

DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Standard Permit Condition XVI – Emission Inventory Reporting Form

**Permit Condition for Air Quality Permits
Adopted by Reference in 18 AAC 50.346**

{adoption date of these regulations}

ADEC Reporting Form

Emission Inventory Reporting

State of Alaska Department of Environmental Conservation

Division of Air Quality

Emission Inventory Year- []

Mandatory information is highlighted.

Inventory start

date:

Inventory end date:

Inventory Type:

Facility Information:

ADEC Stationary Source ID:

(Stationary Source) Facility

Name:

AFS ID:

Census Area/ Community:

Line of Business (NAICS):

Contact/Owner Name:

Contact Owner Address:

Contact/Owner Phone

Number:

Facility Physical Address:

Lat: Long:

Mailing Address :

Emission Unit:

ID:

Description:

Manufacturer:

Model Number:

Serial Number:

Year of Manufacture:

Maximum Nameplate

Capacity:

Design Capacity (BTU/hr):

Control Equipment (List

All):

Control Equipment Type(Primary or Secondary):

ID:

Type:

Manufacturer:

Model:

Control Efficiency (%):

Capture Efficiency (%):

Total Capture Efficiency (%):

Pollutants Controlled

-

-

-

-

**Processes (List
All):**

PROCESS:**SCC Code:**

Material Processed:

Operational Periods:

FUEL INFORMATION

Ash Content (weight %):

Elem. Sulfur Content (weight %):

H2S Sulfur Content (ppmv):

Heat Content (MMBtu/1000 gal or MMBtu/MMscf):

Heat Input (MMBtu/hr):

Heat Output (MMBtu/hr):

THROUGHPUT

Total Amount:

Summer %:

Fall %:

Winter %:

Spring %:

Days/Week of Operation:

Weeks/Year of Operation:

Hours/Day of Operation:

Hours/Year of Operation:

EMISSIONS					
Pollutant	Emission Factor	Emission Factor Numerator	Emission Factor Denominator	Emission Factor Source	Tons Emitted
CO					
NH3					
NOX					
PM10-PRI					
PM25-PRI					
SO2					
VOC					
Lead and lead compounds					

Stack Description:

Stack Detail:

ID:

Type:

Measurement Units:

Base Elevation:

Stack Height:

Stack Diameter:

Exit Gas Temp:

Exit Gas Velocity:

Actual Exit Gas Flow Rate:

Data Source:

Description:

Latitude:

Longitude:

Location Description:

Accuracy (m):

Datum:

Certification:

Based on information and belief formed after reasonable inquiry, I certify that the statements and information in and attached to this document are true, accurate, and complete.

Printed Name: _____ Title _____ Date _____

Signature: _____ Phone number _____

NOTE: *This document must be certified in accordance with 18 AAC 50.345(j)*

To Submit this report:

1. Fax this form to: **907-465-5129**

Or

2. E-mail to: **DEC.AQ.airreports@alaska.gov**

Or

3. Mail to: **ADEC
Air Permits Program
410 Willoughby Ave., Suite 303
PO Box 111800
Juneau, AK 99801-1795**

Or

4. Submission of information can be made via a full electronic batch submittal (XML files). This will require each data element to be tagged with XML (Extensible Markup Language) code before it can be uploaded to ADEC database.

<https://myalaska.state.ak.us/dec/air/airtoolsweb/EiXmlValidator.aspx>