1. Name of Company: (As shown on Line 1 of Form E001)

2. Name of Equipment Served by this Flare: (As shown on Line 10 of Form E001)

3. Process Data:
   A. Gases to be Flared: □ Yes □ No
   B. Are there any contaminants in the gas stream the do not exist in the gaseous state: □ Yes □ No

4. Equipment Data:
   A. Type of Flare: □ Elevated □ Ground Level □ Pit
   B. Dimensions of Flare: Height above grade: ________ ft Tip Diameter: ________ ft
   C. Steam Injection: □ Yes □ No Water Injection: □ Yes □ No
   D. Pilot Data:
      a. Number of Pilots: ________
      b. Gas usage of each pilot: ________ CFH
      c. Heat value of each pilot: ________ BTU/hr
   E. Auxiliary Equipment (check all that apply): □ Ignitors □ Pilot Burners □ Mist Trap □ Liquid Seal
      □ Flame Arrestor □ Pilot Flame Detectors □ Auto reignition system for pilots
   F. Vent Gas Parameters: Maximum Minimum Average
      Volume: ________ CFM
      Velocity: ________ Ft/min
      Temperature: ________ ºF
      Pressure: ________ In. Hg
   G. List the concentrations of all gases to be flared in percent by volume.
      Gases to be Flared Maximum Minimum Average
      % % % %
   H. Miscellaneous Gas Properties:
      Heating Value: ________ BTU/ft³
      Upper Explosive Limit: ________ % by vol.
      Auto Ignition Temperature: ________ ºF
      Lower Explosive Limit: ________ % by vol.
   I. Steam Ratio: ________ Lbs steam/lb vent gas
      If the gas is a hydrocarbon and the hydrogen to carbon ratio is less than 0.28, steam injection will be required to make the flare smokeless.
   J. Auxiliary Heating Method: ________
      If the vent gas has a heating value of less than 50-100 BTU/hr, auxiliary heating will be required.

This is to certify that I am familiar with the operations concerning this equipment and that the information provided on this application is true and complete to the best of my knowledge. This form must be completely filled out before it will be acceptable.

Company Official: __________________________
Title: __________________________
Date: __________________________

Mail to:
Chattanooga-Hamilton County Air Pollution Control Bureau
6125 Preservation Drive
Chattanooga, TN 37416

Engineer Approval: __________________________
This form corresponds to permit number: __________________________

Special Notations: __________________________