

REGISTRATION CERTIFICATE
EPAC-10 REV. 7-73



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION



STACK NO. 00981001501

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
FIRM NAME UNIVERSITY OF CONN. PHYSICAL PLANT			DATE ISSUED 12/19/74
LOCATION OF EQUIPMENT (No. & Street, Town, Zip) U-38 STORRS, CONN. 06268			
COMMISSIONER OR HIS REPRESENTATIVE			

DEPARTMENT OF ENVIRONMENTAL PROTECTION

FUEL BURNING EQUIPMENT REGISTRATION

STATE OF CONNECTICUT

EP-4 NEW 5-72

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

1. APPLICATION NO. 1	2. STACK NO. N.E.
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3. FIRM University of Connecticut	LEGAL NAME	BUSINESS ADDRESS (No. & Street, City, Zip Code) U-38 Storrs, Connecticut 06268	PHONE 486-3064
4. DIVISION Physical Plant			
5. APPLICANT University Chief of Utilities			
6. INSTALLATION			
7. EQUIPMENT BEING REGISTERED Boiler	TYPE OF EQUIPMENT (e.g., Boiler)	AIR POLLUTION CONTROL EQUIPMENT USED (If "Yes," file form EP-7) <input type="checkbox"/> YES <input checked="" 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
OIL <input checked="" type="checkbox"/>	COAL <input type="checkbox"/>	Bituminous	. %	. %								
		Anthracite	. %	. %								
	OIL <input checked="" type="checkbox"/>	Kerosene	. %	. %								
		2	. %	. %	275,000	575						
		4	X 0.05 %	. %	SEE	660 GALS/HR	SEE ATTACHED					SEE ATTACHED
		5	. %	. %								
6	X 0.05 %	. %	ATTACHED	660 GALS/HR								
NAT. GAS <input type="checkbox"/>												
OTHER <input type="checkbox"/>												

10. BURNER EQUIPMENT

ARE OIL HEATERS USED? YES NO

OIL TEMPERATURE BEFORE INJECTION: **varies with oil used** °F

BURNER MANUFACTURER: **Peabody Engineering Corporation**

BURNER MODEL No.: **ABSA**

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)

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 OF DRAFT: FORCED INDUCED NATURAL

TIME SWITCHED
 SMOKE INDICATOR
 MANUAL
 OTHER (Specify)

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
					approx.	350° F	
	SEE ATTACHED						3
					DATE SOURCE STARTED UP		
					1960 - 1963 - 1967		
					EXHAUST GAS FLOW RATE (ACFM):	SEE ATTACHED	154,212
					OPERATING HOURS:	SEE ATTACHED	

16. STACK INFORMATION

STACK EXIT DIRECTION: HORIZ. VERT.

STACK EXIT DIMENSIONS: I.D. **7' 0"** in. OR _____ in. X _____ in.

STACK HEIGHT (Feet): **153' 6"**

IS STACK EQUIPPED WITH RAIN HAT? YES NO

SMOKE INDICATOR IN STACK: YES NO

MAKE AND MODEL NO.: **SEE ATTACHED**

STACK LINING: METAL REFRACTORY OTHER (Specify)

17. STACK LOCATION

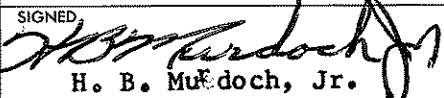
Name of nearest intersecting street: **Hillside and Glenbrook Roads**

Distance to stack from intersection: **850** 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: 
H. B. Murdoch, Jr.

TITLE: **University Chief of Utilities**

DATE: **12/12/74**

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

018-014, 015, 016

PREMISE NO.

098-015

STACK NO.

01

STATE GRID CO-ORDINATES

X 735000

Y 355900

Z = 600

REGISTRATION CARD SENT

STORED ON COMPUTER

DATE / /

BY

BY

EMERGENCY STANDBY PLANS

PLAN REQUIRED

YES

NO

DATE PLAN - MANUAL SENT TO APPLICANT / /

BY

DATE FORM RETURNED / /

BY

DATE PLAN APPROVED / /

1991 - 1991 - 0301

UNIVERSITY OF

UNIVERSITY OF