BAKE OVEN SUMMARY
(Also used for other Thermoset Processes)

1. Company / Agency: ____________________________________________________
   _____________________________________________________________________
   _____________________________________________________________________

2. Equipment location: ____________________________________________________
   _____________________________________________________________________

3. Type:  ______ Oven  ______ Other (describe) ____________________________
   ______ Batch    ______ Continuous Web    ____________________________Conveyor

4. Equipment Manufacturer, model and serial # : ____________________________
   _____________________________________________________________________

5. Approximate inside dimensions (show units) : _____ Width _____ Height _____ Depth

6. Electric Motor Information:
   Exhaust fan hp rating: ________________  Circulating fan hp rating: ______________
   Conveyor or web drive hp rating: ________  Air curtain fan hp rating: ______________
   Other (describe): ____________________
   Gross (overall) hp rating: ________________________________________________

7. Heating Method:  (Note: If applicable, specify primary & secondary)
   ________ Gas ________ Direct Burner Uses: ________ Fresh make-up air or
   ________ Oil ________ Indirect ________ Recirculated oven gases
   combined with make-up air
   Maximum Btu / hr rating: __________________________
   ________ Electricity ________ Resistance ________ Infrared  Max KW rating_______
   ________ Steam ________ Waste Heat
   Describe source of steam or waste heat: ________________________________

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8. Describe the parts and / or products heated: ________________________________

9. Indicate average and maximum production rate and seasonal fluctuations:

   ______________________________________________________________________

10. Specify the maximum temperature of the heater (show units): ________________

11. Specify the time between surface coating or dipping and heating (show units): ______

   ______________________________________________________________________

12. Identify the operating schedule in ________ hours / day and ________ days / year.

13. Has the surface coating material usage rates been reported by a form APCD-22?
    _____ Yes    _____ No.  (if No, complete a Form APCD-22)

14. COMPLETED BY: _____________________________  TITLE: ___________________
    (Please Print)

    DATE: ________________________________  PHONE: _________________________

    SIGNATURE: ____________________________________________________________________