



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

CYCLONE COLLECTOR

- 1) Source ID Number: _____
- 2) Company/Source Name: _____
- 3) Cyclone identification number or designation: _____
- 4) What emission unit(s) or source(s) of emissions is(are) vented to the cyclone?
 - a. _____
 - b. _____
 - c. _____
 - d. _____
- 5) Description of particulate collected: _____
- 6) Type of Collector: Single _____; Multiclone _____; Inlet Vane _____; Vertical _____; Horizontal _____; Other _____
- 7) Manufacturer: _____
Date of Manufacture: _____
Model No.: _____
Rated Control Efficiency: _____ %
Capture Efficiency: _____ %
Date of Installation: _____
- 8) Size Cut: _____ dia
- 9) Nominal Pressure Drop: _____ inches of H₂O
- 10) Is there a device provided to measure pressure drop across the cyclone? _____
If yes, specify device: _____
- 11) Inlet Gas Flow: _____ cfm at _____ °F
- 12) Exhaust Gas Flow: _____ cfm at _____ °F
- 13) Emission discharge to atmosphere _____ ft. above grade through stack or duct _____ diameter at _____ °F temperature, with _____ cfm flow rate and _____ fps velocity.