San Joaquin Valley Air Pollution Control District  
Supplemental Application Form

Boilers, Steam Generators, Dryers, and Process Heaters
Please complete one form for each different piece of equipment. For streamlining, make note if one form covers identical equipment.

*This form must be accompanied by a completed Authority to Construct/Permit to Operate Application form*

<table>
<thead>
<tr>
<th>PERMIT TO BE ISSUED TO:</th>
<th>LOCATION WHERE THE EQUIPMENT WILL BE OPERATED:</th>
</tr>
</thead>
</table>

### EQUIPMENT DESCRIPTION

- **Boiler**
- **Steam Generator**
- **Dryer**
- **Process Heater**
- **Other:** ________________

Number of Identical Units This Application Covers (if applicable): __________

Check all that apply:  
- Oilfield Steam Generator  
- Refinery Unit  
- Wastewater Treatment Facility  
- Fired on < 50%, by volume, PUC quality gas

Manufacturer:  
Model:  
Serial Number:  

- **Indirect-Fired**  
- **Direct-Fired**

Flue Gas Recirculation:  
- Forced FGR  
- Induced FGR  
- None

Is an O\textsubscript{2} Controller present?  
- No  
- Yes, Manufacturer: ________________

### Rule 4320

**Type of Use and Emissions Monitoring Provisions**

- **Full Time**
- **Low Use** - for units installed prior to January 1, 2009 and limited to less than 1.8 billion Btu/year, must have fuel use meter  
  - Tune the unit at least twice per calendar year in accordance with District Rule 4304  
  - Operate the unit in a manner that maintains exhaust O\textsubscript{2} concentration ≤ 3.00% by volume on a dry basis
- Pay Annual Fee - in lieu of complying with NO\textsubscript{x} and CO emission limits of the Rule, pay annual fee per §5.1.2

- Note: Low Use units must identify operational characteristics recommended by the manufacturer, which can be monitored on a monthly basis (please provide details in additional documentation).

- Note: Full Time units must have either a Continuous Emission Monitoring System (CEMS) or one of the following alternate emissions monitoring plans  
  - CEMS, please specify all pollutants monitored:  
    - NO\textsubscript{x}  
    - CO  
    - O\textsubscript{2}  
    - Other: ________________
  - Monitoring of NO\textsubscript{x}, CO, and O\textsubscript{2} concentrations  
  - Periodic determination of flue gas recirculation rate by temperature measurement  
  - Monitoring of burner mechanical adjustments and O\textsubscript{2} concentration  
  - Monitoring of the flue gas recirculation valve(s) setting  
  - Other Alternate Monitoring Plan (approved on a case by case basis), attach details

- Note: See District policy (SSP-1105) for additional details of pre-approved alternate emissions monitoring plans, at: [http://www.valleyair.org/policies_per/Policies/SSP 1105.pdf](http://www.valleyair.org/policies_per/Policies/SSP 1105.pdf)

### Fuel Use Meter

- **Gaseous Fuel Meter**  
- **Liquid Fuel Meter**  
- **None**

### Primary Burner

- Manufacturer:  
- Model:  
- Type:  
  - Standard  
  - Low NO\textsubscript{x}  
  - Ultra Low NO\textsubscript{x}  
- Serial Number:  
- Maximum Heat Input Rating: _______ MMBtu/hr  
- Annual Heat Input: _______ billion Btu/year

### Secondary Burner

(if more than one burner is present)

- Manufacturer:  
- Model:  
- Type:  
  - Standard  
  - Low NO\textsubscript{x}  
  - Ultra Low NO\textsubscript{x}  
- Serial Number:  
- Maximum Heat Input Rating: _______ MMBtu/hr  
- Annual Heat Input: _______ billion Btu/year
### Primary Fuel

**Fuel Type:**
- Natural Gas
- LPG/Propane
- Diesel
- Other: 

**Higher Heating Value:**
- Btu/gal or 
- Btu/scf

**Sulfur Content:**
- % by weight or 
- gr/scf

### Primary Fuel Emissions Data

<table>
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<tr>
<th>Operational Mode</th>
<th>Steady State (ppmv)</th>
<th>Start-up (lb/MMBtu)</th>
<th>Shutdown (ppmv)</th>
<th>Start-up (lb/hr)</th>
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**Duration (please provide justification):**
- hr/day
- hr/yr
- hr/day
- hr/yr

% O₂, dry basis, if corrected to other than 3%:
- %

### Secondary Fuel

**Fuel Type:**
- Natural Gas
- LPG/Propane
- Diesel
- Other: 

**Higher Heating Value:**
- Btu/gal or 
- Btu/scf

**Sulfur Content:**
- % by weight or 
- gr/scf

**How will the secondary fuel be used?**
- Secondary full-time fuel
- Backup for primary fuel
- Other: 

### Secondary Fuel Emissions Data

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% O₂, dry basis, if corrected to other than 3%:
- %

### Source of Data

- Manufacturer’s Specifications
- Emission Source Test
- Other (please provide copies)

### Additional Emissions Control Equipment

- Selective Catalytic Reduction - Manufacturer: 
  - Model: 
- Non-Selective Catalytic Reduction - Manufacturer: 
  - Model: 

**Control Efficiencies:**
- NOₓ %
- SOₓ %
- PM₁₀ %
- CO %
- VOC %

Other (please specify): 

### HEALTH RISK ASSESSMENT DATA

**Distance to nearest Residence**
- ______ feet

**Direction to nearest Residence**
- 

**Distance to nearest Business**
- ______ feet

**Direction to nearest Business**
- 

**Release Height**
- ______ feet above grade

**Stack Parameters**

**Stack Diameter**
- ______ inches at point of release

**Rain Cap**
- Flapper-type
- Fixed-type
- None
- Other: 

**Direction of Flow**
- Vertically Upward
- Horizontal
- Other: ______ ° from vert. or ______ ° from horiz.

**Exhaust Data**

**Flowrate:**
- ______ acfm

**Temperature:**
- ______ °F

**Facility Location**
- Urban (area of dense population)
- Rural (area of sparse population)

Include a facility plot plan showing the location of the stack. Please indicate North on the plot plan. For public notice projects, indicate on plot plan the facility boundaries or fence line and distance(s) from stack to boundaries.