FORM B3

WESTCHESTER COUNTY DEPARTMENT OF HEALTH

BUREAU OF ENVIRONMENTAL QUALITY

INCINERATOR

APPLICATION FOR PERMIT TO CONSTRUCT OR CERTIFICATE TO OPERATE

1. NAME OF OWNER/FIRM			8. NAME OF PROFESSIONAL ENGINEER	9. TELEPHONE	18. FACILITY NAME	
2. NUMBER AND STREET ADDRESS			10. NUMBER AND STREET ADDRESS		19. FACILITY LOCATION (No. & ST. ADDRESS)	
3. CITY·TOWN·VILLAGE	4. STATE	5. ZIP	11. CITY·TOWN·VILLAGE	12. STATE / 13. ZIP	20. CITY·TOWN·VILLAGE	21. ZIP
			14. NYSPE STAMP/SEAL	15. NYSPE LICENSE # / 16 DATE OF SIGNATURE	22. BUILDING NAME OR NO.	23. START UP DATE _____/_____ MO. YR.
6. NAME & TITLE OF OWNERS REP.		7. TEL. #	17. SIGNATURE OF PROFESSIONAL ENGINEER WHEN APPLYING FOR A PERMIT TO CONSTRUCT		24. DRAWING NUMBERS OF PLANS SUBMITTED	

25. EMISSION POINT NO.	26. GROUND ELEV(FT.)	27. HGT. ABOVE STRUCTURES (FT)	28. STACK HGT.(FT)	29. INSIDE DIMEN.(IN)	30. EXIT TEMP (°F)	31. EXIT VELOCITY (FT./SEC.)	32. EXIT FLOW RATE (ACFM)	

34. CONTINUOUS MONITOR(S) A. □ OPACITY B. □ SULFUR DIOXIDE C. □ NITROGEN OXIDES D. □ OXYGEN E. □ CARBON DIOXIDE F. □ OTHER

35. PERMIT TO CONSTRUCT A. □ NEW SOURCE B. □ MODIFICATION

36. CERTIFICATE TO OPERATE A. □ NEW SOURCE B. □ MODIFICATION C. □ EXISTING SOURCE

36A. REFUSE FEED	37. UNIT TYPE	39. ENCON ID NUMBER	40. UNIT MANUFACTURER'S NAME & MODEL NUMBER	

REFUSE TYPE	% TYPE 5 REFUSE	% TYPE 6 REFUSE	RADIOACTIVE REFUSE		CAPACITY LBS/HR.	AMOUNT REFUSE CHARGED LBS./HR.	HRS/DAY	DAYS/YR	50.% OPERATION BY SEASON
42.PRIMARY	43.	44.	45. YES	NO	46.	47.	48..	49.	Winter / Spring / Summer / Fall
51.ADD REF	52	53.	54. YES	NO	55.	56.	57.	58.	Winter / Spring / Summer / Fall

AUXILIARY EQUIP. TYPE	TOTAL NO. OF UNITS	AUXILARY EQUIPMENT MANUFACTURER'S NAME AND MODEL NUMBER	TEMPERATURE ACTUATED		RATED BURNER CAPACITY	FUEL TYPE
60.	61.	62.	63. YES	NO	64.	65.
66.	67.	68.	69. YES	NO	70.	71.

EMISSION CONTROL EQUIP. ID.	CONTROL TYPE	MANUFACTURER'S NAME & MODEL NO.	DISPOSAL METHOD	DATE INSTALLED MO./YR.	USEFUL LIFE
72.	73.	74.	75.	76.	77.

CONTAMINANT		EMISSIONS			% CONTROL EFFICIENCY	HOURLY EMISSIONS (LBS/Hr)	ANNUAL EMISSIONS (LBS/YR)	
78. NAME	79. CAS NUMBER	80. ACTUAL	81. UNIT	82. HOW DET.	83.	84. ACTUAL	85. ACTUAL	86. 10^X
TOTAL PARTICULATES	NY075-00-0							
SULFUR DIOXIDE	7448-09-0							

SOLID FUEL TYPE	(TONS/HR)	%S	LIQUID FUEL TYPE	THOUSANDS OF GAL/YR	%S	GAS TYPE	THOUSANDS OF CF/YR	BTU/CF
87.	88.	89.	90.	91.	92.	93.	94.	95.

UPON COMPLETION OF CONSTRUCTION SIGN THE STATEMENT LISTED BELOW.

THE INCINERATOR HAS BEEN CONSTRUCTED AND WILL BE OPERATED IN ACCORDANCE WITH STATED SPECIFICATIONS AND IN CONFORMANCE WITH ALL PROVISIONS OF EXISTING REGULATIONS.

96. SIGNATURE OF DESIGN PROFESSIONAL

97. DATE