



# 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](http://www.louisvilleky.gov/apcd)  
[airpermits@louisvilleky.gov](mailto: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"/> Natural Gas <input type="checkbox"/> Coal
<input type="checkbox"/> #2 Fuel Oil	<input type="checkbox"/> #6 Fuel Oil	<input type="checkbox"/> #2 Fuel Oil <input type="checkbox"/> #6 Fuel Oil
<input type="checkbox"/> Other:		<input type="checkbox"/> Other:
Maximum annual consumption:		Maximum annual consumption:
Maximum firing rate:		Maximum firing rate:
Is a low NO <sub>x</sub> burner used? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is a low NO <sub>x</sub> burner used? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, enter rated NO <sub>x</sub> emission rate:		If yes, enter rated NO <sub>x</sub> 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:
Ash storage containment system	<input type="checkbox"/> Storage silo	<input type="checkbox"/> Settling Basin
	<input type="checkbox"/> Trucked off site	<input type="checkbox"/> Other:
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: