



## Spark Ignited IC Engines Application Form -70

Santa Barbara County Air Pollution Control District  
260 N. San Antonio Road, Suite A  
Santa Barbara, CA 93110-1315  
TEL: (805) 961-8800 FAX: (805) 961-8801  
Email: [enqr@sbcapcd.org](mailto:enqr@sbcapcd.org) Web Site: [www.sbcapcd.org](http://www.sbcapcd.org)

*Application must be typewritten, computer generated, or hand printed in ink. Complete all pages of the application.*

This application form is for the permitting of spark ignited IC engines. For diesel IC engines see forms APCD-33 through APCD-37. Complete a separate APCD Form-70 for each engine along with APCD Form-01 (*Permit Application – General*). Only one Form-01 is required for multiple engines at the same facility. Reference our IC engine webpage for additional information and resources (<http://www.sbcapcd.org/eng/spice.htm>).

### 1. FACILITY NAME:

Facility **Street** Address \_\_\_\_\_

City, State ZIP: \_\_\_\_\_

Assessor Parcel Number(s)  
(APN) \_\_\_\_\_

### 2. PURPOSE OF APPLICATION:

New Unit       Loss of Permit Exemption       Derate Engine

Install Emission Controls on Existing Unit. *Existing Unit APCD Device ID No:* \_\_\_\_\_

Replace Existing Unit with a New Unit. *Existing Unit APCD Device ID No:* \_\_\_\_\_

Other (describe): \_\_\_\_\_

For derated engines, describe the method of derating and provide supporting data to verify the new rating (see the webpage for derating requirements).

### 3. EQUIPMENT THE ENGINE POWERS (check all that apply):

Oil Well Pump     Drilling Equipment     Injection Pump     Water Pump     Electrical Generator

Compressor     Firefighting     Flood Control

Other (describe): \_\_\_\_\_

Note: engines used exclusively for emergency electrical power generation, flood control, or firefighting are exempt from permit if they operate no more than 200 hours per year and records are kept per Rule 202.

### 4. EQUIPMENT DATA: Provide the rated brake horsepower from the unit's nameplate (see Rule 102 for definitions).

Daily and annual permit limits will be based on the maximum hourly fuel consumption of the unit and 24 hours per day and 365 days per year of operation, unless otherwise requested. Enclose a copy of the unit's data sheet.

Rated brake hp: \_\_\_\_\_ Fuel Consumption at rated brake hp (gal/hr or scf/hr): \_\_\_\_\_

Installation Date: \_\_\_\_\_ Model Year: \_\_\_\_\_

Mfgr: \_\_\_\_\_ Model: \_\_\_\_\_

Serial No: \_\_\_\_\_ Operator ID: \_\_\_\_\_

Displacement (liters): \_\_\_\_\_  Turbocharged     Intercooled/Aftercooled

*(District Use Only)*

| Date Received Stamp | APCD Application |            |
|---------------------|------------------|------------|
|                     | Facility Number: | Permit No. |
|                     | Facility Name:   |            |



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Use:  Stationary  Portable

Type:  4-Stroke  2-Stroke Manufacturer's Recommended Air-to-Fuel Ratio: \_\_\_\_\_

Is this a cyclically-loaded rich burn engine?  Yes  No

Fuel:  Utility Natural Gas  Produced Gas  Propane  Digester Gas  Gasoline

Other (describe): \_\_\_\_\_

Sulfur Content: \_\_\_\_\_ Units: ppmvd or % by weight (circle units) {data not required for utility gas or propane}

### 6. FUEL METERING:

**Fuel Meter.** A dedicated temperature and pressure corrected fuel meter is required. Gas utility company meters are generally not considered "dedicated" meters. A single meter that is connected to a combined grouping of units (i.e., stacked units) is considered dedicated. Submit a copy of the manufacturer's spec sheet for the specific make and model of the meter that will be used. The permittee must obtain District approval of each fuel meter prior to permit issuance.

Manufacturer: \_\_\_\_\_

Meter Shared for a grouping of Units?

Model: \_\_\_\_\_

Temperature & Pressure Corrected?

Type: \_\_\_\_\_

*examples:* positive displacement (diaphragm/bellows), rotary (Roots type), turbine, orifice, mass flow, ultrasonic flow.

**Hour Meter.** A dedicated hour meter or an electronic management system that is capable of tracking and logging the units time on/off is required. Submit a copy of the manufacturer's spec sheet for the specific make and model of the meter that will be used. The permittee must obtain District approval of the hour meter system prior to permit issuance.

### 7. EMISSION CONTROLS: Include manufacturer's literature with performance guarantee and maintenance/replacement recommendations.

Selective Catalytic Reduction (SCR)  Non-Selective Catalytic Reduction (NSCR)

For catalysts provide the following: Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_

Air/Fuel Ratio Controller  Other (describe): \_\_\_\_\_

### 8. EMISSION FACTORS: Provide the basis of emission factors (e.g. manufacturer's guarantee, default value) and attach supporting documentation.

|                           | NO <sub>x</sub> (as NO <sub>2</sub> ) | CO | ROC | PM <sub>10</sub> |
|---------------------------|---------------------------------------|----|-----|------------------|
| ppmv @ 15% O <sub>2</sub> |                                       |    |     |                  |
| g/bhp-hr                  |                                       |    |     |                  |
| Basis                     |                                       |    |     |                  |



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**9. SITE PLAN AND STACK DATA:** Attach a site plan showing the location of the engine on the property along with the locations of all buildings within 1,000 feet of the property. Note any sensitive receptors on the plan (schools, hospitals, etc.)

|   |   |
|---|---|
| Stack Height Above Ground: _____ feet   | Stack Diameter: _____ inches (inside diameter)  |
| Stack Height Above Building: _____ feet   | Exhaust Flow Rate: _____ cfm (cubic feet/minute)  |
| Exhaust Temperature: _____ °F   | Exhaust Velocity: _____ feet per minute   |
| Stack Orientation: <input type="checkbox"/> horizontal <input type="checkbox"/> vertical  | End of Stack: <input type="checkbox"/> rain cap <input type="checkbox"/> open or hinged rain flap |
| Does the stack stand alone or is it located on the building? <input type="checkbox"/> stands alone <input type="checkbox"/> on building |   |

**10. 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.*

COMPLETED BY: \_\_\_\_\_

COMPANY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**11. APPLICATION CHECKLIST:** Along with this Form -70, the following is required.

- Have you filled in all required fields on this form? If not, the application will likely be deemed incomplete. Complete application forms save you time and eliminate unwanted project delays.
- APCD Form -01 and filing fee. See also Section 12 of Form -01 for additional checklist items.
- Equipment data sheet including maximum rated horsepower, fuel consumption, and air-to-fuel ratio for the exact make and model of engine applied for.
- Gas analysis for produced or digester gas.
- Emissions control manufacturer documentation, including an emissions statement and/or guarantee.
- Data supporting the emissions factors.
- The site plan required in the Stack Data section.