

San Diego APCD  
Emissions Inventory Request Form Instructions

**WASTE WATER TREATMENT PLANT ODOR CONTROL SYSTEMS**

Please refer to the general instructions for guidance regarding the following sections: Reporting Year, Facility Identification, Permit Information, Device Information, Stack / Ducted Emissions and Fugitive Release Emissions.

**MATERIAL/ PROCESS INFORMATION**

Fill in all the data fields. Complete all blanks using the specified units and answer yes or no where requested. Use a separate form to report each Site Equipment ID. Copy the blank form as needed to report each Site Equipment ID. On forms with pre-printed process information from a previously submitted inventory, asterisks (\*) highlight data fields that must be updated.

**Site Equipment ID:** Provide the odor control equipment identification number.

**Max. Odor System Flowrate (scfm):** Report the maximum flowrate through the odor control system in standard cubic feet per minute.

**Avg. Odor System Flowrate (scfm):** Report the average flowrate through the odor control system in standard cubic feet per minute.

**Equipped With:** Answer "yes or no" to each of the control process types listed and describe any other odor control systems in use.

**Treatment Plant Information:** These items refer to the treatment plant only, apart from the odor control system.

**Device Operating Schedule:**

**Daily Operation (hours/day):** Report the average amount of hours the device operates in a typical day.

**Weekly Operation (days/week):** Report the average number of days the device operates in a typical week.

**Annual Operation (days/year):** Report the number of days the device operated during the Reporting Year.

**POLLUTANT NAME (lbs/million gallons thru put)**

If available, provide site specific emission factors in units of pounds released per million gallons of throughput with supporting documentation. Default emission factors will be used to estimate emissions where site-specific information is not available or not documented.

San Diego APCD  
Emissions Inventory Request Form  
WASTEWATER PROCESSING

REPORTING YEAR:

EIF ID : SITE RECORD ID :
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PERMIT INFORMATION :

DEVICE INFORMATION :

STACK (DUCTED EMISSIONS)
Diameter (ft): Exhaust Gas Temperature (F): Exhaust Gas Flowrate (CFM): Height Above Ground (ft): Control Device Description: Capture Efficiency (%): Volatile Control Efficiency (%): Non-Volatile Control Efficiency (%):

RELEASE (FUGITIVE EMISSIONS)
Emission Control Method: Volatile Control Efficiency (%): Non-Volatile Control Efficiency (%): Additional Information: Capture Efficiency (%):

MATERIAL/PROCESS INFORMATION
Process Description: Avg. Wastewater Thru-put (mgd): Max. Wastewater Thru-put (mgd): Equipped With: - Covers (yes/no): - Ferric Chloride Injection (yes/no): - H2O2 Injection (yes/no): - Caustic Scrubber (yes/no): - Activated Carbon (yes/no): - Biofilter (yes/no): - Other (describe): Device Operating Schedule: - Daily Operation (hours/day): - Weekly Operation (days/week): - Annual Operation (days/year):

POLLUTANT NAME	lbs pollutant/million gal thru-put

EIF ID: , SITE RECORD ID: , PERMIT: , DEVICE:

Prepared By: \_\_\_\_\_

Date: \_\_\_\_\_