Engineering Division 375 Beale Street, Suite 600 San Francisco, CA 94105 www.baaqmd.gov



Instructions: Internal Combustion Engine Form

Introduction

Use the following instructions to help guide you through the *Internal Combustion Engine (ICE) Form.*

Who should use this form?

This form should be submitted with new permit applications and applications to modify or alter existing sources. This form is for all ICEs, except for turbines (for turbines, submit a Combustion form).

Facility Information

- Air District Facility ID The facility ID number is available on any permit or invoice issued by the Air District. This can be found in the upper right of the permit or the invoice.
 - ➤ If this application is for a new facility (not currently permitted by the Air District), you must also submit a *Facility Creation Form* and *Facility Contacts Form*.
- **Air District Device ID** For existing facilities, the device ID number can be found on the Permit to Operate to the left of the device name (for example: **S1** Emergency Standby Engine).
- Device/Operation Name This is the name you associate with this device.
- Initial/Proposed Date of Operation:

General Device Information

- o For new construction, enter the date that you propose will be the initial date of operation.
- For a modification of an existing permitted operation, enter the date that you propose the changes to occur.
- o For an existing operation that is not currently permitted by the Air District, enter the date for which the facility initially operated.
- **Device/Operation Description** This is your description of the device or operation. This field can be used to distinguish it from other similar devices (e.g. ID numbers, location, make, model, etc.)

Equipment Information

Provide the manufacturer's specification sheet of the ICE with this form.

If the engine will be equipped with add-on abatement equipment, please submit an Abatement Device form with your application.

Material Usage

See Tables A and B for a list of material codes, usage units, and maximum fuel use rate units, and Table C for a list of basis codes.

Submission Information

All applications can be submitted through our Online Permitting System, by e-mail, or by mail:

- Online Permitting System: https://www.baaqmd.gov/onlinepermitting
- E-mail: permits@baaqmd.gov
- Mail: Bay Area Air District, Engineering Division, 375 Beale Street, Suite 600, San Francisco, CA 94105

Still need help?

Contact the Engineering Division: (415) 749-4990 | permits@baaqmd.gov

INTERNAL COMBUSTION ENGINE FORM



For all internal combustion engines, except for turbines. All fields are required unless otherwise noted. Please type or print.

•	Facility Information									
	Facility Name				Air District	Facility	ID (Existing facilities only)			
	Facility Address (Street add	ress and city)								
•	General Device Information									
	Air District Device ID (If applicable)									
	Device/Operation Name		Initial/Prop	osed D	Pate of Operation					
	Device/Operation Descript	10N								
3.	Operating Schedule – Select	"Continuous" or spe	ecify specific sche	edule in the	4 columns					
	Continuous Maxi	mum hours/day	Typical hou	Typical hours/day			Weeks/year			
Į.	Equipment Type	Equipment Type								
	> Please submit the manufacturer's specification sheet with this form.									
	Equipment Ma	Equipme	ent Mo	del						
	Select the type of Internal Combustion Engine: O Emergency Standby O Prime									
.	Additional Information									
	EPA/CARB Engine Family Name Serial Number (Required Before				ore Start-up Date)	Y	ear of Manufacture			
	Maximum		Typical Load Percent (Optional)							
	Primary Use of Engine:		bhp				%			
	O Chipper	O Crane Driv	ver	O Fire Pump Driver		O Screen Driver				
	O Co-generation	O Electrical	Generation		ОТ	ub Grinder Driver				
	O Compressor O Other:									
	Diesel Engine Tier Rating (Diesel Engines only):									
	O Non-certified (Tier 0)	O Tier 1	O Tier 2	2	O Tier 3	ОТ	ier 4			
	Engine Ignition Type:									
	O 2 Stroke Compression	O 2 Stroke S	park	O 4 Stro	ke Compression	0 4	l Stroke Spark			
	Engine Burn Type:									
	O Lean Burn	O Rich Burn		O Not A	pplicable	ο ι	Jnknown			
	Which of these describes t	his engine?								
	O Off-Site Portable	O On-Site Po	ortable	O Statio	nary					

INTERNAL COMBUSTION ENGINE FORM



For all internal combustion engines, except for turbines. All fields are required unless otherwise noted. Please type or print.

	•		·							
6.	Equipment Information									
	Does this engine include any	of the following? (Ch	apply)							
	☐ Aftercooler	☐ Inte	r-cooler		☐ Supe	rcharger				
	☐ Injection Timing Retard	☐ Natu	urally Aspir	rated	☐ Turbo	charger				
	Is this engine equipped with	any integral abateme	ent equipm	nent? O Y	es O No					
	Will this engine be equipped ➤ If yes, submit an Abateme				es O No					
7.	Material Usage									
	Fill out information on the fuel used with this device: See Tables A and B for a list of material codes, usage units, and maximum fuel use rate units, and Table C for a list of basis codes.									
	Material Na	me	Mate	rial Code	Maximum Annu	al Usage	Material Usage Units			
	Maximum Fuel U	se Rate	Max. Us	e Rate Units						
	Ontional Additional Informat	ion for Drimo Engine	l Isina Na	n Ctandard F	 					
	Optional Additional Informat Higher Heating Value	Higher Heating Va			r Content	Sul	Sulfur Content Units			
	There i reading value	mgner rieuting vu	ide offics							
	Nitrogen Content	Nitrogen Conten	t Units		_					
Combustion Material Emission Factors										
			Emissic	on Factors (units)	Basis (Code				
	Particulates									
	Organics									
	Nitrogen Oxides (NO _x)									
	Sulfur Dioxide									
	Carbon Monoxide									
	Other:									
	Other:									
8.	Emission Train Information –	Emission Point forms re	equired with	n <u>all</u> Internal Co	mbustion Engine ap	plications				
With regard to emission flow, what abatement devices and/or emission points are immediately downstream of this sour										
Abatement Devices: A A A Emission Points: P-							P			
	Complete an Abatement t	Device Form and/or L	.1111551011 FC	JIIIL FOITH TOI	each connection.					
9.	Certification/Signature of per	son responsible for t	he informa	ation on this f	orm					
	I hereby certify that I am auti	norized to complete t	this form a		ormation contain	ed herein	is true and correct.			
	Name			Title						
	Circantona			2.		D'				
	Signature			Date		Phone	e (xxx-xxx-xxxx)			
				I		I				

Table A. Stationary Emergency Standby Internal Combustion Engine Material Codes

CODE	MATERIAL NAME	UNITS	MAX RATE UNITS	CODE	MATERIAL NAME	UNITS	MAX RATE UNITS
815	Biodiesel (B100)	hours	gallons/hour	160	LPG	hours	gallons/hour
816	Biodiesel (B20-blend)	hours	gallons/hour	189	Natural gas	hours	scf/hour
98	Diesel fuel	hours	gallons/hour	417	Propane	hours	gallons/hour
551	Gasoline - Unleaded	hours	gallons/hour				

Table B. Prime Internal Combustion Engine Material Codes

CODE	MATERIAL NAME	UNITS	MAX RATE UNITS	CODE	MATERIAL NAME	UNITS	MAX RATE UNITS
816	Biodiesel (B20-blend)	thou gallons	gallons/hour	160	LPG	thou gallons	gallons/hour
98	Diesel fuel	thou gallons	gallons/hour	511	Landfill gas**	Mcf	scf/hour
493	Digester gas**	Mcf	scf/hour	189	Natural gas	Mcf	scf/hour
551	Gasoline - Unleaded	thou gallons	gallons/hour	417	Propane	thou gallons	gallons/hour

^{**}Non-standard fuels

Table C. Basis Codes – for Emission Factor Table

CODE	BASIS	CODE	BASIS	CODE	BASIS	
1	BAAQMD Regulation 9-7	5	EPA/CARB Certification	9	Other	
2	CARB Certification	6	EPA Certification	10	Other Literature	
3	CATEF	7	Manufacturer/Vendor Specification	11	Regulation	
4	EPA AP-42	8	Material Balance	12	Source Test	