



Year 2007
Air Quality Division

ANNUAL AIR EMISSIONS INVENTORY QUESTIONNAIRE

Crematory

The 2007 Crematory Annual Emissions Inventory Questionnaire includes 3 forms that are required to be completed and submitted to the Air Quality Division. Instructions for each form are included below. Upon completion, submit all forms along with the signature by the Responsible Official of the facility within 90 days of receipt of a letter from the Department to the address below.

FORM 1: Facility General Information

Complete all fields as requested.

FORM 2: Equipment & Process Data, Stack Details, & Emissions Calculations

Equipment List: List all equipment information relating to the cremator unit, that is operated at the facility.

Process Data: Provide information on Cremation Processes.

Stack Information: Provide information of each stack.

Emissions: Input the process rate for each crematory unit in tons/year. To calculate the emission, take the process rate multiply by pollutant emission factor and divide by 2000. **Input all calculation results in the appropriate spaces provided in the form.**

FORM 3: Summary & Certification

A summarization of all the emissions by each pollutant will be listed within this form. All reports submitted to the Department should be certified true and accurate by the Responsible Official of the facility. This person is the owner or operator of the facility. **If there is a change of the Responsible Official of the facility, please notify the Department with an additional letter stating the change.**

If you have any question or have difficulty completing this form, please contact Darlene Celaya at (602) 771-7662.

**Arizona Department of Environmental Quality
Attention: Darlene Celaya, Emission Inventory Team
Air Quality Division, Compliance Section 3415A-3
1110 West Washington Street
Phoenix, AZ 85007**

SECTION I: *Plant Identification & Mailing Information*

Company Name: _____

Place Name: _____ Place ID #: _____

Mailing Address: _____ City: _____ State: _____

County: _____ Zip Code: _____

Phone: _____ Fax: _____

Permit # or LTF #: _____ General Permit: Yes No

SECTION II: *Emissions Inventory Contact*

Name: _____ Title: _____

Phone: _____ Fax: _____

E-mail Address: _____

SECTION III: *Confidential Request*

Pursuant to Arizona Revised Statutes §49-432 and §49-201, do you claim the Emissions Inventory data submittal confidential. Yes No

If yes include which portions of the inventory are confidential along with a brief explanation:

FORM 2: EQUIPMENT & PROCESS DATA, STACK DETAILS, & EMISSIONS CALCULATIONS YEAR 2007

Equipment and Process Data	Cremator #1	Cremator #2
Maximum Charging Rate (lb/hr)		
Actual Burning Hours (hours/year)		
Single or Dual Cremator		
Number of cremations		
Average weight of cremation (pounds/year)		
Process Rate in tons= (# of cremations) x (average weight of cremation) / 2000	0	0

Stack Information	Stack #1	Stack #2
Height (feet)		
Diameter (feet)		
Velocity (feet/second)		
Exhaust Gas Temperature (F)		
Flow Rate (actual cubic feet per minute)		

Emissions Calculations (Including Fuel Usage)					
(A) Cremator	(B) Process Rate tons/year	Pollutants	(C) Emission Factor pounds/ ton	Cremator 1 Emissions = [(B)x(C)]/2000 tons/year	Cremator 2 Emissions = [(B)x(C)]/2000 tons/year
1		PM	4.67		
		PM-10	3.04		
		PM-2.5	2.022		
2		NOx	5.93		
		SOx	2.66		
		CO	3.12		
		HAPs	1.404		

FORM 3: SUMMARY & CERTIFICATION**YEAR 2007**

All the emissions for each pollutant are totalled and entered in the table below.

Pollutant	Tonnage (tons per year)
Particulate Matter (PM)	
Particulate Matter Less Than 2.5 Microns (PM2.5)	
Particulate Matter Less Than 10 Microns (PM10)	
Nitrogen Oxides (NOx)	
Sulfur Oxides (SOx)	
Carbon Monoxide (CO)	
Hazard Air Pollutants (HAPs)	

Certification of Truth & Accuracy

I certify that based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

All information not identified by me as confidential in nature shall be treated by the Arizona Department of Environmental Quality as public record.

Signature of Responsible Official:

Date:

Print Name:

Title: