

REGISTRATION CERTIFICATE
EPAC-10 REV. 7-73



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION



STACK NO. 01171012014

EQUIPMENT CLASSIFICATION				REGISTRATION NO.
<input type="checkbox"/> FUEL BURNING	<input type="checkbox"/> INCINERATOR	<input checked="" type="checkbox"/> PROCESS MFG.	<input type="checkbox"/> AIR POLLUTION CONTROL	01170443
FIRM NAME				DATE ISSUED
NEW HAVEN TERMINAL				12/05/73
LOCATION OF EQUIPMENT (No. & Street, Town, Zip)				
30 WATERFRONT ST		NEW HAVEN CT 06509		
COMMISSIONER OR HIS REPRESENTATIVE				

DEPARTMENT OF ENVIRONMENTAL PROTECTION

PROCESS AND MANUFACTURING EQUIPMENT REGISTRATION

EP-6 NEW 5-72

STATE OF CONNECTICUT

1. APPLICATION NO. 19 Rev.A	2. STACK NO.
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TO: Department of Environmental Protection, Air Compliance Section, State Office Bldg., Hartford, Conn. 06115. Tel. 566-2690

3. FIRM	LEGAL NAME NEW HAVEN TERMINAL, INC.	BUSINESS ADDRESS (No. & Street, City or Town) 30 WATERFRONT ST., NEW HAVEN, CT.	ZIP CODE 06511	PHONE 469-1391
4. DIVISION				
5. APPLICANT	Henry A. St. Laurent			
6. INSTALLATION				
7. EQUIPMENT BEING REGISTERED	TYPE OF EQUIPMENT (e.g., storage tank)	AIR POLLUTION CONTROL EQUIPMENT USED (if "YES," file form EP-7) <input 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 (Specify)

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"/> OIL	Kerosene	2	. %	. %									
		4	. %	. %									
		5	. %	. %									
		6	. %	. %									
<input type="checkbox"/> NAT. GAS													
<input type="checkbox"/> OTHER													

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	

12. STORAGE AND PROCESS TANK INFORMATION

CAPACITY (Gallons) **1000**

MATERIAL BEING STORED **VINYL ACETATE**

TYPE OF COVER: NONE FLOATING ROOF

CLOSED WITH VENT TO ATMOSPHERE OTHER (Specify)

CLOSED WITH VAPOR RECOVERY SYSTEM

STORAGE TEMPERATURE: _____ °F

13. EQUIPMENT INFORMATION

EXHAUST GAS FLOW RATE (ACFM):

MAXIMUM _____ NORMAL _____

DATE STARTED UP _____ Breaching Gas Temp. (°F): _____ No. OF IDENTICAL UNITS _____

OPERATING HOURS: _____ HOURS/DAY _____ HOURS/YR. _____

14. STACK INFORMATION

STACK EXIT DIRECTION: HORIZ. VERT.

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

SMOKE INDICATOR IN STACK: YES NO MAKE AND MODEL NO. _____

STACK HEIGHT (Feet) _____ IS STACK EQUIPPED WITH RAIN HAT? YES NO

STACK LINING: METAL REFRACTORY OTHER (Specify)

15. STACK LOCATION

Name of nearest intersecting street: _____

Distance to stack from intersection: _____ FT.

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

16. 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: *Bill W. McCandless* TITLE: *Op Eng* DATE: *1/1/74*

MAIN FILE

