



air pollution control district  
SANTA BARBARA COUNTY

## Prime Diesel Engine Form 200-3 Oil and Gas Equipment

Santa Barbara County Air Pollution Control District  
260 N. San Antonio Road, Suite A  
Santa Barbara, CA 93110-1315

Submit this supplemental equipment form attached to the **Oil and Gas Production Facility Form-200** to permit **Prime Diesel Engines** rated at **50 horsepower or greater** that are part of the project. Submit one application per engine. Include manufacturer specifications and EPA certification for the engine model year as an attachment to this form.

Device Name	
Facility Name	

### I. Prime Diesel Engine Information

Operator ID (component ID)	
Manufacturer	
Model	
Serial Number	

Brake Horsepower		bhp	Has the unit been Derated	<input type="radio"/> No	<input type="radio"/> Yes
Model Year			If yes, what is the original bhp		bhp
EPA Engine Family			Primary Fuel Type		
ARB Certification Ex. Order			If Fuel Type is "other", explain		
Engine Tier			Induction Type		
Engine Classification	<input type="radio"/> Stationary	<input type="radio"/> Portable	BSFC (brake specific fuel consumption)		

Is the Engine "stacked"	<input type="radio"/> No	<input type="radio"/> Yes
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### II. Hour Meter Information

Hour Meter Type	
Hour Meter Manufacturer (If not integral)	
Hour Meter Model (If not integral)	
Hour Meter Serial Number (If not integral)	

### III. Emission Control - Selective Catalytic Reduction (fill out if applicable and attach specs)

Manufacturer		Model	
Serial Number			
ARB Executive Order			

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<b>IV. Emission Control - Oxidation Catalyst</b> (fill out if applicable and attach specs)			
Manufacturer		Model	
Serial Number			
ARB Executive Order			
Manufacturer Estimate Lifetime			

<b>V. Manufacturer's Not-to-Exceed Emission Factors</b>		
Pollutant	Emission Factor	Units
NOx		g/bhp-hr
PM		g/bhp-hr
CO		g/bhp-hr
ROC		g/bhp-hr

<b>VI. Hours of Operation</b>	
Daily	
Annual	

<b>VII. Health Risk Modeling Information</b>
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Receptor Distances : Application cannot be deemed completed without passing a health risk evaluation. Please fill in information below completely.

Distance from engine to nearest residential receptor		ft			
Distance from engine to nearest worker receptor*		ft			
Distance to nearest school grounds		ft			
Distance from engine to nearest building		ft			
Building Width	ft	Building Height	ft	Building Length	ft

\*Nearest worker receptor includes any offsite worker receptors (business) or any onsite non-affiliated worker receptor who is not employed by or monetarily tied to the facility being evaluated.

☐ Yes   ☐ No   Is a site plan or map showing the location of the engine, stack exhaust point and relative distances of all nearby buildings attached to the form? Application cannot be deemed complete without a detailed site plan or map.

Stack Information

Stack Height from Ground	ft	Diameter of Stack Outlet	inches
Direction of Outlet (horz. or vert)		End of Stack (open or capped)	
Stack Exhaust Gas Temperature	°F	Exhaust Gas Flow Rate	scfm

☐ Yes   ☐ No   Will the manufacturer provided stack configuration and dimensions be modified in any way? If yes, attach a diagram showing the proposed stack configuration and relative dimensions.

<b>VIII. AB2588 Inventory</b>
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☐ Yes   ☐ No   Is the engine included in an existing AB2588 inventory?

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<b>IX. Fuel Meter</b>	
If a fuel meter serves this device, fill out Fuel Meter Form 200-18 and list the fuel meter name from Form 200-18 below.	
Fuel Meter Name	

<b>X. Diesel Particulate Filter (DPF)</b>	
If a Diesel Particulate Filter serves this engine, fill out DPF Form 200-19 and list the filter name from Form 200-19 below.	
Diesel Particulate Filter Name	

☐ Yes ☐ No    Is manufacturer specifications and EPA certification for this engine model year attached to the form?  
Application cannot be deemed complete without the attached information.

<b>XI. Device Description</b>	<b>XII. Location Note</b>