1. Enter the control device identification label (e.g. Paintline Incinerator, #1 Fume Incinerator, FI-1, etc.)
2. Enter the processes and/ or devices controlled by this unit. May use ID labels or descriptions.
3. Enter the year the control device was, or will be installed.
4. Enter the manufacturer and model number of the control device.
5. Enter the rated control efficiency, in percent, by pollutant for the control device.
6. Specify the type of fume incinerator (e.g. thermal oxidizer, catalytic oxidizer, etc.)
7. Enter the design temperature (°F) of the combustion chamber. This should be the temperature at the *exit* of the combustion chamber. This should correspond to the residence time provided in item 8 below.
8. Enter the design residence time for which gases will be held at a minimum of the temperature level presented in item 7. Attach a schematic showing the dimensions of the combustion chamber and the calculations used to determine the residence time.
9. Enter the design inlet gas flow rate (actual cubic feet per minute).
10. Describe/List any inlet gas pretreatment systems/devices. If the pretreatment systems are separate control devices, complete the appropriate control device description form for each device.
11. Enter the type of fuels used in the incinerator (e.g., natural gas, propane, distillate, etc.).
12. Enter the maximum amount of fuel to be used in any one hour and the units (e.g., cubic feet, gallons, pounds, therms, etc.).
13. Enter the projected maximum amount of fuel to be used in any one year during the permit term and the units (e.g., cubic feet, gallons, pounds, therms, etc.).

FUME INCINERATOR **AQ306**
CONTROL DEVICE INFORMATION **ANSWER SHEET**

Facility Name: _____ Permit Number: _____

1.	Control Device ID			
2.	Process/Device(s) Controlled			
3.	Year installed			
4.	Manufacturer/Model No.			
5.	Control Efficiency(%)			
6.	Type of incinerator			
7.	Design temperature (ºF)			
8.	Design residence time (sec.)			
9.	Design inlet gas flow rate (acfm)			
10.	Inlet gas pretreatment? (yes/no) If yes, list control device ID and complete a separate control device form			
11.	Fuel type			
12.	Design maximum hourly amount (specify units)			
13.	Projected maximum annual amount (specify units)			