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| **1. Business information:** | **Air Quality Use Only** |
| Business license name of corporation, company, individual owner, or governmental agency under which the notice of intent (NOI) is submitted |
| **Source Number** |  |
| **2. Facility information:** |
| Are all internal combustion engines at the facility operated as emergency stationary generators?  | [ ]  Yes [ ]  No | Number of engines: |
| **3. Emergency stationary internal combustion engines data:** (complete for each emergency stationary internal combustion engine at the facility along with attaching a copy of the manufacturer’s product literature, if available, and attach additional sheets if necessary) |
| **Emergency Stationary Internal Combustion Engine #1** |
| Manufacturer | Model number | Serial no.  | Date manufactured | Date installed |
| Engine maximum brake horsepower (hp) | Displacement per cylinder (liters) | Engine Type[ ]  2 stroke[ ]  4 stroke | Generators electrical kw (ekw) | Exhaust stack data |
| Height above grade (ft) | Diameter (ft) | Flow (actual ft3/min) |
| Primary Fuel (specify) | Secondary Fuel (specify) | Maximum fuel usage rate (gal/hr or ft3/hr) |
| Primary Fuel | Secondary Fuel |
| **Emergency Stationary Internal Combustion Engine #2** |
| Manufacturer | Model number | Serial no.  | Date manufactured | Date installed |
| Engine maximum brake horsepower (hp) | Displacement per cylinder (liters) | Engine Type[ ]  2 stroke[ ]  4 stroke | Generators electrical kw (ekw) | Exhaust stack data |
| Height above grade (ft) | Diameter (ft) | Flow (actual ft3/min) |
| Primary Fuel (specify) | Secondary Fuel (specify) | Maximum fuel usage rate (gal/hr or ft3/hr) |
| Primary Fuel | Secondary Fuel |
| **4. Comments** |
|  |
| **5. Based upon information and belief formed after a reasonable inquiry, I certify that the information contained in this Notice of Intent is accurate and true to the best of my knowledge.** |
| Signature of the responsible official | Date |