

SAN DIEGO AIR POLLUTION CONTROL DISTRICT

SUPPLEMENTAL APPLICATION INFORMATION
FEE SCHEDULE 11A

San Diego APCD Use Only
Appl. No.:
ID No.:

TIRE BUFFERS

1 **COMPANY NAME:(DBA)** _____

2 **ADDRESS:** _____

3 **A. EQUIPMENT DESCRIPTION**

4 Buffer Manufacturer: _____ Model: _____

5 S/N: _____ Horse Power: _____

6 Method of Tread Removal: Rasp Band Saw
7 Knife Other (Specify) _____

8 Is the Rasp or other device cooled with water? Yes No

9 If tread is cut off, is the surface then dressed with a burring wheel: Yes No

10 Is the burring wheel cooled with water? Yes No

11 **B. AIR POLLUTION CONTROL SYSTEMS**

12 Does the hood adequately surround the rasp or other cutting surface to prevent escape of smoke and dust emissions?
13 Yes No Air flow rate for hood _____ cubic ft/min.

14 Is there a floor sweep? Yes No What is the floor sweep airflow rate? _____ cubic ft/min.

15 Cyclone Manufacturer: _____ Model: _____

16 Diameter _____ ft. Length _____ ft Number of cyclones _____ Total air flow _____ cfm.

17 Is there a water spray at the cyclone inlet? Yes No

18 Filter System Manufacturer: _____ Model: _____

19 S/N: _____ Number of filter elements _____

20 Filter Element Dimensions: Length _____ inches Diameter _____ inches

21 Elements are: cartridges bags Other (specify) _____

22 Filter Element Manufacturer _____ Model: _____ or

23 Part Number _____ Rated Filter Efficiency _____ % at _____ micron particle size.

Please include a specification sheet for filters.

24 Is there a differential pressure gauge connected across the filters? Yes No

25 Rubber dust storage hopper Mfr: _____ Model: _____

26 Dimensions: _____ ft long x _____ ft wide x _____ ft high

27 Is the transfer from the storage hopper outlet to the receiving container through a sealed transfer system?

28 Yes No

29 Is there an additional final filter system? Yes No

30 Manufacturer: _____ Model: _____

31 Filter efficiency _____% at _____ micron particle size

Please include specification sheets for the final filter system.

32 Afterburner for smoke control: Yes No

33 Manufacturer: _____ Model: _____

Please include a specification sheet for the afterburner.

34 **C. OPERATING SCHEDULE**

Operation	Hrs/Day	Days/Wk	Wks/Yr
Average			
Maximum			

35 **D. PRODUCTION RATE**

Size	Tires/Hr	Tires/Wk	Tires/Yr
Small			
Medium			
Truck			
Heavy Equipment			

36 **E. EMISSION DATA**

37 **WEIGHT OF MATERIAL COLLECTED BY THE CYCLONE**

Dust/Rubber	Lbs/Hr	Lbs/Day	Lbs/Yr
Average			
Maximum			

38 **WEIGHT OF MATERIAL COLLECTED BY THE FILTER SYSTEM**

Dust	Lbs/Hr	Lbs/Day	Lbs/Yr
Average			
Maximum			

39 **Name of Preparer:** _____ **Title:** _____

40 **Phone Number:** (____) _____ **Date:** _____

NOTE TO APPLICANT:

Before acting on an application for Authority to Construct or Permit to Operate, the District may require further information, plans, or specifications. Forms with insufficient information may be returned to the applicant for completion, which will cause a delay in application processing and may increase processing fees. The applicant should correspond with equipment and material manufacturers to obtain the information requested on this supplemental form.