



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

**BELT CONVEYORS**

1) Source ID Number: \_\_\_\_\_

2) Company/Source Name: \_\_\_\_\_

Unit No. or Ident. No.: \_\_\_\_\_

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

Model No.: \_\_\_\_\_

Serial No.: \_\_\_\_\_

Date of Manufacture: \_\_\_\_\_

Date of Latest Modification: \_\_\_\_\_

Width: \_\_\_\_\_

Transfer to belt, screen, bin,  
etc.: \_\_\_\_\_

Unit No. or Ident. No.: \_\_\_\_\_

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

Model No.: \_\_\_\_\_

Serial No.: \_\_\_\_\_

Date of Manufacture: \_\_\_\_\_

Date of Latest Modification: \_\_\_\_\_

Width: \_\_\_\_\_

Transfer to belt, screen, bin,  
etc.: \_\_\_\_\_

Unit No. or Ident. No.: \_\_\_\_\_

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

Model No.: \_\_\_\_\_

Serial No.: \_\_\_\_\_

Date of Manufacture: \_\_\_\_\_

Date of Latest Modification: \_\_\_\_\_

Width: \_\_\_\_\_

Transfer to belt, screen, bin,  
etc.: \_\_\_\_\_

Unit No. or Ident. No.: \_\_\_\_\_

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Date of Manufacture: \_\_\_\_\_

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etc.: \_\_\_\_\_