

**REGISTRATION CERTIFICATE**

EPAC-10 REV. 7-73

STATE OF CONNECTICUT

**DEPARTMENT OF ENVIRONMENTAL PROTECTION**



STACK NO. 01171021205

EQUIPMENT CLASSIFICATION		REGISTRATION NO.
<input type="checkbox"/> FUEL BURNING	<input type="checkbox"/> INCINERATOR	01170627
<input checked="" type="checkbox"/> PROCESS MFG.		DATE ISSUED
FIRM NAME		12/05/73
MOBIL OIL CORP		
LOCATION OF EQUIPMENT (No. & Street, Town, Zip)		
134 FORBES AVE		NEW HAVEN CT 06511
COMMISSIONER OR HIS REPRESENTATIVE		

DEPARTMENT OF ENVIRONMENTAL PROTECTION TANK# 27 - SNL GAS

Active

**PROCESS AND MANUFACTURING EQUIPMENT REGISTRATION**

EP-6 NEW 5-72

117-212-627-05

STATE OF CONNECTICUT

#003

**TO: Department of Environmental Protection, Air Compliance Section, State Office Bldg., Hartford, Conn. 06115. Tel. 566-2690**

1. APPLICATION NO.	2. STACK NO.
--------------------	--------------

<b>3. FIRM</b>	LEGAL NAME	BUSINESS ADDRESS (No. & Street, City or Town)	ZIP CODE	PHONE
<b>4. DIVISION</b>	Mobil Oil Corporation	134 Forbes St., New Haven	06509	467-2521
<b>5. APPLICANT</b>				
<b>6. INSTALLATION</b>				
<b>7. EQUIPMENT BEING REGISTERED</b>	TYPE OF EQUIPMENT (e.g., storage tank) Storage Tank #27	AIR POLLUTION CONTROL EQUIPMENT USED (if "YES," file form EP-7) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
<b>8. MAJOR ACTIVITY OF FIRM</b>	<input type="checkbox"/> MFG. <input type="checkbox"/> OFFICE <input type="checkbox"/> RETAIL OR WHLSE. STORE <input type="checkbox"/> SCHOOL OR CHURCH <input type="checkbox"/> HOTEL/MOTEL <input type="checkbox"/> HOSPITAL OR LAB. <input type="checkbox"/> WAREHOUSE <input type="checkbox"/> RESIDENCE OR APTS. <input checked="" type="checkbox"/> OTHER (Specify) Storage Terminal			

9. TYPES OF FUELS USED	FUEL	GRADES (x)	SULFUR CONTENT	ASH CONTENT	ANNUAL USAGE (Tons, Gals. or Cu. Ft.)	MAXIMUM FIRING RATE		SEASONAL USE		FUEL SUPPLIER		
						(Lbs., Gals., Cu. Ft./hr.)	(BTU/hr.)	Month	to	Month	Name	City or Town
OIL <input type="checkbox"/>		Kerosene	. %	. %								
		2	. %	. %								
		4	. %	. %								
		5	. %	. %								
		6	. %	. %								
NAT. GAS <input type="checkbox"/>												
OTHER <input type="checkbox"/>												

10. PROCESS WEIGHTS	MATERIALS	USE (Solvent, Catalyst)	ENTERING (Tons/Yr.)	LEAVING (Tons/Yr.)	11. POLLUTANTS EMITTED	MATERIAL	RATE OF EMISSIONS (Tons/Yr.)	METHOD USED TO DETERMINE EMISSIONS
						a = 54.339		
						b = 69.67	124.009	
						124.009	tons/yr	
						bbl		
						4000/day		

<b>12. STORAGE AND PROCESS TANK INFORMATION</b>	CAPACITY (Gallons) 1,191,498	MATERIAL BEING STORED Gasoline	TYPE OF COVER <input type="checkbox"/> NONE <input checked="" type="checkbox"/> FLOATING ROOF	<input type="checkbox"/> CLOSED WITH VENT TO ATMOSPHERE <input checked="" type="checkbox"/> OTHER (Specify) Closed with a vapor connection	<input type="checkbox"/> CLOSED WITH VAPOR RECOVERY SYSTEM	STORAGE TEMPERATURE: Summer 60°-80°F Winter 20°-40°F
---	---------------------------------	-----------------------------------	--	--	--	--

<b>13. EQUIPMENT INFORMATION</b>	EXHAUST GAS FLOW RATE (ACFM):	MAXIMUM _____ NORMAL _____	DATE STARTED UP _____	Breaching Gas Temp. (°F): _____	No. of IDENTICAL UNITS _____	OPERATING HOURS: _____	HOURS/DAY _____ HOURS/YR. _____
<b>14. STACK INFORMATION</b>	STACK EXIT DIRECTION <input type="checkbox"/> HORIZ. <input type="checkbox"/> VERT.	STACK EXIT DIMENSIONS I.D. _____ in. OR _____ in. X _____ in.	STACK HEIGHT (Feet) _____	IS STACK EQUIPPED WITH RAIN HAT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
	SMOKE INDICATOR IN STACK <input type="checkbox"/> YES <input type="checkbox"/> NO	MAKE AND MODEL NO. _____	STACK LINING <input type="checkbox"/> METAL <input type="checkbox"/> REFRACTORY <input type="checkbox"/> OTHER (Specify) _____				

<b>15. STACK LOCATION</b>	Name of nearest intersecting street: _____	Distance to stack from intersection: _____ FT.	DIRECTION TO STACK: (Circle one) N, NE, E, SE, S, SW, W, NW
---------------------------	--	--	---

<b>16. CERTIFICATION</b>	I certify that I have examined the above information and that to the best of my knowledge it is true and complete. (Signature subjects signer to provisions of the General Statutes regarding false and misleading statements).	SIGNED <i>R. M. Wood</i>	TITLE Manager Environmental Protection	DATE 6/27/73
--------------------------	---	-----------------------------	---	-----------------

MAIN FILE