



**Maricopa County Air Quality Department**  
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**CYCLONE DAILY OPERATIONS LOG SHEET**

Business Name: \_\_\_\_\_

Equipment Identification: \_\_\_\_\_

O&M Plan Revision Date: \_\_\_\_\_

Date						
Time						
Technician						
<u>PARAMETER</u>	<u>LIMITS</u>	<u>READINGS</u>				
Visible emissions present at outlet	_____	_____	_____	_____	_____	_____
Cyclone pressure drop (in H <sub>2</sub> O)	_____	_____	_____	_____	_____	_____
Gas velocity (ft/sec)	_____	_____	_____	_____	_____	_____
Inlet temperature (°F)	_____	_____	_____	_____	_____	_____

**COMMENTS (INCLUDING CORRECTIVE ACTION TAKEN):**