

## City of Cleveland Air Contaminant Source Permit Application

Cleveland Division of Air Quality 75 Erieview Plaza, 2<sup>nd</sup> Floor Cleveland, OH 44114-8047

Facility Information		<b>Contact Information</b>	
Facility Name		Person to Contact (for the facility)	
Facility Address	Ward #	Mailing Address (for the facility)	
City	State Zip Code	City	State Zip Code
Area Code Telephone		Area Code Telephone	
facility ID Number (assigned by CDAQ 13	3-18-00-####)	Area Code Fax	
Source Information		Email Address	
Description of Source (each air contamina	ant source at the facility requ	uires a permit)	
Emissions Unit ID (four-digit code assigned inter the requested information for each			
Source Type		Information Needed	Units
Fuel Burning Equipment (e.g., boilers, heaters, emergency generators)	Heat input capacity		Million BTU per hour (MM BTU/HR)
Incinerators/Crematories	Primary furnace volume		Cubic feet (f³)
Process Equipment	Process weight rate		Pounds per hour (lb/hr)
	Exhaust air ventilation		Cubic feet per minute (CFM)
Process and Fuel-Burning Equipment	Heat input capacity		Million BTU per hour (MM BTU/HR)
	Exhaust air ventilation		Cubic feet per minute (CFM)
Other Air Contaminant Source	Detailed description of source		
complete to the best of my knowledge, as the air contaminant source(s) listed herec	nd that all judgments and es on comprise a complete listir	I after reasonable inquiry, that all factual statemen stimates provided in this report have been made in ng of all air contaminant sources at this facility. I u e a fee, which my facility is required to pay under o	good faith. I further affirm th inderstand that the data
Signature of Responsible Official		 Date	<del></del>