

**REGISTRATION CERTIFICATE**  
EPAC-10 REV. 7-73



STATE OF CONNECTICUT  
**DEPARTMENT OF ENVIRONMENTAL PROTECTION**



STACK NO. 01041002403

EQUIPMENT CLASSIFICATION				REGISTRATION NO.
<input checked="" type="checkbox"/> FUEL BURNING	<input type="checkbox"/> INCINERATOR	<input type="checkbox"/> PROCESS MFG.	<input type="checkbox"/> AIR POLLUTION CONTROL	01040100
FIRM NAME				DATE ISSUED
HELCO				12/05/73
LOCATION OF EQUIPMENT (No. & Street, Town, Zip)				
RIVER ROAD		MIDDLETOWN CT 06457		
COMMISSIONER OR HIS REPRESENTATIVE				

DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

1. APPLICATION NO. 5A-P03	2. STACK NO. 3
------------------------------	-------------------

3. FIRM Northeast Utilities	LEGAL NAME	BUSINESS ADDRESS (No. & Street, City, Zip Code) P. O. Box 270, Hartford, Conn. 06101	PHONE 666-6911
4. DIVISION The Hartford Electric Light Company		P. O. Box 2370, Hartford, Conn. 06101	249-5711
5. APPLICANT Henry A. Darius, Assistant Secretary		P. O. Box 270, Hartford, Conn. 06101	666-6911
6. INSTALLATION		River Road, Middletown, Conn. 06457	346-9639
7. EQUIPMENT BEING REGISTERED	TYPE OF EQUIPMENT (e.g., Boiler) Steam boiler for electric power generation	AIR POLLUTION CONTROL EQUIPMENT USED (If "Yes," file form EP-7) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

8. MAJOR ACTIVITY OF FIRM

MFG.  
 OFFICE  
 RETAIL OR WHLSE. STORE  
 SCHOOL OR CHURCH  
 HOTEL/MOTEL  
 HOSPITAL OR LAB.  
 WAREHOUSE  
 RESIDENCE OR APTS.  
 OTHER Public utility (Specify) holding company

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	
<input type="checkbox"/>	COAL	Bituminous	%	%									
		Anthracite	%	%									
	<input checked="" type="checkbox"/>	OIL	Kerosene	%	%								
			2	%	%								
			4	%	%								
			5	%	%	91,483,056							
	6	x 0.98	%	0.05	96,467,000	14,084	2,014,000,000				Hess Oil and Chemical Division Amerada Hess Corp.		
	NAT. GAS				90,688,000	1977					Woodbridge, N. J.		

10. BURNER EQUIPMENT

ARE OIL HEATERS USED?  YES  NO

OIL TEMPERATURE BEFORE INJECTION: 130 °F

BURNER MANUFACTURER: Babcock & Wilcox

BURNER MODEL No.: 25109-BC (Tip)

11. TYPE OF COAL BURNER

HAND FIRED  
 UNDERFEED STOKER  
 TRAVELING GRATE  
 CHAIN GRATE  
 SPREADER STOKER  
 STOKER WITH GAS REINJECTION  
 CYCLONE FURNACE  
 PULVERIZED COAL  
 OTHER (Specify) None

12. TYPE OF OIL BURNER

PRESSURE OR GUN  
 ROTARY CUP  
 STEAM ATOMIZER  
 AIR ATOMIZER  
 TANGENTIALLY FIRED  
 OTHER (Specify)

13. COMBUSTION

OVERFIRE AIR CONTROL:  YES  NO

TYPE:  TIME SWITCHED  SMOKE INDICATOR  MANUAL  OTHER (Specify) Automatic

TYPE OF DRAFT:  FORCED  INDUCED  NATURAL

14. POLLUTANTS EMITTED	MATERIAL	RATE OF EMISSIONS (Tons/Yr.)	METHOD USED TO DETERMINE EMISSIONS	15. EQUIPMENT INFORMATION	BREACHING GAS TEMPERATURE (°F)	No. OF IDENTICAL UNITS
	Particulates	386	HEW list of emission factors		298	1
	Oxides of sulfur	7,534	" " " " " "		DATE SOURCE STARTED UP	
	Carbon monoxide	2	" " " " " "		December 1964	
	Hydrocarbons	154	" " " " " "		EXHAUST GAS FLOW RATE (ACFM):	NORMAL: 415,000 MAXIMUM: 594,000
Oxides of Nitrogen	4,953	Source test of similar unit	OPERATING HOURS:	HOURS PER DAY: 24 HOURS PER YEAR: 7,468		

16. STACK INFORMATION

STACK EXIT DIRECTION:  HORIZ.  VERT.

STACK EXIT DIMENSIONS: I.D. 144 in. OR in. X in.

STACK HEIGHT (Feet): 266

IS STACK EQUIPPED WITH RAIN HAT?  YES  NO

SMOKE INDICATOR IN STACK:  YES  NO

MAKE AND MODEL NO. Installed in breeching: Bailey Photocell UL-5000-A UB-5010-A

STACK LINING:  METAL  REFRACTORY  OTHER (Specify)

17. STACK LOCATION

Name of nearest intersecting street: Silvermine Road

Distance to stack from intersection: 11,500 FT.

DIRECTION TO STACK: (Circle one) N, NE, (E), SE, S, SW, W, NW

18. CERTIFICATION

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: Henry A. Darius

TITLE: Assistant Secretary

DATE: 9/29/72

MAIN FILE

**PLEASE DO NOT WRITE IN THIS SPACE**

DATE RCV'D FROM APPLICANT: \_\_\_\_\_

DATE REVIEWED: \_\_\_\_\_ BY \_\_\_\_\_

DATE COPY SENT TO LOCAL AGENCY: \_\_\_\_\_ BY \_\_\_\_\_

REGISTRATION NUMBER 0100

PREMISE NO. 024

STACK NO. -03

STATE GRID CO-ORDINATES  
 X. 646700  
 Y. 262800 263,000 Z=25!

REGISTRATION CARD SENT \_\_\_\_\_ STORED ON COMPUTER \_\_\_\_\_

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ BY: \_\_\_\_/\_\_\_\_/\_\_\_\_

**EMERGENCY STANDBY PLANS**

PLAN REQUIRED  YES  NO

DATE PLAN - MANUAL SENT TO APPLICANT: \_\_\_\_/\_\_\_\_/\_\_\_\_ BY \_\_\_\_\_

DATE FORM RETURNED: \_\_\_\_/\_\_\_\_/\_\_\_\_ BY \_\_\_\_\_

DATE PLAN APPROVED: \_\_\_\_/\_\_\_\_/\_\_\_\_ BY \_\_\_\_\_

MAP NO. 49 X \_\_\_\_\_ KM Y \_\_\_\_\_ KM **(B)**

AOCR NO. 93

NEDS: COUNTY NO. 0565 TOWN NO. 104

SIC NO. \_\_\_\_\_

PROCESS CODE NO. \_\_\_\_\_

SCC I.D. \_\_\_\_\_ U.C.M. \_\_\_\_\_

	NO.	Description
Primary		
Secondary		

**CODED**