

**Air Pollution Control District  
Annual Survey Form  
Source Type - Steam/Heat Production**

**Please answer all of the following questions**

Company Name \_\_\_\_\_  
 Company Location \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 Company Contact \_\_\_\_\_ Telephone \_\_\_\_\_  
 E-mail \_\_\_\_\_

- 1) Calendar year of the information reported: 20\_\_\_\_\_  
 2) Operating schedule: Hrs/Day\_\_\_\_\_ Days/Week \_\_\_\_\_ Weeks/Yr \_\_\_\_\_  
 3) Total hours of operation during the calendar year \_\_\_\_\_  
 4) Type of business \_\_\_\_\_

Indicate the number and type of equipment that your company owns or operates at this site and which production equipment is vented to controls:

5) Production Equipment	6) Controlled	7) Pollution control equipment
Boilers _____	_____	Baghouse _____
Gas turbines _____	_____	Scrubber _____
IC engines _____	_____	Multiclone _____
Burners _____	_____	Cyclone _____
Elevators/conveyors _____	_____	ES precipitator _____
Fuel silos _____	_____	Catalyst _____
Ash silos _____	_____	Low NOX burner _____
		Flue gas recirc _____
		Oxygen trim _____

8) Fuels used for combustion	Quantity used/year	Units	Sulfur %
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9) Operation load: average \_\_\_\_\_ maximum \_\_\_\_\_ units \_\_\_\_\_

10) Exhaust airflow rates to air pollution control equipment (CFM) \_\_\_\_\_

**Use the back of this form for additional comments or clarification.**