

# MONTEREY BAY UNIFIED AIR POLLUTION CONTROL DISTRICT

24580 SILVER CLOUD COURT • MONTEREY • CA 93940

PHONE (831) 647-9411 • FAX (831) 647-8501

## COFFEE ROASTER SUPPLEMENTAL INFORMATION FORM

- A. This form must be submitted with APCD Form #1, Application for Authority to Construct and Permit to Operate.  
 B. Each application must include applicable equipment specifications with plans and equipment location drawing. Additional information may be required.  
 C. Further information or clarification may be obtained by writing or calling the Engineering Division at the Air Pollution Control District.

NOTE: Your application for an Authority to Construct and a Permit to Operate must be approved prior to the commencement of any work. Any modification shall not be performed without first obtaining District approval.

1. Permit to be Issued to: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Location/Building: \_\_\_\_\_

4. Coffee Roaster Data: Manufacturer: \_\_\_\_\_

4a. Model Number: \_\_\_\_\_

4b. Capacity of Coffee Roaster: \_\_\_\_\_ lbs/Batch

4c. Size of Coffee Roaster Burner: \_\_\_\_\_ BTU/hr

4d. Type of Fuel Consumed in Roaster Burner:    Natural Gas     Propane/LPG     Other (Specify) \_\_\_\_\_

4e. Maximum Production Rate In \_\_\_\_\_ Batch(es)/hr and \_\_\_\_\_ Batch(es)/day

4f. Type of Green Bean Feed System:    Conveyor(s)     Hopper(s)     Manual

4g. Type of Roasted Bean Handling System: \_\_\_\_\_

5. Exhaust Fan Data: Manufacturer: \_\_\_\_\_

5a. Model Number: \_\_\_\_\_    Horsepower: \_\_\_\_\_

5b. Total Flow Rate: \_\_\_\_\_ CFM

6. Exhaust: Stack Height (above ground) \_\_\_\_\_ ft.    Stack Inside Diameter: \_\_\_\_\_ in.

Weather Cap: Yes  No     Type: Fixed Cap     Auto Damper     None

7. Air Pollution Control Equipment:

7a. Afterburner Manufacturer: \_\_\_\_\_    Model No: \_\_\_\_\_

7b. Size of Afterburner: \_\_\_\_\_ BTU/hr

7c. Residence Time: \_\_\_\_\_ Seconds

7d. Operating Temperature: \_\_\_\_\_ °F

7e. Diameter Chaff Cyclone: \_\_\_\_\_ Inches

Date Received	8. Signature of Responsible Official, Partner, or Sole Proprietor of Organization: _____		
	9. Type or Print Name and Official Title of Person Signing This Application: _____		
	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Name</td> <td style="width: 30%; border: none;">Title</td> <td style="width: 20%; border: none;">Date</td> </tr> </table>	Name	Title
Name	Title	Date	