



COMMERCIAL CHAR BROILER CERTIFICATION

A SUMMARY OF TEST RESULTS SHALL BE SUBMITTED ALONG WITH THIS CERTIFICATION FORM

Manufacturer Name:			Manufacturer Representative Name & Title:		
Address:			Email:		
City / Town / Borough:	State	Zip	Manufacturer's Website:		Phone:

COMMERCIAL CHAR BROILER DESCRIPTION

BRAND NAME: _____

TRADE NAME: _____

MODEL NUMBER: _____

ANY ACCESSORIES INSTALLED TO ENHANCE OR SUPPORT THE OPERATION OF THE EMISSIONS CONTROL DEVICE: _____

MAXIMUM AIR FLOW RATE: _____

EMISSIONS CONTROL DEVICE USED: _____

ASTM METHOD USED: _____

EPA METHOD USED: _____

I hereby certified that testing of this commercial char broiler has been conducted in accordance with the requirements set forth in Section 24-149.4 of the Administrative Code of the City of New York and 15 RCNY Sections 37-02 and 37-06.

SIGNATURE	PRINT NAME	DATE
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FOR DEPARTMENT USE ONLY

Certification #:			REMARKS:
REVIEWER'S USE ONLY			
Review Date:	ID & Initials:	Issuance Date:	