

REGISTRATION CERTIFICATE
EPAC-10 REV. 7-73



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION



STACK NO. 01551001503

EQUIPMENT CLASSIFICATION				REGISTRATION NO.
<input checked="" type="checkbox"/> FUEL BURNING	<input type="checkbox"/> INCINERATOR	<input type="checkbox"/> PROCESS MFG.	<input type="checkbox"/> AIR POLLUTION CONTROL	01550032
FIRM NAME				DATE ISSUED
CONN NAT GAS CORP				12/05/73
LOCATION OF EQUIPMENT (No. & Street, Town, Zip)				
1376 CROMWELL AVE ROCKY HILL CT 06067				
COMMISSIONER OR HIS REPRESENTATIVE				

DEPARTMENT OF ENVIRONMENTAL PROTECTION

FUEL BURNING EQUIPMENT REGISTRATION

EP-4 NEW 5-72

STATE OF CONNECTICUT

TO: Department of Environmental Protection, Air Compliance Section, State Office Bldg., Hartford, Conn. 06115. Tel. 566-2690

1. APPLICATION NO. LNG - 2	2. STACK NO. 2
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3. FIRM Connecticut Natural Gas Corporation	LEGAL NAME	BUSINESS ADDRESS (No. & Street, City, Zip Code) 233 Pearl Street, Hartford, Conn. 06101	PHONE 525-0111
4. DIVISION			
5. APPLICANT J. S. Filbert, Vice President-Operations		60 Columbus Boulevard	Ext. 383
6. INSTALLATION		1376 Cromwell Avenue, Rocky Hill, Conn.	563-9444
7. EQUIPMENT BEING REGISTERED Gas Turbine Engine (Solar #1)	TYPE OF EQUIPMENT (e.g., Boiler)	AIR POLLUTION CONTROL EQUIPMENT USED (If "Yes," file form EP-7) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

8. MAJOR ACTIVITY OF FIRM

MFG.
 OFFICE
 RETAIL OR WHLSE. STORE
 SCHOOL OR CHURCH
 HOTEL/MOTEL
 HOSPITAL OR LAB.
 WAREHOUSE
 RESIDENCE OR APTS.
 OTHER (Specify) LNG Plant

9. TYPES OF FUELS USED	FUEL	GRADES (x)	SULFUR CONTENT	ASH CONTENT	ANNUAL USAGE (Tons, Gals. or Cu. Ft.)	MAXIMUM FIRING RATE		SEASONAL USE			FUEL SUPPLIER		
						(Lbs., Gals., Cu. Ft./hr.)	(BTU/hr.)	Month	to	Month	Name	City or Town	
COAL <input type="checkbox"/>	Bituminous		. %	. %									
		Anthracite	. %	. %									
	OIL <input type="checkbox"/>	Kerosene	. %	. %									
		2	. %	. %									
		4	. %	. %									
		5	. %	. %									
NAT. GAS <input checked="" type="checkbox"/>				900,000 ft. ³	9000 ft ³ /hr	9x10 ⁶					Conn. Nat. Gas	Hartford	

10. BURNER EQUIPMENT

ARE OIL HEATERS USED? YES NO
 OIL TEMPERATURE BEFORE INJECTION _____ °F
 BURNER MANUFACTURER _____
 BURNER MODEL No. _____

11. TYPE OF COAL BURNER

HAND FIRED
 UNDERFEED STOKER
 TRAVELING GRATE
 CHAIN GRATE
 SPREADER STOKER
 STOKER WITH GAS REINJECTION
 CYCLONE FURNACE
 PULVERIZED COAL
 OTHER (Specify)

12. TYPE OF OIL BURNER

PRESSURE OR GUN
 ROTARY CUP
 STEAM ATOMIZER
 AIR ATOMIZER
 TANGENTIALLY FIRED
 OTHER (Specify)

13. COMBUSTION

OVERFIRE AIR CONTROL YES NO _____ °F
 TYPE TIME SWITCHED
 SMOKE INDICATOR
 MANUAL
 OTHER (Specify)
 TYPE OF DRAFT FORCED
 INDUCED
 NATURAL

14. POLLUTANTS EMITTED	MATERIAL	RATE OF EMISSIONS (Tons/Yr.)	METHOD USED TO DETERMINE EMISSIONS	15. EQUIPMENT INFORMATION	BREACHING GAS TEMPERATURE (°F)		No. OF IDENTICAL UNITS
					1100°F	2	
NO ₂		0.09	Table 1-6		DATE SOURCE STARTED UP		
					Not Started		
					EXHAUST GAS FLOW RATE (ACFM):	N.A.	MAXIMUM
					OPERATING HOURS:	HOURS PER DAY	HOURS PER YEAR
							100

16. STACK INFORMATION

STACK EXIT DIRECTION HORIZ. VERT.
 STACK EXIT DIMENSIONS I.D. 16 in. OR _____ in. X _____ in.
 STACK HEIGHT (Feet) 14.6
 IS STACK EQUIPPED WITH RAIN HAT? YES NO

SMOKE INDICATOR IN STACK
 NO
 MAKE AND MODEL NO. _____
 STACK LINING METAL
 REFRACTORY
 OTHER (Specify)

17. STACK LOCATION

Name of nearest intersecting street: Brook Street
 Distance to stack from intersection: 2500 FT.
 DIRECTION TO STACK: (Circle one) N, NE, E, SE, **S**, SW, W, NW

18. CERTIFICATION

I certify that I have examined the above information and that to the best of my knowledge it is true and complete. (Signature subjects signer to provisions of the General Statutes regarding false and misleading statements).

SIGNED: *J S Filbert*
 TITLE: VP Operations
 DATE: 9/29/72

620,000 294,500

MAIN FILE

PLEASE DO NOT WRITE IN THIS SPACE

DATE RCV'D FROM APPLICANT: 12/11/72 # 278

DATE REVIEWED / / BY:

DATE COPY SENT TO LOCAL AGENCY 12/11/72 BY

REGISTRATION NUMBER 155-0032

PREMISE NO. 155-015

STACK NO. 03

STATE GRID CO-ORDINATES

X 619750 2140

Y 297500

REGISTRATION CARD SENT

STORED ON COMPUTER

DATE / / BY

DATE / / BY

EMERGENCY STANDBY PLANS

PLAN REQUIRED YES NO

DATE PLAN - MANUAL SENT TO APPLICANT / / BY

DATE FORM RETURNED / /

BY

DATE PLAN APPROVED / /