



Diesel-Fired Primary Agricultural Engine Application Form -34A

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

Complete a separate APCD Form -34A for each prime engine along with an APCD Form -01 (*Permit Application – General*). Only one Form -01 is required. Only one Form -01 is required if multiple engines are being applied for at the same facility. Mail the completed form(s) and appropriate filing fees to the Air Pollution Control District (APCD) at the above address.

Applications for new (installed on or after January 1, 2005) engines must complete APCD Form -34P (prime engines) or APCD Form -34E (emergency/standby engines) instead of Form -34A.

Purpose of Application (check all that apply)

- Replacement of Existing Engine
- Add-On Controls Loss of Exemption
- Existing Engine Date of Installation: _____
- Other (describe): _____

PHYSICAL ADDRESS OF ENGINE					
Street Address or Nearest Cross Streets or Lease Name					
City:		State		Zip	

General Information (please fill in completely)

- Yes No Will this diesel engine be used in conjunction with another engine to provide power to the same equipment? (*example: two engines powering the same refrigeration compressor*) If yes, identify on a separate sheet of paper the specific engines, their ratings, and equipment served.
- Yes No Does this prime engine produce electricity near the place of use (i.e. Distributed Generation)?
- Yes No Is your project's property boundary located or proposed to be located within 1,000 feet from the outer boundary of a school? If yes, and the project results in an emissions increase, provide school name(s) and a completed APCD Form -03 (*School Summary Form*).

Distance from engine to your property boundary (ft): _____

Engine Information (Please fill in completely. Use a separate form for each engine)

ENGINE USE (check one)

- Electrical Power Fire Water Pump Mechanical Work Pumping Flood Water
- Pumping Sewage Runway Lights Water Distribution System
- Other (describe): _____

For APCD use only: FID #: _____ App. #: _____

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ENGINE DATA

Yes No Do you have the engine manufacturer's engine specification sheet? If so, please attach it to this application form. Manufacturer specification sheets must be submitted for new engines.

Manufacturer	
Model Name	
Year of Manufacture	
Model Year	
Maximum Rated Brake Horsepower (bhp)	
Serial Number	
EPA 12-Character Engine Family Name [†]	
ARB Engine Certification Executive Order [†]	
Owner/Operator ID for Engine (<i>if any</i>)	

[†]Only applicable to certified engines. Check engine nameplate or engine manufacturer.

Fuel Data

FUEL TYPE

- APCD Rule 311 Diesel (0.5% Sulfur) CARB Diesel (0.05% Sulfur)
- Jet Fuel Very Low Sulfur Diesel (15 ppm)
- Alternative Fuel (describe): _____
- Alternative Diesel Fuel (describe): _____
- Combination/Dual Fuel (specify): _____
- Other (specify): _____

FUEL PROPERTIES

Yes No If the type of fuel that will be used by this engine is identified with the word "diesel" in the Fuel Type section above, do you want the APCD to use the default fuel properties? If yes, continue to the "Engine Operations" section. If no, please identify the sulfur content, heating values, and fuel density below. Include a copy of a recent fuel analysis completed for the fuel that will be used:

Fuel Sulfur Content: _____ Weight % of Fuel

Fuel Heating Values: Higher "HHV" _____ (Btu/gal) Lower "LHV" _____ (Btu/gal)

Fuel Density - D_f: _____ (lb/gallon)

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Engine Operations

HOURLY METER TYPE

- Yes No Is the engine equipped with a 4-digit Non-Resettable Hour Meter?
- Yes No If the engine is equipped with a 4-digit Non-Resettable Hour Meter, is the meter integral to the engine? If no, then provide the following engine hour meter information:

Manufacturer	
Model Name	
Serial Number	

FUEL METER TYPE

All engines must be equipped with a system to continuously measure and monitor fuel usage. Provide the following information regarding the fuel use metering system that will be installed with the engine:

- Positive Displacement Turbine Fuel Tank

Volume Gauge:

- Venturi Orifice Plate/Differential Pressure

- Other (specify): _____

Fuel Meter Manufacturer	
Model Name	
Serial Number	
Metered Units & Range	
Sensitivity & Accuracy	
Calibration Frequency	

- Yes No Will this meter service multiple engines? If yes, identify the number of engines it will serve:

- Yes No Is the meter equipped with a total fuel use recorder? If yes, identify the type of recorder:

- Circular Chart Strip Chart Computer Data-Logger

Fuel Recorder Manufacturer	
Model Name	
Serial Number	

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Maximum Engine Operating Schedule

	HOURLY	DAILY	QUARTERLY	ANNUAL
HOURS OF OPERATION				
GALLONS FUEL USE				

Emission Control Data

EMISSION CONTROL TECHNOLOGY (check all that apply)

- Yes No Is the engine equipped with an exhaust after-treatment system (e.g., a particulate filter), or other modification to the engine to reduce exhaust emissions? If yes, please check the applicable left-hand boxes below, and provide information on all that apply and attach a copy of the manufacturers' literature:

	<u>MANUFACTURER</u>	<u>MODEL</u>
<input type="checkbox"/> Aftercooler	_____	_____
<input type="checkbox"/> Diesel Oxidation Catalyst (DOC)	_____	_____
<input type="checkbox"/> Diesel Particulate Filter (DPF)	_____	_____
<input type="checkbox"/> Injection Timing Retard	_____	_____
<input type="checkbox"/> Intercooler	_____	_____
<input type="checkbox"/> Selective Catalytic Reduction	_____	_____
<input type="checkbox"/> Turbocharger	_____	_____
<input type="checkbox"/> Other (describe):	_____	_____

DPF FILTER INFORMATION

- Yes No Will a Diesel Particulate Filter be used? If yes, identify the type of backpressure monitor that will be installed and attach a copy of the manufacturers' literature:

Manufacturer	
Model Name	
Mode	
High Back Pressure Limit Set-point	

Emission Factors

Emission factors form the basis for calculating the mass emissions from the engine. Please identify the basis for the emission factors identified below:

- Use the default USEPA Tier Standard for Compression Ignition Engines for this engine
- Off-Road engine certification data for the engine Manufacturer engine test data

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Source Test data (*Provide a copy of the source test results.*)

Other (specify): _____

	VALUE (in g/bhp-hr)
Nitrogen Oxides (NO _x as NO ₂)	
Reactive Organic Compounds (ROC)	
Carbon Monoxide (CO)	
Particulate Matter (PM)	

For new engines or add-on controls for in-use or new engines, the APCD requires that the manufacturer's written emissions documentation be provided. The engine manufacturer's documentation should address PM, NO_x, HC and CO and should be presented in units of g/bhp-hr. Control device manufacturer's emissions documentation should be in either units of g/bhp-hr or in percent mass removal efficiency.

Application Checklist (Have you submitted all the required information? Please check off the boxes)

- Form -01 (*Permit Application Form*) attach one Form-01 for all diesel engines within the same facility.
- Form -01A (*Authorized Agent Form*) attach if this application was prepared by and/or if correspondence is requested to be sent to an Agent Authorized (e.g., contractor or consultant). This form must accompany each Form -01 application.
- Form -03 (*School Summary Form*) attached (see page 2).
- Engine manufacturer specification sheet for new engines (*required*) and for in-use engines (*if available*).
- Emissions documentation from the manufacturer for new engines (*required*) and for in-use engines (*if available*).
- Emission Control Technology manufacturer specification sheets and emissions documentation (*as appropriate*).
- Fuel analysis documentation (*if APCD default is not selected*).
- Source test plans and/or source test reports (*as appropriate*).

Applicant/Preparer Statement

The person who prepares the application also must sign this form. The preparer may be an employee of the owner/operator or an authorized agent (contractor/consultant) working on behalf of the owner/operator (an *Authorized Agent Form -01A* is required).

I certify pursuant to H&SC Section 42303.5 that all information contained herein and information submitted with this application is true and correct.	
_____	_____
signature of application preparer	date
_____	_____
print name of application preparer	employer name

**PLEASE NOTE THAT FAILURE TO COMPLETELY PROVIDE ALL REQUIRED INFORMATION OR FEES WILL
RESULT IN YOUR APPLICATION BEING RETURNED OR DEEMED INCOMPLETE.**

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