

THE CITY OF NEW YORK DEPARTMENT OF ENVIRONMENTAL PROTECTION

Bureau of Environmental Compliance 59-17 Junction Boulevard, 9th Floor, Flushing, New York 11373 Records Control (718) 595–3855

Compliance Certification Form

Not on DEP Accepted List:	Bare Boiler	oiler Burner		Control Equipment		nt	
Premise Information							
Address	Floor	Borough	Borough		Zip Code		
Boiler Information							
Manufacturer	Model	Туре		DEP Accepted List			
				Yes	No		
Max. Gross Output (MMBTU/hr)	Heating Medium	Heat Surfa	Heat Surface (ft ²)		ASME Certified		
				Yes	No		
Combustion Chamber Dim. (Inches))						
Burner Information							
Manufacturer	Model	Туре	Туре		DEP Accepted List		
					No		
Max Gross Input (ммвти/hr)	Fuel	Fire rate	Fire rate		UL Listed		
		GPH	CFH	Yes	No		
Method of Burner Limitation		i					
Boiler combustion chamber meet	ts the minimum burn	er manufacturer's r	equirement.	Yes	No		
Assembly Information		UL Listed Assembly?		Yes	No		
Control Equipment Information							
Control	Manufacturer	Model	Model		Certification		
Modulating Motor				UL ASME(C	.SD-1)	CSA	
Motorized Draft Regulator				UL ASME(C	SD-1)	CSA	
Lead-Lag System				UL ASME(C	SD-1)	CSA	
Fire Rate Control				UL ASME(C	SD-1)	CSA	
Smoke Alarm				UL ASME(C	SD-1)	CSA	

 * If the control was certified by a different organization, elaborate in the General Information section UL: Underwriters Laboratories ASME(CSD-1): American Society of Mechanical Engineers (Controls and Safety Devices for Automatically Fired Boilers)

CSA: Canadian Standards Association



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General information

Equipment nomenclature explanation (Boiler, Burner and Controls)

Type of performance testing conducted (UL, HI, NRTL, etc.) please specify

Supplementary explanation if needed

Manufacturer datasheets must be attached with all non-accepted equipment

Professional Engineer Certification

I attest under the penalties of perjury:

- 1. I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement.
- 2. That, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is, to the best of my knowledge, true, accurate and complete.
- 3. That, a licensed stationary engineer will be in attendance at the facility at all times.
- 4. I have personally reviewed the manufacturer's test data and certify that the equipment will meet the following operating conditions in the field:
 - a. A smoke reading of #3 or less on the Bacharach Scale
 - b. Stack losses will not exceed 17% for oil and 20% for natural gas
 - c. Overall efficiency will be at least 78%
- 5. That, at the time of owner equipment acceptance, overall efficiency tests according to the methods and procedures outlined by ASME will be conducted and properly certified by a professional engineer registered in the State of New York.
- 6. That, written notification will be made to the Department at least 15 days prior to any such tests so that representatives of the Department may witness said tests.
- 7. That, combustion controls for the installation will be fully automatic with the air/fuel ratio being controlled by feedback based upon continuous analysis of the flue gases at the boiler outlet and that this analysis will enable the combustion controller to continuously maintain the operating conditions for overall efficiency, stack loss and smoke readings as indicated above.



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- 8. That, the installation will have a means for continuously measuring the flue gas temperature at the boiler outlet, a means of checking the smoke reading periodically and that measuring devices for such readings will be easily accessible.
- 9. That, all other requirements of the Engineering Criteria for Fuel Burning Equipment (e.g. burner limitation, turndown ratio, fractional firing rate indicator, pre and post purge, and engineering design data relating to minimum setting, combustion chamber dimensions and maximum allowable furnace pressure) will be complied with.
- 10. That systems to maintain compliance are in place at the facility and will be maintained even if processes or operating procedures are changed.
- 11. I am fully authorized to make this attestation on behalf of the facility.

I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, misleading or incomplete information.

Signature

Date

PE Seal

Name

Email