



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

NITRIC ACID PLANT

- 1) Source ID Number: _____
- 2) Company/Source Name: _____
- 3) Date of Manufacture: _____ Date of Last Modification: _____
 Rated Production Capacity: _____ ton/hr Proposed production: _____ ton/hr
- 4) Normal Operating Schedule: _____ hrs/yr
- 5) Raw Materials / Feedstocks with appropriate units

TYPE	AMOUNT	PHYSICAL STATE

- 6) List the strength of the nitric acid produced _____ %
- 7) Type of NO_x control: Extended absorption _____ Catalytic reduction _____ None _____
 Other, describe _____
- 8) If a catalytic reduction is used to control NO_x emission, complete the following fuel information:
 Non-selective _____
 Selective _____ Fuel _____ Max-burning rate (cfm) _____
- 9) List the control installed in the tail-gas duct from the absorber.
 mist eliminator _____ caustic scrubber _____ other (specify) _____

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(cont.)

10) List the following condenser design/operating specifications:

design pressure of entering gas stream _____ psia
design temperature of entering gas stream _____ °F
temperature of entering absorber liquid _____ °F
mechanical refrigeration used in cooling the condenser water (yes/no)? _____

11) Emissions discharged to the atmosphere _____ ft above grade through a stack or duct _____ ft in diameter at _____ °F temperature at _____ ft³/min and _____ ft/sec velocity.

12) For emission control equipment use the appropriate CONTROL EQUIPMENT form and duplicate as needed. Be sure to indicate the emission unit that the control equipment is affecting.

13) Did construction, modification, or reconstruction commence after August 17, 1971? Yes _____; No _____
If yes, this plant may be subject to NSPS, 40 CFR Part 60, Subpart G.