



Louisville Metro Air Pollution Control District

Process Permit Application Form AP-200E

Combustion Source

Deliver application to:
701 W. Ormsby Ave. Suite 303
Louisville, KY 40203

(502) 574-6000
FAX: (502) 574-5137
www.louisvilleky.gov/apcd
airpermits@louisvilleky.gov

Plant Name:	Plant ID:
Date of construction, modification, installation, or operation:	Control equipment associated with this process equipment:

Equipment Description	Emission Process/Point #
Manufacturer:	Model :
Date of Manufacture:	Date of Installation:
Firing method: <input type="checkbox"/> Direct <input type="checkbox"/> Indirect	Rated Maximum Heat Input: MMBTU/hr
Fuel Information	
Primary Fuel	Secondary Fuel
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Coal <input type="checkbox"/> #2 Fuel Oil <input type="checkbox"/> #6 Fuel Oil <input type="checkbox"/> Other:	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Coal <input type="checkbox"/> #2 Fuel Oil <input type="checkbox"/> #6 Fuel Oil <input type="checkbox"/> Other:
Maximum annual consumption:	Maximum annual consumption:
Maximum firing rate:	Maximum firing rate:
Is a low NO _x burner used? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is a low NO _x burner used? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, enter rated NO _x emission rate:	If yes, enter rated NO _x emission rate:
Is flue gas recirculation used? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is flue gas recirculation used? <input type="checkbox"/> Yes <input type="checkbox"/> No
What percentage of recirculation is used? %	What percentage of recirculation is used? %

Ash Handling Information	
Is ash handling equipment used?	<input type="checkbox"/> Yes (Attach mfg spec sheet) <input type="checkbox"/> No
Type of ash handling system	<input type="checkbox"/> Pneumatic <input type="checkbox"/> Hydraulic <input type="checkbox"/> Mechanical <input type="checkbox"/> Other:
	<input type="checkbox"/> Storage silo <input type="checkbox"/> Settling Basin <input type="checkbox"/> Trucked off site <input type="checkbox"/> Other:
Ash storage containment system	
Ash generation rate:	On-site ash storage capacity:

Soot Blowing Information	
Is soot blowing conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If 'Yes,' complete the following</i>
Frequency of soot blowing: /	Duration : Time of day: