



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

SULFUR RECOVERY PLANT

- 1) Source ID Number: _____
- 2) Company/Source Name: _____
- 3) Emission Unit Identification: _____
- 4) Manufacturer: _____ Model No.: _____
Date of Manufacture: _____ Date of Modification: _____
Rated Capacity of Plant: _____ tons/day Daily Throughput: _____ tons/day
- 5) Type of emission control: oxidation _____ reduction _____ other, specify _____
- 6) If an oxidation system is utilized, list % SO₂ by volume at 0% excess air on a dry basis: _____
- 7) If a reduction system is utilized, list % H₂S and % reduced sulfur compounds by volume at 0% excess air on a dry basis: % hydrogen sulfide _____ % reduced sulfur compounds _____
- 8) Overall sulfur recovery efficiency (if known) _____%
- 9) No. of Catalytic Stages (if applicable) _____ No. Controlled _____ No. Uncontrolled _____
- 10) Normal Operating Schedule: _____ hrs/yr
- 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 October 4, 1976 and is a Claus plant with a capacity of 20 long tons per day or less? Yes _____; No _____
If yes, this plant may be subject to NSPS, 40 CFR Part 60, Subpart J.