Illinois Environmental Protection Agency

Data and Information - Incinerator

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

Date Form Received

Applicant Information

Name of Owner: _____
Name of Corporate Division or Plant (If different from owner): _____
Street Address of Emission Source: _____
City of Emission Source: _____
Bureau of Air ID (If Applicable): _____

Instructions

1. Complete all the sections below.
2. Operating time and certain other items require both average and maximum values.

Definitions

- **Incinerator:** an apparatus in which refuse is burned.
- **Average:** the value that summarizes or represents the general condition of the emission source, or the general state of production of the emission source.
- **Maximum:** the greatest value attainable or attained for the emission source, or the period of greatest or utmost production of the emission source.

General Information

Description of Source of Waste/Material to be Incinerated:

_____
Manufacturer of Incinerator: _____
Model Name and Number: _____
Type: ☐ Flue ☐ Single Chamber ☐ Multiple Chambers
Maximum Amount of Waste to be Incinerated (lb/hr): _____
Estimated Daily Amount of Waste to be Incinerated (lb): _____

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.

Height of Stack Above Grade (ft): _____
Height of Tallest Structures Within 150 Feet (ft):_____
Primary Burner: ☐ Yes - Max Rating (Btu/hr): _____ ☐ No
Secondary Burner: ☐ Yes - Max Rating (Btu/hr): _____ ☐ No
Gas Cleaning Device: ☐ Yes ☐ No

If "Yes" to Gas Cleaning Device, complete the appropriate "Data and Information – Air Pollution Control Equipment," Form APC-260, as part of this application.

Description of Typical Waste to be Incinerated

Waste Material	% by WT
Paper	
Dry Wood	
Leather, Linoleum	
Rubber and Plastics	
Oils and Paints	
Street and Floor Sweepings	
Fats and Meat Dressing	
Glass and Ceramics	
Metals	
Leaves, Grass, Branches, Vegetables, and Fruits	
Other (Specify): _____	

Operational Information

Operating Time of Emission Source	Hrs/day	Days/wk	Wks/yr
Average Operation			
Maximum Operation			

Percent of Annual Throughput

Dec-Feb (%)	Mar-May (%)	Jun-Aug (%)	Sept-Nov (%)

Special Notes

For industrial wastes, complete component and/or chemical description including sulfur, chloride, ash, and moisture content, must be given in an exhibit attached to this application.

The agency must have on file proof that the make and model incinerator described herein will meet the requirements of rules 203(e) and 206(b) when burning the waste, both type and rate, described herein.