

# MARYLAND DEPARTMENT OF THE ENVIRONMENT

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Air and Radiation Management Administration ● Air Quality Permits Program

## Application for Permit to Operate Incinerators

### 1. Premise Identification:

Premise Name or Identification \_\_\_\_\_

Premise Number \_\_\_\_\_

Premise Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

County \_\_\_\_\_

### 2. Equipment Identification

Unit	Type Equipment (By-product waste, municipal, etc.)	lbs/hr (design)	Registration #
1			
2			

### 3. Amount and Description of Waste Being Incinerated

Unit	Amount (tons/yr)	Description of Waste
1		
2		

### 4. Description of Air Pollution Control Device

Unit	Type of Control Device	Grain Loading (at 12% CO <sub>2</sub> )
1		
2		

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_