



**Kansas Department of Health and Environment
Division of Environment
Bureau of Air and Radiation**

SEWAGE SLUDGE INCINERATORS

- 1) Source ID Number: _____
- 2) Company/Source Name: _____
- 3) Type(s) of material incinerated or combusted: Sewage Sludge _____;
Sewage Sludge co-fired with municipal solid wastes _____; Other (describe) _____
- 4) Incinerator:
Manufacturer : _____
Model No.: _____
- 5) Type:
Multiple Hearth _____; Fluidized bed _____; Electric _____; Single Hearth cyclone _____;
Rotary Kiln _____; High pressure, wet air oxidation _____; Co-incineration with refuse _____
- 6) Combustion Capacity: Manufacturer's design capacity _____ lbs/hr; _____ tons/day
Proposed/actual usage _____ lbs/hr; _____ tons/day; _____ tons/yr
Proposed mix for co-fired incinerator: _____
If sewage sludge is to be mixed with municipal solid wastes, is there a device for weighing the mass of
Municipal Solid Waste? Yes _____; No _____
- 7) Describe the applicable facility operation: _____
- 8) Burners:

TYPE	NUMBER OF BURNERS	FUEL TYPE	BURNER CAPACITY (cu ft or gals/hr)	ANNUAL ESTIMATED USE (cu ft or gals)	HEAT VALUE OF FUEL (BTU/cu ft or gals)	ASH IN FUEL %	SULFUR IN FUEL %
INCINERATOR 1							
INCINERATOR 2							
AFTERBURNER 1							
AFTERBURNER 2							

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(cont.)

- 9) Heat value of waste combusted: _____ BTU/lb
State the basis of value/reference: _____
- 10) Temperature zones:
In hearths (for multiple hearths): _____ ° F
In bed (for fluidized beds): _____ ° F
Drying, combustion: _____ ° F
Cooling (for electric incinerators): _____ ° F
Afterburner: _____ ° F
- 11) Minimum Residence time in chamber: _____ seconds
- 12) If performance tests have been conducted, please attach copy/copies: Attached _____; Not Attached _____
- 13) If the facility is new, please attach manufacturer's guaranteed performance on equipment, and **estimated emissions** of the pollutants **per ton of waste incinerated**.
- 14) Proposed or present method of disposal of ash and residue, and scrubber sludge: _____

- 15) For emission control equipment, use the appropriate CONTROL EQUIPMENT form and duplicate as needed.
Be sure to indicate the emission unit that the equipment is affecting.
- 16) Did construction, modification, or reconstruction commence after June 11, 1973? Yes _____; No _____
If yes, this plant may be subject to NSPS, 40 CFR 60, Subpart O.