



# Illinois Environmental Protection Agency

## Supplemental Form Air Pollution Control Equipment – Cyclone

Illinois Environmental Protection Agency  
Bureau of Air – Permit Section (MC 11)  
2520 West Iles Ave  
P.O. Box 19276  
Springfield, IL 62794-9276

Date Form Received

### Data and Information

Flow Diagram Designation of Cyclone: \_\_\_\_\_

Filter Configuration (Choose one)

Simple

Wet

Multiple; Number of Cyclones in Each: \_\_\_\_\_

Designate the Feed Method:

Tangential

Axial

### Inlet Emission Stream Parameters:

Parameter	Maximum	Typical
Particulate Inlet Loading (grains/scf)		

Mean Particulate Diameter (microns): \_\_\_\_\_

### Cyclone Operating Parameters

Operating Parameter	During Maximum Operation of Feeding Unit(s)	During Typical Operation of Feeding Unit(s)
Inlet flow rate (scfm)		
Inlet Gas Temperature (degrees Fahrenheit)		
Efficiency (pm reduction, %)		
Efficiency (pm <sub>10</sub> reduction, %)		

The Illinois EPA is authorized to require, and you must disclose, the requested information on this form pursuant to the Environmental Protection Act (“Act”), 415 ILCS 5/1 et seq., and its implementing regulations. This information shall be provided using either this form or in an alternative manner at your discretion. Failure to disclose the information may result in an incomplete application and other penalties as provided for in the Act, 415 ILCS 5/42-45. Intentional falsification of the information in this form may result in significant criminal and civil penalties as provided by law.

## Cyclone Monitoring and Recordkeeping

Parameter to be Monitored (e.g. flow rate)		
Method of Measurement		
Unit of Measurement		
Monitoring Frequency		
Description of the Location of Each Monitor		
Verification Procedures to Confirm the Operational Status of the Monitoring		
Method of Recordkeeping (e.g. data logger, manual readings)		

If each monitor is not operated at all times the control equipment is in operation, explain:

Provide information on the most recent tests, if any. If additional space is needed, attach and label as exhibit 260D-1:

Test Date	Test Method	Testing Company	Operating Conditions	Summary of Results

Describe all reporting requirements and provide the title and frequency of report submittals to the Agency: