air pollution control district
SANTA BARBARA COUNTY

ODORANT & METERING STATION SUMMARY

FACILITY NAME: _____

ADDRESS: _____

_____

1. Pressure Controller(s):
   Mfgr:_____ Model #:_____

   ID #:_____ Gas [ ] or Air [ ]

   Bleed Gas rate: _____ (scf / hr)

   Pressure Set Points: _____

   Mfgr:_____ Model #:_____

   ID #: _____ Gas [ ] or Air [ ]

   Bleed Gas rate: _____ (scf / hr)

   Pressure Set Points: _____

   Describe the function of each controller: _____

   _____

   _____

   ☐ Not applicable – pressure switches are installed.

2. Liquid / Gas Separator:
   Vessel Capacity: _____ (ft_3) ID #:_____

   Operating Pressure: _____ Relief Valve Setting: _____

3. Gravitometer:
Mfgr: _____ Model #: _____

ID #:_____ Bleed Gas Rate: _____ (scf/hr)

4. H_2S Analyzer:
Mfgr: _____ Model #:_____

ID #: _____ Bleed Gas Rate: _____(scf/hr)

Analyzer Set Point: _____ PPM Alarm _____ PPM Shutdown

5. Gas Sampler:
Mfgr:_____ Model #:_____

ID #: _____Bleed Gas Rate:_____(scf/hr)

6. Odorant Storage Tank:
Vessel Dimensions: _____ Vessel Capacity: _____

Tank ID #: _____ Relief Valve Setting: _____

Describe the procedures used to fill the vessel:_____

_____

_____

_____

7. Odorant Run Tank:
Vessel Dimensions: _____ Vessel Capacity: _____

Tank ID #: _____ Relief Valve Setting: _____

Describe the procedures used to fill the vessel: _____

_____

_____

_____

8. Metering Pump:

Mfgr: _____ Model #:_____

ID #: _____ Gas [ ] or Air [ ] operated

Bleed Gas Rate: _____ (scf/hr) {at max rating}

9. Charcoal Filter:

Mfg: _____ Model #:_____

ID #: _____ Vessel Dimensions: _____

Weight of Charcoal: _____ Type of Charcoal: _____

Frequency of Bed Replacement: _____

10. As an attachment, list all other potential sources of hydrocarbon emissions from the facility. Provide the appropriate equipment descriptions and the rate of emissions in scf / hr.

11. Odorant:

Type: _____ Concentration: _____

Vapor Pressure at 70°F and 1 atm: _____psia

If dilute, what solvent is used?: _____

Yearly usage: _____Gallons

Density (lb / gal): _____ Molecular Weight: _____

12. Fugitive Emission Source:

On an Attachment list the fugitive emission sources, the quantity of each source, the number of components per source, the total components, and the emissions in lb / hr ROC. Fugitive emissions are calculated using emission factors from Table 2.8 of the Tecolote Report (Modeling of Fugitive Emissions, January 1986).

13. Average Gas Analysis:

Non-methane HC weight %:_____ % HC Mol Wt Avg:_____

Provide as an Attachment a Certificate of Analysis, showing: identification parameters; sample date; analysis date; components listed by mol%; corrected Btu (dry); and corrected specific gravity.

14. Operating Parameters:

Source of the Natural Gas: _____

Highest monthly gas throughput in the past three (3) years: _____

Average monthly gas throughput: _____
So Cal Gas Distribution line #: _____

15. As an Attachment provide 1) a process flow diagram, which shows all the above listed equipment, and 2) a general site plan, which identifies the location of: all roads, property lines, and adjacent property owners.

COMPLETED BY:_____ TITLE:_____

DATE: _____ PHONE: _____