Section A - Operator	r Information				
Facility Name (Business Name of Operator That Appears On Permit): Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD):					
Address where the equipmen	nt will be operated (for equipment which will be mov	ved to various location in AQMD's jurisdiction, p	please list the initial location site):		
			_ Fixed Location Various Locations		
Section B - Equipme	-				
Equipment	Manufacturer:		Model No.:		
Precipitator Characteristics	Number of fields:	Number of plates:			
	Wires	Residence time:	sec		
	Length:	Can isolate chambers?	Yes No		
	Diameter:	_			
	Plate spacing:	Number of hoppers:			
	Length of plates:	Cross sectional area of precipitat	tor:ft ²		
	No. of chambers:	Type of collecting plate:	Tubular Plate		
	Potential applied (KV/in):	Spacing between electrodes and	plates:		
	Type of ESP: Wet Dry	Number of discharge electrodes:	·		
	Plate Cleaning System: Water Spraying	Washing Rapping C	Dther		
Particulate Size Distribution Data	Micron Range	Particle Size Distribution (Wt%)	Manufacturer's Guaranteed Removal Efficiency For Each Micron Range (%)		
	0.5 - 1.0				
	1.0 - 5.0				
	5 - 10				
	10 - 20				
	Over 20				
Method of Removal of Particulate From ESP	Closed Container Enclosed Screw Conveyor Other:				
Blower	Blower Horsepower:H.P. Design Flow Rate:SCFM				
	Draft: Forced Induced				
Design Criteria	Cyclone Configuration: Positive Pressure Negative Pressure				
Pre-Treatment Device	Cyclone Precooler	Preheater Knock-Out Chamber	None		
Post-Treatment Device	Baghouse/Cartridge HEPA	Other:			

SCAQMD P.O. Box 4944 Diamond Bar, CA 91765-0944

South Coast South Coast AQMD Form 400-PS. ADM A Construct/Operate - Forms 400-A, Form 400-CEQA, and Form 400-PS.

Tel: (909) 396-3385

www.aqmd.gov

Mail To:

South Coast Air Quality Management District				
Form 400-E-1c				

Form 400-E-1c Particulate Matter Control Electrostatic Precipitator (ESP)

This form must be accompanied by a completed Application for a Permit to Construct/Operate - Forms 400-A, Form 400-CEQA, and Form 400-PS.

Section	C - Process	Stream Characteristics					
	escription Of Process	Please include a process flow diagram and engineering drawing equipment is vented to the ESP and how waste material is hand		ed. In the space provided, indicate what			
FI	ow Data	Gas Stream Temperature: °F Pressure Drop Range: Highin. H ₂ O Lowin. H ₂ O Lowin. H ₂ O Inlet Flow Rate: ACFM Moisture Content: grams of water/cubic feet (ft ³) of dry air Dew Point Temperature of Process Stream: °F					
Operating Schedule		Normal:hours/day	days/week	weeks/yr			
Operat	ing ochequie	Maximum:hours/day	days/week	weeks/yr			
Section	D - Authoriz	ation/Signature					
		ation contained herein and information submitted with this a	pplication is true and correct.				
	Signature:	Date:	Name:				
Preparer Info			Phone #:	Fax #:			
	Title:	Company Name:					
			Email:				
	Name:		Phone #:	Fax #:			
Contact Info	Title:	Company Name:	Email:				
THIS IS A PUBLIC DOCUMENT Pursuant to the California Public Records Act, your permit application and any supplemental documentation are public records and may be disclosed to a third party. If you wish to claim certain limited information as exempt from disclosure because it qualifies as a trade secret, as defined in the District's Guidelines for Implementing the California Public Records Act, you must make such claim <u>at the time of submittal</u> to the District. Check here if you claim that this form or its attachments contain confidential trade secret information.							

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