



**TITLE V PERMIT APPLICATION  
 STATIONARY GAS TURBINE OR INTERNAL COMBUSTION ENGINE**

**GENERAL IDENTIFICATION AND DESCRIPTION**

1. **Facility name:**
2. **Stack ID or flow diagram point identification (s):**

**GAS TURBINE OR INTERNAL COMBUSTION ENGINE DESCRIPTION**

3. List all gas turbines and internal combustion engines at this facility on a separate sheet, and please complete an APC 5 form for each piece of equipment.
4. Manufacturer and model number:
5. Equipment description:
6. Date of installation or last modification of equipment:

<p>7. Rated heat input capacity (in million BTU/Hour) and rated horsepower:</p> <p>_____</p> <p>State which heating value was utilized:</p> <p>_____ Higher heating value</p> <p>_____ Lower heating value</p>	<p>8. If equipment is a gas turbine, list type:</p> <p>_____ Simple cycle</p> <p>_____ Regenerative cycle</p> <p>_____ Combined cycle</p>
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9. Location of this fuel burning installation in UTM coordinates: UTM Vertical: \_\_\_\_\_ UTM Horizontal: \_\_\_\_\_

10. Normal operating schedule: \_\_\_\_\_ Hrs./Day \_\_\_\_\_ Days/Wk \_\_\_\_\_ Days/Yr.

**FUEL DESCRIPTION**

11. Fuels:	Primary fuel	Backup fuel #1	Backup fuel #2	Backup fuel #3
Fuel name				
Actual yearly consumption				

12. (For NSPS turbines only) Manufacturer's rated heat rate at manufacturer's rated peak load (kilojoules per watt hour), or actual measured heat rate based on lower heating value of fuel as measured at actual peak load for the unit:

13. Page number: \_\_\_\_\_ Revision Number: \_\_\_\_\_ Date of Revision: \_\_\_\_\_