

Industrial Work Permit Application

- Login to DEP online CATS: www.nyc.gov/dep/cats
- After Login, select the bottom right button **“Industrial Work Permits, Inspection Requests (CO), Amendments & Affidavits”**
- You will be directed to the **“My Requests”** menu tab

To convert an existing Registration to a Work Permit:

- Click on the dropdown menu for **“Select Request Type”** as **“Industrial Work Permit”**.
- Click the **“Create”** button.
- Enter the Application ID (e.g., PA001170 or PB000112 without the ending Alphabet).
- Click the **“Continue”** button.
- Complete the information in each field. Mandatory fields on the request form are marked with an asterisk. (i.e., Owner’s Email Address).
- Review all the information
- Under **“Fee Information”**: Select **“Yes”** or **“No”** for both **“Is it a government owned property?”** and **“Fee Waiver”** status.
 - If you’ve selected **“Yes”**, **select the government agency and provide proof**. Upload document(s) from the **“My Requests”** tab.
- Once completed, **click both** the **“Certification Checkbox”** and the **“Save”** or **“Save & Submit”** button.


For a New Industrial Work Permit:

- Click on the dropdown menu for **“Select Request Type”** as **“Industrial Work Permit”**.
- Click the **“Create”** button.
- Complete the information in each field. Mandatory fields on the request form are marked with an asterisk. (i.e., Owner’s Email Address).
- Review all the information.
- Under **“Fee Information”**: Select **“Yes”** or **“No”** for both **“Is it a government owned property?”** and **“Fee Waiver”** status.
 - If you’ve selected **“Yes”**, **select the government agency and provide proof**. Upload document(s) from the **“My Requests”** tab.
- Once completed, **click both** the **“Certification Checkbox”** and the **“Save”** or **“Save & Submit”** button.

To attach documents (PDF only), accessible from the **“My Requests”** menu:

- Locate the application number/request ID. Click the PDF icon to attach a file.
- Click **“Add Attachment”** (Only PDF files with a filename that is less than 40 characters including spaces can be uploaded.)
- Once the documents are attached, click the **“My Requests”** tab on top left corner.

Submit Application and Payment, accessible from the **“My Requests”** menu:

- Click the **“Submit”** icon *(last icon in the list with a green forward arrow)*. 
Proceed with processing the payment. Detailed steps for payment are provided in the [CATS Payment](#) document.
- The applicant & owner will receive an automated email upon successful submission.

For assistance, please call 718-595-3855 or email us at
Catsfeedback@dep.nyc.gov



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Rev. 02//2022

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

Industrial Work Permit Application – Checklist

Industrial Work Permit Application – All applicants must complete Part I and one section from the following source categories:

- Dry Cleaning Machine - Part II
- Spray Booth or Spray Area - Part III
- Other Industrial Process (i.e., woodworking, jewelry polishing) - Part IV
- Combustion Source (Engines, Generators, Dryers, Ovens) – Part V
- Combined Heat & Power – Part VI

Emission Calculations – Provide all assumptions and sample calculations.

Required Drawings

- **Drawings** – are to be drawn to scale on **no larger than 11” x 17” and not smaller than 8 ½” x 11”**. All submitted drawings must be legible.
- **Equipment Room layout** – location and dimensions of equipment, controls, vapor barrier enclosure, exhaust fans, fresh air intake
- **Plot Plan** – For the building or lot containing the industrial equipment, indicate property lines, street names, elevation of roof lines above grade, include building zone (i.e.: M-1, M-3), Block and Lot numbers, minimum distance to the nearest receptor and indicate North direction. Identify all filed DEP emission points with Emission ID number, Application number (PA/PB/PW/PR/CA/CB/CR/CW), heights above roof and grade for all permitted sources.

Additional Documents

- **Manufacturer Specification/Catalogue Cut Sheet** for controls and exhaust fan including maximum flowrate of the unit.
- **For Dry Cleaning Machine:**
 - NYS DEC Air Facility Registration.
 - Copy of DOB and FDNY Permits must be provided for issuance of Certificate of Operation.



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Online Application Form

Is this a legalized source? Yes No *

PART I. FACILITY INFORMATION *

Fee Information

Is it a government owned property?: Yes No (?)

Fee Waiver: Yes No (?)

Premise Information *

1A. Facility Name (If any) : (?)

1B. Facility : New Existing (?) *

1C. Facility Location

1C. House No. : (?) *

1C. Street Address : (?) *

1D. Floor / Suite No. (If any) : (?)

1E. Borough : N/A (?) *

1F. State : NY (?)

1G. Block : (?)

1H. Lot : (?)

1I. Zip Code : (?) *

1J. Building Identification Number (BIN) : (?)

1K. Equipment Location : (?)

1L. Is this equipment a replacement for equipment recently certified? : Yes No (?)

1M. If YES, provide the installation number of the equipment it is replacing (PA/PB) : (?)

1O. Facility Classification : ---Select one--- *

Owner Information

2A. Owner's Name : (?) *

2B. Owner's Address

2B. House No. : (?) *

2B. Street Address : (?) *

2C. Floor / Suite No. (If any) : (?)

2D. Borough / City : (?) *

2E. State : (?) *

2F. Zip Code : (?) *

2G. Owner's Email Address : (?) *

2H. Telephone : (?) *

2I. Fax : (?)



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PE / RA Information

3A. Name of P.E or R.A : ?

3B. NYC License Number : ?

3C. P.E. Email Address : ?

3D. Telephone : ? *

3E. Fax : ?

3F. Company Name : ?

3G. P.E. Address

3G. House No. : ? *

3G. Street Address : ? *

3H. City or Borough : ? *

3I. State : ? *

3J. Zip Code : ? *

LMP/LOBI Information

3K. Name of Installer : ?

3L. NYC Installer License Number : ?

3M. Installer Email Address : ?

3N. Telephone : ?

3O. Fax : ?

3P. Company Name : ?

3Q. Installer Address

3Q. House No. : ?

3Q. Street Address : ?

3R. City or Borough : ?

3S. State : ?

3T. Zip Code : ?



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Process Information

5 Type of Equipment to be Permitted? : *

- Dry Cleaning Equipment
- Spray Booth / Spray Area
- Other Industrial Sources
- Combustion Equipment
- Cogeneration

5A. What type of business is being conducted at this equipment *

location? :

- Dry Cleaning
- Construction Aggregate Processing
- Autobody Miscellaneous
- Autobody Spraybooth
- Cogeneration
- Food Grade Combustion
- Food Grade Miscellaneous
- Engine / Generators
- Industrial Combustion
- Industrial Miscellaneous
- Industrial Spraybooth
- Metal Processing
- Odor Control
- Paper and Printing Processing
- Jewelry Manufacturing
- Wood Working
- Tailpipe Exhaust
- Other

5B. What emission sources are present at this facility? :

5C. Building Type : *

- Standalone (No Other Occupants)
- Mixed Use (Other Occupants)



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Stack Parameters

6A. Emission Point ID : *

6B. Ground Elevation (ft) : *

6C. Height Above Structures (ft) : *

6D. Stack Height (ft) : *

6E. Inside Diameter (in) : *

6F. Exit Velocity (f/s) : *

6G. Exit Flow Rate (ACFM) : *

6H. Exit Temperature (degree F) : *

6I. Fan Manufacturer : *

6J. Fan Model Number : *

6K. Number of Units : *

6L. Total ACFM/Unit : *

6M. Fan Diameter (in) : *

6N. Fan Motor (HP/RPM) : *

6O. Dimensions of Area Ventilated by Fan : *

6P. Are multiple pieces of equipment exhausted to this stack? : Yes No *

6Q. If Yes, list all pieces of equipment :

Emission Control

7A. Does this equipment have an emission control? : Yes No *

7B. Is the control part of the equipment? : Yes No

7C. Type(s) of pollutant(s) controlled : VOC
 PM
 Other

7D. Emission Control(s) : Filter
 Scrubber
 Catalytic Oxidizer
 Carbon Adsorber
 Bag House
 Condenser / Refrigerator
 Other

7E. Description of Control Device(s) :

7F. Contaminant		7G. Emission					
Name (Total Particulates, Total VOC)	CAS Number (NY079-00-0)	a. Emission Factor		b. Hourly Emissions (lbs/hr)	c. Annual Emissions (lbs/year)	d. Percent Removal	e. How Determined
		Amt	Units				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>





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7H. Detailed Calculations (Est. max hourly and max annually) :

a. Proposed Environmental Rating : --Select one-- *

Heater Information

8A. Is the heater a separate unit? : Yes No *

8B. Input (BTU/Hr.) : *

8C. Output (BTU/Hr.) : *

8D. Firing Rate (GPH/CFH) : *

8E. Manufacturer : *

8F. Model Number : *

8G. Fuel Type : None ▾ *

Additional Permitted Equipment in Facility

9A. Installation No.

9B. Description

9C. Certificate of operation
(CO) expiration date





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PART II. DRY CLEANING

Equipment Information

- 10A.** Manufacturer:
- 10B.** Model Number:
- 10C.** Serial Number:
- 10D.** Year Of Manufacture:
- 10E.** Date Of Installation:
- 10F.** Capacity (lbs/load):
- 10G.** Machine Type:
- 10H.** Number Of Machines:
- 10I.** Solvent Type:
- 10J.** Spill Pan: Yes No
- 10K.** Exhaust Systems (check all that apply): VAPOR BARRIER INSTALLED
 GENERAL EXHAUST VENTILATION SYSTEM INSTALLED
- 10L.** Maximum Operating Temp. for the Machine (degree F):
- 10M.** Is a sprinkler system installed in this facility? Yes No

Usage Information

- 11A.** Annual Solvent Consumption (gph):
- 11B.** Maximum Hourly Solvent Usage (gph):
- 11C.** Loads / Day:
- 11D.** Operational Days / Year:

PART III. SPRAY BOOTH / SPRAY AREA

Equipment Information

- 12A.** Equipment Type: OPEN SPRAY
 SPRAY BOOTH
 PREP STATION
 OTHER
- 12B.** Manufacturer:
- 12C.** Model Number:
- 12D.** Date Of Installation:
- 12E.** Type: DOWNDRAFT
 SEMI-DOWNDRAFT
 CROSS DRAFT
 BENCH TYPE
 FLOOR TYPE
- 12F.** Opening Height (ft.):
- 12G.** Opening Width (ft.):



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Operational Information

13A. Hours / Day:

13B. Days / Year:

13C. Waterwash Pump (HP):

13D. Water Flow rate (GPM):

13E. Article(s) Sprayed: AUTOMOBILE
 WOODWORKING
 METAL
 PLASTIC / FIBERGLASS
 OTHER

13F. Method of Application: AIR ATOMIZATION
 ELECTROSTATIC
 PRESSURE ATOMIZATION (AIRLESS)
 HVLP(HIGH VOLUME LOW PRESSURE)
 AIR ASSISTED AIRLESS
 OTHER

13G. Gun Cleaning Method: ENCLOSED GUN CLEANING SYSTEM
 MANUAL WIPE
 OPEN FLUSH
 OTHER

Usage Information

Type Of Material	Product Name and Number	Material VOC (lbs VOC/gal material)	Maximum Hourly Usage (gal/hr)	Annual Usage (gal/year)	Delete
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PART IV. OTHER INDUSTRIAL PROCESS

15A. Material being processed:

15B. Maximum Hourly Processing rate:

15C. Annual Amount of Material Processed:

Equipment Information

Manufacturer:	<input type="text"/>	Model Number:	<input type="text"/>
Year of Installation:	<input type="text"/>		
Number of Units:	<input type="text"/>	ACFM per unit	<input type="text"/>
Is there a control unit specific to this equipment? <input type="radio"/> Yes <input type="radio"/> No		Is the control unit venting directly into this room? <input type="radio"/> Yes <input type="radio"/> No	
Description of Equipment:	<input type="text"/>	if applicable, list the type of control unit(s) used:	<input type="text"/>
Delete			

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15E. Hours / Day:

15F. Operational Days / Year:



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PART V. COMBUSTION SOURCES

16A. Combustion Type: --Select--

Equipment Information

16B. Manufacturer:

16C. Model Number:

16D. Year of Installation:

16Ea. Number of Units:

16Eb. Serial Number(s):

16F. Engine Model Year:

16G. EPA Engine Family Name:

16H. EPA Tier:

16I. Displacement (liters):

16J. Fuel Type: None

16K. Maximum Fuel Delivery rate (GPH/CFH):

16L. kW Rating:

16M. Horsepower:

16N. Gross Input (Million BTU/Hr.):

16O. Is exhaust stack adequate for all equipment that vents to the stack? Yes No

16P. Is there an induced fan? Yes No

16Q. If so, where is it located?

a. Manufacture:

b. Model Number:

c. Capacity:

Usage Information

16R. Primary Use:

16S. Noise Control:

16T. Hours/Day:

16U. Days/Week:

16V. Days/Year:



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PART VI. COMBINED HEAT AND POWER

Part 1.1 COGENERATOR (Gas Turbine / Engine)

[Heat Input]

17A. Equipment Type : Gas Turbine Engine

17B. Fuel Type (Check both if using dual fuels) : Natural Gas No.2 Fuel Oil Other

	[Gas Turbine]	[Engine]
17C. Number of identical units :	<input type="text"/>	<input type="text"/>
17D. Date of Installation :	<input type="text"/>	<input type="text"/>
17E. Manufacturer :	<input type="text"/>	<input type="text"/>
17F. Model Number :	<input type="text"/>	<input type="text"/>
17G. Serial Number :	<input type="text"/>	<input type="text"/>
17H. Max Fuel Input (CFH or GPH or Lb./Hr.) :	<input type="text"/>	<input type="text"/>
17I. High Heating Value Of Fuel (BTU/Hr. or CFH or BTU/Lb) :	<input type="text"/>	<input type="text"/>
17J. Max Heat Input (MMBTU/Hr.) :	<input type="text"/>	<input type="text"/>
17K. Turbine/Engine Exhaust Temperature (F) :	<input type="text"/>	<input type="text"/>
17L. Total Gas Flow to the Turbine/Engine (Lbs/Hr.) :	<input type="text"/>	<input type="text"/>
17M. Rated Power Output (From the Generator) (KW) :	<input type="text"/>	<input type="text"/>
17N. Efficiency (%) :	<input type="text"/>	<input type="text"/>

17O. Do you have a duct burner? : Yes No

Part 2.1b HEAT RECOVERY STEAM GENERATING UNIT (HRU)

[Heat Input]

17.2.1D. Number of Identical Units :

17.2.1E. Date of Installation :

17.2.1F. Manufacturer :

17.2.1G. Model Number :

17.2.1H. Serial Number :

17.2.1I. Inlet Air Temperature (F) :

17.2.1J. Exhaust/Outlet Temperature (F) :

17.2.1K. Water Flow (Lbs/Hr.) :

17.2.1L. Water Pressure (PSIG) :

17.2.1M. Water Temperature at The INLET of the HRU (F) :

17.2.1N. Water Temperature at The OUTLET of the HRU (F) :



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Part 3.1 AUXILLIARY STEAM

[Heat Output]

Generated Steam

17.3.1A. Steam Produced (Lbs/Hr.) :

- ConEd
- Steam Turbine
- Chiller
- Domestic HW
- Heating
- Other

17.3.1B. Steam Usage Information: (ex: ConEd, Steam Turbine, Chiller, Domestic HW and Heating) :

17.3.1C. Steam Flow (Lbs/Hr.) :

17.3.1D. Steam Pressure (PSIG) :

Part 4.1 POWER OUTPUT FROM STEAM TURBINE

[Heat Output]

For Turbines:

17.4.1A. Total Steam flow to the Steam Turbine (Lbs/Hr.) :

17.4.1B. Steam Temperature at the Turbine Inlet (F) :

17.4.1C. Steam Pressure at the Turbine Inlet (PSIG) :

17.4.1D. Power Output (KW or BTU/Hr.) :

I certify that I am authorized by the owner of the equipment to amend this application. As a licensed Professional Engineer / Registered Architect in the State of New York and acting as a designated agent for the applicant, I hereby certify that the application, plans, and all supplementary material submitted in connection with this filing are complete and fully comply with all applicable laws, codes, rules, regulations, and directives of the NYC Department of Environmental Protection (NYC DEP). All equipment and apparatus in addition to complying with the NYC DEP also meet the requirements of other federal, state and local agencies including but not limited to the US EPA, NYS Dept. of Environmental Conservation, NYS Department of Labor Board of Standards and Appeals, Fire Department of NY, NYC Department of Buildings and all applicable Safety Standards.

I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments as they pertain to the practice of engineering. **Please tick the check box**

Save

Save & Submit

Back to List



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Instructions on Filling Out Form

Cell #	Form Field Name	Help Text
1A	Facility Name (If any)	If subject premise has a name which is displayed on the store front sign or is commonly known (e.g., "ABCD" Garden Apartments) indicate such name. If no such name exists, indicate "none".
1B	Facility	Select "NEW" if equipment will be housed in a new structure. Select "EXISTING" if equipment will be housed in an existing structure.
1C	Facility Location	Complete premise address of combustion equipment being filed for.
1C	House No.	Do not insert any floor no./suite no.
1C	Street Address	Do not abbreviate street address.
1D	Floor / Suite No. (If any)	Enter floor number or suite number or room number if available.
1E	Borough	Select from the dropdown menu.
1F	State	Enter the State (NY).
1G	Block	Block number as seen from DOB for address entered above
1H	Lot	Lot number as seen from DOB for address entered above
1I	Zip Code	
1J	Building Identification Number (BIN)	If premise identified is part of a housing or commercial complex where buildings have identifying numbers and/or letters, provide same.
1K	Equipment Location	Identify physical location, by floor number, of combustion equipment within premise (e.g., cellar).
1L	Is this equipment a replacement for equipment recently certified?	Select "YES" if equipment is a replacement for equipment that is currently certified. Select "NO" if the equipment is not a replacement.
1M	If YES, provide the installation number of the equipment it is replacing (PA/PB):	If this equipment is a replacement for equipment currently certified, please provide the Installation Number of the equipment it is replacing. <i>(Renewal of the existing Certificate of Operation (CO) is required as long as the equipment is operable. The existing CO will be cancelled once we receive a written notification within 20 days that the equipment is dismantled or rendered inoperable.)</i>
1N	Is this a legalized source?	Indicate whether or not this is a legalized source.
1O	Facility Classification	Classification based on type of use. Check only one appropriate box. Example: Hospital owned residence, check residential College owned dormitory, check residential College owned power plant, check utility.
2A	Owner's Name	Full legal name of owner of premise.
2B	Owner's Address	Owner's complete mailing address.
2B	House No.	Do not insert any floor no./suite no.
2B	Street Address	Do not abbreviate street address.
2C	Floor / Suite No. (If any)	Enter floor number or suite number or room number if available.
2D	Borough / City	Enter the borough or city if outside NY.



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Cell #	Form Field Name	Help Text
2E	State	Enter the State (NY)
2F	Zip Code	
2G	Telephone	Enter the primary number of the Owner.
2H	Fax	Fax number of the Owner.
2I	Owner's Email Address	Email address to facilitate future correspondences and send out renewal reminders.
3A	Name of P.E or R. A	Full name of Professional Engineer or Registered Architect authorized to file the Industrial Process Equipment Application Form.
3B	NYS License Number	New York State Professional Engineer's or R. A's License Number.
3C	P.E. Email Address	P.E. or R.A. email address for future correspondence.
3D	Telephone	Telephone number of the Professional Engineer or R.A.
3E	Fax	Fax number of the Professional Engineer or Registered Architect.
3F	Company Name	Name of the company the P.E. or R.A. is employed with.
3G	P.E. Address	Complete business address information of the Professional Engineer.
3G	House No.	Do not insert any floor no./suite no.
3G	Street Address	Do not abbreviate street address.
3H	City or Borough	Enter the borough or city if outside NY.
3I	State	Enter the State (NY).
3J	Zip Code	
3K	Name of Installer	If applicable, provide the full name of the installer authorized to file the Industrial Process Equipment Application Form.
3L	NYC Installer License Number	New York City Oil Burner Installer License Number.
3M	Installer E mail Address	Installer email address for future correspondence.
3N	Telephone	Telephone number of the installer.
3O	Fax	Fax number of the installer.
3P	Company Name	Name of the company the installer is employed with.
3Q	Installer Address	Complete the business address information of the installer.
3Q	House No.	Do not insert any floor no./suite no.
3Q	Street Address	Do not abbreviate street address.
3R	City or Borough	Enter the borough or city if outside NY.
3S	State	Enter the State (NY)
3T	Zip Code	
4A	Is it a government owned property?	If the premise where the equipment is located has tax exemption as per the Department of Finance, then select "YES". Additionally, provide the DOF tax exemption documentation.
4B	Agency Name	Select the appropriate agency name.
4C	Fee Waiver	If fee is waived, select "Yes"
4D	Fee Waiver Reason	Select or mention detailed fee waiver reason.
5	Type of Equipment to be Permitted?	Select the appropriate source category



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Cell #	Form Field Name	Help Text
5A	What type of business is being conducted at this equipment location?	Specify what type of industrial process is being conducted at this location. If "Other" is selected, specify the type of industrial process.
5B	What emission sources are present at this facility?	Indicate all sources of emissions that are present at the facility. For example, if an auto body shop has a spray booth equipped with a heater, both the spray booth and the heater should be listed as sources of emissions.
5C	Building Type	If the industrial process is operating in a stand-alone building without any other occupants (commercial or residential), select "Stand Alone". If there are other occupants in the building, select "Mixed Use".
5D	If mixed use, check all boxes that describe the other types of tenants	If the building is a mixed-use building, select all the boxes that describe the other tenants.
6A	Emission Point ID	Provide the emission point ID for this stack.
6B	Ground Elevation (ft)	Height of the location of equipment from mean sea level.
6C	Height Above Structures (ft)	The distance from stack exit to the roof of the building (in feet).
6D	Stack Height (ft)	The distance from the ground level to the top of the stack (in feet).
6E	Inside Diameter (in)	Equivalent radial (circular) diameter of stack. Convert rectangular dimensions to equivalent radial diameter (in inches).
6F	Exit Velocity (f/s)	Exhaust gas exit velocity (in feet per second).
6G	Exit Flow Rate (ACFM)	Exhaust gas exit flow rate in actual cubic feet per minute (ACFM). The standard conditions are 60°F and 14.6 psi.
6H	Exit Temperature (degree F)	Specify the exhaust temperature. Typically, this is the room temperature.
6I	Fan Manufacturer	If an exhaust fan is present, provide the manufacturer's name.
6J	Fan Model Number	If an exhaust fan is present, provide the model number.
6K	Number of Units	Specify the number of exhaust fans of this make/model present in the facility.
6L	Total ACFM/Unit	Specify the ACFM of each unit.
6M	Fan Diameter (in)	Indicate the diameter of the fan (in inches).
6N	Fan Motor (HP/RPM)	Indicate the capacity of the fan (in HP and RPM).
6O	Dimensions of Area Ventilated by Fan	Provide the dimensions of the area that is ventilated by the fan. If the fan is attached to an enclosed structure, such as a spray booth or dry-cleaning unit equipped with a vapor barrier, provide the dimensions of this space.
6P	Are multiple pieces of equipment exhausted to this stack?	If more than one piece of equipment is exhausted to the stack described above, select "YES". If only one piece of equipment is exhausted to the stack, select "NO".
6Q	If Yes, list all pieces of equipment	If selected "YES" in previous question, list all of the pieces of equipment that are exhausted to the stack.



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Cell #	Form Field Name	Help Text
7A	Does this equipment have an emission control?	If emission control equipment is used, select "Yes". If no emission control equipment is used, select "No".
7B	Is the control part of the equipment?	If the control equipment is part of the industrial equipment, select "Yes". If the control equipment is a separate unit, select "No".
7C	Type(s) of pollutant(s) controlled	Select the type(s) of pollutant(s) that are controlled by the emission control equipment. If "Other" is selected, list the name of the pollutant.
7D	Emission Control(s)	Select the type(s) of emission control device(s) used at the facility. If "Other" is selected, list the name of the control device.
7E	Description of Control Device(s)	Provide a more detailed description of the emission control device(s). For example, if "Filter" was selected, provide the filter material.
7F	Contaminant	List the name and CAS number of all contaminants emitted by this equipment.
7G	Emissions	Provide annual and hourly emissions using emission factors and maximum quantity per year and per hour.
7H	Detailed Calculations	Provide a detailed description of calculations for emission values above with equations and assumptions. This can be attached as a separate document.
8	Is there a heater?	If heater is used, select "Yes". If no heater is used, select "No".
8A	Is the heater a separate unit?	If heater is in separate unit, select "Yes", else select "No".
8B	Input	Specify the input of the heater in BTU/Hr
8C	Output	Specify the output of the heater in BTU/hr
8D	Firing rate	Specify the firing rate of the heater in GPH/CFH
8E	Manufacturer	Specify the Manufacturer of the heater
8F	Model Number	Specify the name of the manufacturer model number of the heater
8G	Fuel Type	Select either "No.2 Fuel" or "Natural Gas"
9A	Installation Number	If additional permitted equipment is in the facility specify the installation number
9B	Descriptions	If additional permitted equipment is in the facility, describe the equipment
9C	Certificate of Operation Expiration Date	If additional permitted equipment is in the facility, state the expiration date of each certificate of operation.
10A	Manufacturer	Specify the Dry-Cleaning equipment manufacturer
10B	Model Number	Specify the Dry-Cleaning equipment model number
10C	Serial Number	Specify the Dry-Cleaning equipment serial number
10D	Year of Manufacture	Specify the Dry-Cleaning equipment year of manufacture
10E	Date of Installation	Specify the Dry-Cleaning equipment date of installation
10F	Capacity (lbs/load)	Specify the Dry-Cleaning equipment max load capacity in pounds.
10G	Machine Type	Specify Machine Type for dry cleaning (e.g., Perchloroethylene 4 th generation, HydroCarbon)
10H	Number of Machines	Specify the number of identical machines
10I	Solvent Type	Specify the solvent type (e. g., DF-2000 Fluid Perchloroethylene)



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Cell #	Form Field Name	Help Text
10J	Spill Pan	If machine is equipped with spill pan, select "Yes" else select "No".
10K	Exhaust Systems	Check appropriate items: Vapor Barrier Installed General Exhaust ventilation system Installed
10L	Maximum operating Temp for machine	For Hydrocarbon only, provide the maximum operating temperature inside machine drum in degrees Fahrenheit as specified by manufacturer. This should not greatly exceed solvent flash point.
10M	Is a sprinkler system installed in the facility?	If sprinkler system is installed, select "Yes" else select "No".
11A	Annual Solvent Consumption	Provide the annual solvent consumed in gallons per year.
11B	Maximum Hourly Solvent Usage	Provide the maximum hourly solvent usage in gallons per hour
11C	Loads/ day	Provide the number of loads per day
11D	Operational days/year	Provide the number of operational days per year
12A	Equipment Type	Select the type of equipment used for the spray booth. If "Other" is selected, please specify.
12B	Manufacturer	Specify the spray booth equipment manufacturer
12C	Model Number	Specify the spray booth equipment model number
12D	Date of Installation	Specify the date of installation of spray booth equipment
12E	Type	Select the type of spray booth in the facility
12F	Opening Height (ft)	Provide the opening height of the spray booth in feet
12G	Opening Width (ft)	Provide the opening width of the spray booth in feet
13A	Hours/day	Specify the operational hours per day
13B	Days/Year	Specify the operational days per year
13C	Waterwash Pump (HP)	Provide the horsepower of the waterwash pump
13D	Water Flow Rate (gpm)	Provide the water flow rate of the pump in gallons per minute
13E	Article(s) Sprayed	Check all that apply to article(s) sprayed in the spray booth. If "Other" is selected, specify the article.
13F	Method of Application	Check which method of application is used.
13G	Gun Cleaning Method	Check which gun cleaning method is used.
13H	Usage Information	Specify the type of material used, the product name and number, pounds of VOC per gallon of material, and its usage.
15A	Material Being Processed	Specify which material is processed
15B	Maximum Hourly Processing Rate	Determine the maximum hourly processing rate of this material
15C	Annual Amount of Material Processed	Determine the annual amount of material processed
15D	Equipment Information	Describe the equipment information by filling out each field (e. g., manufacturer, model number)
15E	Hours/day	Specify the hours per day the equipment is used
15F	Operational days/year	Specify the operational days per year the equipment is used
16A	Combustion Type	Select the appropriate combustion type from the drop-down menu
16B	Manufacturer	Specify the manufacturer of the equipment
16C	Model Number	Specify the model number of the equipment
16D	Year of Installation	Specify the year of installation of the equipment
16Ea	Number of Units	Determine the number of units of the equipment in the facility



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Cell #	Form Field Name	Help Text
16Eb	Serial Numbers	Specify the serial number of each equipment
16F	Engine Model Year	Specify the engine model year
16G	EPA Engine Family Name	Specify the EPA Family Name (the 12-character number/letter designation included on the engine nameplate)
16H	EPA Tier	Specify which EPA Tier the equipment belongs to based off manual or attach equivalency forms
16I	Displacement	Provide the engine displacement in liters
16J	Fuel Type	Determine which fuel type is used for the equipment through the drop-down menu
16K	Maximum Fuel Delivery Rate	Determine the maximum fuel delivery rate in gallon per hour or cubic feet per hour
16L	kW Rating	Provide the kW rating of the equipment
16M	Horsepower	Provide the horsepower of the equipment
16N	Gross Input	Provide the gross input in million BTU per hour
16O	Is exhaust stack adequate for all equipment that vents to the stack?	Select "Yes" or "No".
16P	Is there an induced fan?	Select "Yes" or "No".
16Q	Information pertaining to induced fan	If there is an induced fan, specify its location, manufacturer, model and capacity.
16R	Primary Use	Describe the primary use of the combustion source with details.
16S	Noise Control	Provide information on the noise control of the source if applicable
16T	Hours/Day	Provide the number of hours per day the source is operational
16U	Day/Week	Provide the number of days per week it is operational
16V	Days/Year	Provide the number of days per year it is operational
17A	Equipment Type	Select the equipment type for the Cogenerator (either gas turbine or engine)
17B	Fuel Type	Select the fuel type used for the equipment
17C	Number of Identical Units	Provide the number of identical units
17D	Date of Installation	Provide the date of installation
17E	Manufacturer	Provide the manufacturer
17F	Model Number	Provide the model number
17G	Serial Number	Provide the serial number
17H	Max Fuel Input (CFH/GPH/Lb./hr)	Provide the maximum fuel input in cubic feet per hour or gallons per hour or pounds per hour
17I	High Heating Value of Fuel	Provide the high heating value of fuel in BTU per hour or cubic feet per hour or BTU per pound.
17J	Max heat input	Provide the maximum heat input in million BTU per hour
17K	Turbine / Engine Exhaust Temperature	Provide the turbine engine exhaust temperature in degrees Fahrenheit
17L	Total Gas Flow to the turbine	Provide the total gas flow to the turbine or engine in pounds per hour
17M	Rated Power output	Provide the rated power output from the generator in KW
17N	Efficiency (%)	Provide the efficiency as a percent



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Cell #	Form Field Name	Help Text
17O	Do you have a duct burner?	Select "Yes" or "No"
17.2.1D	Number of Identical Units	Provide the number of identical units for the heat recovery steam generating unit (HRU)
17.2.1E	Date of Installation	Provide the date of installation for the HRU
17.2.1F	Manufacturer	Provide the manufacturer
17.2.1G	Model Number	Provide the model number
17.2.1H	Serial Number	Provide the serial number
17.2.1I	Inlet Air Temperature	Provide the inlet air temperature in degrees Fahrenheit
17.2.1J	Exhaust/Outlet Temperature	Provide the exhaust/ outlet temperature in degrees Fahrenheit
17.2.1K	Water Flow	Provide the waterflow in pounds per hour
17.2.1L	Water Pressure	Provide the water pressure in PSIG
17.2.1M	Water Temperature at the inlet of the HRU	Provide the water temperature of the inlet of HRU in degrees Fahrenheit
17.2.1N	Water temperature at the outlet of the HRU	Provide the water temperature of the outlet of the HRU in degrees Fahrenheit
17.3.1A	Steam Produced	Provide the steam produced from the auxiliary in pounds per hour
17.3.1B	Steam Usage Information	Check the appropriate steam usage information
17.3.1C	Steam Flow	Provide the steam flow of the auxiliary in pounds per hour
17.3.1D	Steam Pressure	Provide the steam pressure in PSIG
17.4.1A	Total Steam flow to the Steam Turbine	Provide the total steam flow to the steam turbine in pounds per hour
17.4.1B	Steam Temperature at the Turbine Inlet	Provide the steam temperature at the turbine inlet in degrees Fahrenheit
17.4.1C	Steam Pressure at the Turbine Inlet	Provide the steam pressure at the turbine inlet in PSIG
17.4.1D	Power Output	Provide the power output in KW or BTU per hour.