Yes                       No  
*\*Hydrocarbon emissions should include only true hydrocarbons such as ethane, propane, ethylene, etc. Other organic compounds should be listed separately.*

8. General Information:

A. Emission Point Data:

Stack height (emission point) above ground: \_\_\_\_\_ Ft

Ground elevation above sea level at stack base: \_\_\_\_\_ Ft

Stack diameter: \_\_\_\_\_ Ft

Volume of gas discharged into atmosphere: \_\_\_\_\_ CFM

Gas exit temperature: \_\_\_\_\_ °F

B. Average Equipment Operating Time:

Daily \_\_\_\_\_ Hours

Weekly \_\_\_\_\_ Days

Yearly \_\_\_\_\_ Weeks

*This is to certify that I am familiar with the operations concerning this equipment and that the information provided on this application is true and complete to the best of my knowledge. **This form must be completely filled out before it will be acceptable.***

Mail to:  
 CHATTANOOGA-HAMILTON COUNTY  
 AIR POLLUTION CONTROL BUREAU  
 2034 Hamilton Place Blvd. Suite 300  
 Chattanooga, TN 37421

Company Official: \_\_\_\_\_  
*Signature*

Title: \_\_\_\_\_

Date: \_\_\_\_\_

***DO NOT WRITE BELOW THIS LINE***

\_\_\_\_\_ Engineer Approval      This form corresponds to permit number: \_\_\_\_\_

UTM Coordinates of Company:      EW \_\_\_\_\_      NS \_\_\_\_\_

Special Notations: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_