



**OAQ CONTROL EQUIPMENT APPLICATION**  
**CE-03: Particulate Control – Cyclone**  
 State Form 52620 (R / 1-10)  
**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

**IDEM – Office of Air Quality – Permits Branch**  
 100 N. Senate Avenue, MC 61-53 Room 1003  
 Indianapolis, IN 46204-2251  
 Telephone: (317) 233-0178 or  
 Toll Free: 1-800-451-6027 x30178 (within Indiana)  
 Facsimile Number: (317) 232-6749  
 www.IN.gov/idem

NOTES:

- The purpose of CE-03 is to identify all the parameters that describe the cyclone. This is a required form.
- Complete this form once for each cyclone (or once for each set of identical cyclones).
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for any one to inspect and photocopy.

**PART A: Identification and Description of Control Equipment**

Part A identifies the particulate control device and describes its physical properties.

1. **Control Equipment ID:** \_\_\_\_\_

2. **Installation Date:** \_\_\_\_\_

3. **Number of Tubes:** \_\_\_\_\_ For multiple tubes:  Parallel  Series

4. **Is an Alarm / Detector installed on this device? If yes, describe the alarm or detector system.**  Yes  No

**PART B: Operational Parameters**

Part B provides the operational parameters of the control device and the pollutant laden gas stream. Appropriate units must be included if the standard units are not used.

	A. Units	B. Inlet	C. Outlet	D. Differential
5. <b>Gas Stream Flow Rate</b>	ACFM			
6. <b>Gas Stream Temperature</b>	°F			
7. <b>Gas Stream Pressure</b>	inches of water			to
8. <b>Moisture Content</b>	%			
9. <b>Average Particle Size Range</b>	micrometers			to
10. <b>Other (specify):</b>				

**PART C: Pollutant Concentrations**

Part C provides the pollutant concentrations of the pollutant laden gas stream.

	11. Units	12. Inlet	13. Outlet	14. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Hazardous Air Pollutant (HAP) (specify):					
<input type="checkbox"/> b. Particulate Matter (PM)					
<input type="checkbox"/> c. Particulate Matter less than 10µm (PM <sub>10</sub> )					
<input type="checkbox"/> d. Particulate Matter less than 2.5µm (PM <sub>2.5</sub> )					
<input type="checkbox"/> e. Other Pollutant (specify):					

**PART D: Monitoring, Record Keeping, & Testing Procedures**

Part D identifies any existing or proposed monitoring, record keeping, & testing procedures that may need to be included in the permit.

<b>15. Item(s) Monitored:</b>				
<b>16. Monitoring Frequency:</b>				
<b>17. Item(s) Recorded:</b>				
<b>18. Record Keeping Frequency:</b>				
<b>19. Pollutant(s) Tested:</b>				
<b>20. Test Method(s):</b>				
<b>21. Testing Frequency:</b>				

**PART E: Preventive Maintenance Plan**

Part E verifies that a complete Preventive Maintenance Plan (PMP) has been prepared for the control device, if applicable. Use this table as a checklist to ensure that the PMP is complete.

**22. Do you have a Preventive Maintenance Plan (PMP)?**

No PMP is needed.       Yes – the following items are identified on the PMP:

**A.** Identification of the individual(s) responsible for inspecting, maintaining and repairing emission control devices.

**B.** Description of the items or conditions that will be inspected.

**C.** Schedule for inspection of items or conditions described above.

**D.** Identification and quantification of the replacement parts that will be maintained in inventory for quick replacement.

**PART F: Determination of Integral Control**

Part F provides explanation to determine whether the control device should be considered integral to the process.

**23. Has IDEM already made an integral control determination for this device?**

*If "Yes", provide the following:*

No       Yes

**Permit Number:**

**Issuance Date:**

**Determination:**

Integral       Not Integral

**24. Is this device integral to the process?**

*If "Yes", provide the reason(s) why the device is integral.*

No       Yes