



Charbroiler Reportable Information
(State Regulation 18 AAC 50.078(c))
For reporting multiple devices copy form as necessary

Business name: _____

Address of device operation: _____

Device manufacturer & model: _____

Size/rating of device: _____

Type of fuel used in device: _____

Type and quantity, in pounds, of meat cooked _____ **LBS/Day**

Device daily operating hours: _____

Device air flow rate: _____

IF YOUR FACILITY/OPERATION DOES NOT HAVE A CHARBROILER DEVICE AS LISTED ABOVE CHECK THE BOX BELOW.

NO CHARBROILER DEVICE AS DESCRIBED ABOVE IS PRESENT

Name: _____ **Date:** _____

Submit this form to the Department of Environmental Conservation Division of Air Quality, 610 University Avenue, Fairbanks, AK 99709 Attention Steven Hoke. Alternatively it may be submitted by email to steven.hoke@alaska.gov. For more information call (907)451-5172.