LRAPA
Lane Regional Air Protection Agency

AQGP-R012

ANNUAL REPORTING FORM FOR: CREMATORY INCINERATORS

1. Source Number: _____ 2. Reporting period: (calendar year): _____

3. Company information:

Legal Name:	Other Company Name (if different than legal name):
Mailing Address:	Site Address (if different than mailing address):
City, State, Zip Code:	City, County, Zip Code:

4. Site Contact Person:

Name:	Telephone number:
Title:	E-mail:

5. Number of Crematory Incinerators on site: _____

6. Annual Production Data for Each Unit (If necessary, attach a separate page):

Unit Name/ID	Hours Operated	Tons of Material Cremated

7. Report the amount of natural gas, propane, or butane burned during the calendar year (specify units – million cubic feet, therms, and/or 1000 gallons):
   Fuel type 1:_____
   Fuel type 2:_____

8. Records of all planned and unplanned excess emissions: (If necessary, attach a separate page or write the information on the back of this form.)

Date	Time	Duration (hours)	Description of excess emissions	Corrective action

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9. List any air quality/nuisance complaints received within the last calendar year? How were the complaints addressed? (If necessary, attach a separate page or write the information on the back of this form.)

Date	Time	Complaint	Response

10. List permanent changes made in plant process, production levels, and pollution control equipment that affected air contaminant emissions: (If necessary, attach a separate page or write the information on the back of this form.)

11. List major maintenance performed on pollution control equipment: (If necessary, attach a separate page or write the information on the back of this form.)

12. By signing below, I hereby certify that I have personally examined and am familiar with the information submitted in this report and that the information contained in this report is true, accurate and complete to the best of my knowledge and belief.

Name of official (Printed or Typed):	Title of official and phone number:
Signature of official:	Date:

SUBMISSION INSTRUCTIONS:

Email this completed form to the Environmental Coordinator at **permitting@lrapa-or.gov**

Call (541) 736-1056 with any questions.