

Knox County Department of Air Quality Management

Title V Permit Application
 APCV-07 Form: Incineration
 (Please Type or Print)



1. General Identification and Description

Facility name:

Incinerator identification:

2. Incinerator Description

Incinerator description:

Stack ID or flow diagram point identification(s):

If this incinerator is controlled for compliance utilizing add-on control equipment, attach an appropriate APCV Control System Form.

Location of this incinerator (latitude and longitude):

Year of construction or last modification:

Normal operating schedule:	hrs/day	days/week	days/yr
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If this incinerator's emissions and/or operations are monitored for compliance, please attach the appropriate compliance demonstration form.

Type of incinerator:

Single chamber Stepped hearth Controlled air Rotary kiln Multiple chamber Fixed hearth

Other (specify):

3. Materials and Combustion Information

Describe all types of materials to be burned in this unit. (Declare materials stated in Section 35.3-A.6 of the Knox County Air Quality Management Regulations and identify)

Types of materials to be burned	Weight percentage of total charge	Heating value

Type of incinerator charging: <input type="checkbox"/> Batch feed <input type="checkbox"/> Continuous feed	Maximum charging rate (lbs/hr):	Waste charging method:
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Combustion information:	Design Temperature (°F)	Size (MMBtu/hr)	Burner Fuels	Residence Time of Gas
Primary chamber				
Secondary chamber				

If this incinerator is equipped with a heat recovery system, what is the projected energy production rate? (i.e. pounds of steam per hour)

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