



SOUTHERN UTE INDIAN TRIBE - RESERVATION AIR PROGRAM
APPLICATION FOR TRIBAL OPERATING PERMIT, 40 CFR PART 70



**APPLICATION FORM EUD-2 - EMISSIONS UNIT DESCRIPTION FOR
EXTERNAL COMBUSTION SOURCES**
(Boilers, Heaters, Flares, and other External Combustion Sources)

INSTRUCTIONS: Complete this form for each significant emissions unit best described as an external combustion unit.

Facility Name: _____

Facility ID: _____

A. General Information

Emissions unit ID: _____ Description: _____

Primary use: _____

Emergency Use: Yes No Temporary source: Yes No Max. Annual Operating Hours: _____

Installation Date: _____ Last Modification/Reconstruction Date: N/A _____

Was the emissions unit previously installed at a different facility? Yes No

Standard Industrial Classification (4-digit SIC Code): _____ Source Classification Code (8-digit SCC Code): _____

B. Boiler/Heater Emission Unit Description

N/A

Manufacturer: _____ Model No.: _____ Serial No.: _____

Boiler/Heater Type: Industrial boiler Electric utility boiler Process Heater Other

If Process Heater or "Other" type, describe: _____

Burner Rating (MMBtu/hr): _____ Boiler steam flow (lb/hr): _____

Actual Heat Input (average MMBtu/hr): _____ Maximum design heat input (MMBtu/hr): _____

Fuel Data

Primary Fuel Type: _____ Back-up Fuel Type: N/A _____

Heat Content (BTU/lb, gal, or scf): _____ Heat Content (BTU/lb, gal, or scf): _____

Max. Sulfur Content (%): _____ Max. Sulfur Content (%): _____

Max. Ash Content (%): _____ Max. Ash Content (%): _____

Max. Annual Fuel Usage Rate: _____ Max. Annual Fuel Usage Rate: _____
(tons/yr, gal/yr, or MMscf/yr) (tons/yr, gal/yr, or MMscf/yr)

Max. Hourly Fuel Usage Rate: _____ Max. Hourly Fuel Usage Rate: _____

C. Flares & Combustion Chamber Description

N/A

Manufacturer: _____ Model No.: _____ Serial No.: _____

Description: _____ Stack Height (ft): _____ Smokeless Design? Yes No

Flame Type: Simple Air-assisted Steam-assisted Enclosed Sonic
 Other: _____

Flame Service: Continuous Intermittent Emergency Annual Hours of Operation: _____

Ignition System Pilot Flame Electric Spark Other: _____ Continuous Pilot? Yes No

Pilot Gas Vol. (SCFM): _____ Pilot Gas Heat Content (Btu/scf): _____

Annual Waste Gas Volume (Mscf): _____ Waste Gas Heat Content (BTU/scf): _____

Does burned gas contain H₂S? Yes No If yes, % H₂S: _____

Is the device monitored? Yes No If yes, How? _____

D. Associated Air Pollution Control Equipment

N/A

Device type: _____ Air Pollutant(s) Controlled: _____

Manufacturer: _____ Model No.: _____ Serial No.: _____

Installation or modification date: _____ Control efficiency (%): _____

Efficiency estimation method: _____

Description of Emissions Control Equipment. (Attach a drawing or explanation if needed):

E. Additional Information Required

On Separate sheets of paper, attach the following:

1. Provide sample emission calculations for each emission source and pollutant (i.e., NO_x, CO, VOC, etc...)
2. Provide an analysis of any fuel being used.

F. Ambient Impact Assessment

N/A

Instructions: This information must be completed or when an ambient impact assessment is required for this emissions unit (this is not common).

Stack height (ft): _____ Inside stack diameter (ft): _____

Stack temp (°F): _____ Design stack flow rate (ACFM): _____

Actual stack flow rate (ACFM): _____ Velocity (ft/sec): _____