Evaporative Process Form 1999

Permit number(s) _____

☐ 1- Process Type/Description: _____

2- Process TIER Code: _____

3- Seasonal Thoughput Percent: Dec-Feb ____ % Mar-May ____ % Jun-Aug ____ % Sep-Nov ____ %

4- Normal Operating Schedule: Hours/Day ____ Days/Week ____ Hours/Year ____

5- Typical Hours of Operation *(military time)* Start ____ End ____

6- For STORAGE TANKS Only. Select only one: ☐ Above Ground Vaulted ☐ Under Ground ☐ Above Ground NON-Vaulted

NOTE: Place an X in any gray cell to mark data requested to be held confidential. See Instructions for requirements for information to be deemed confidential.

7	8	9	10		11	12		13	14	15			16
Process ID	Stack ID(s)	Material Type	Annual Usage Input	lb or gal	VOC, HAP&NON or NHx	Emission Factor	EF Units (lbs per)	Pounds of pollutant* sent off site	Capture % Efficncy	Control ID	Control % Efficncy	Code**	Estimated Emissions (lbs/yr)
									%		%		
									%		%		
									%		%		
									%		%		
									%		%		
									%		%		
									%		%		
									%		%		

* Pollutant = VOC, HAP&NON or NHx identified in column 11. If you have off-site recycling/disposal of any of the materials listed above, you must complete an Off-Site Recycling/Disposal Form to receive credit for reduced emissions.

**** Control Efficiency Reference Codes**

1 = Tested efficiency / EPA reference method
2 = Tested efficiency / other source test method
3 = Design value from manufacturer
4 = Best guess / engineering estimate
5 = AP-42/ FIRE Method or Emission Factor
6 = Estimated, based on a published value