



COMPRESSOR/INDUSTRIAL ENGINES ANNUAL EMISSIONS INVENTORY REPORT

NORTH DAKOTA DEPARTMENT OF HEALTH
DIVISION OF AIR QUALITY
SFN 11829 (11-15)

GENERAL

Name of Firm or Organization	Permit to Operate Number	Year of Emissions	
Mailing Address	City	State	ZIP Code
Facility Name	Facility Location	Emission Unit Number	

EQUIPMENT INFORMATION

<input type="checkbox"/> Stationary Gas Turbine	<input type="checkbox"/> Reciprocating Engine	<input type="checkbox"/> Dual Fuel Engine	<input type="checkbox"/> Spark Ignition
<input type="checkbox"/> Stationary Large Bore Diesel	<input type="checkbox"/> 2-Stroke Lean Burn	<input type="checkbox"/> Other, Specify _____	<input type="checkbox"/> Compression Ignition
<input type="checkbox"/> 4-Stroke Lean Burn	<input type="checkbox"/> 4-Stroke Rich Burn		
Manufacturer of Unit	Model Number	Actual Hours of Operation	
Maximum Rating BHP at RPM	Design Capacity BHP at RPM		
If turbine used for electrical generation: MWe-hours generated			

FUELS USED

Natural Gas (if applicable)	Thousand Cu. Ft.	Btu/Cu. Ft.	Percent H ₂ S
Diesel (if applicable)	Gallons	Btu/Gal	
LP Gas (if applicable)	Gallons	Btu/Gal	
Other (Specify)	Specify	Btu/Unit	

COMPRESSOR STATION FLARE STACK EMISSIONS

Quantity Flared Thousand Cu. Ft./Yr	Average H ₂ S Content	SO ₂ Emissions Tons/Yr
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(The table below is used for single fuel combustion. Use the tables on the other side if multiple fuels are combusted and then summarize the total emissions per year in the "Tons" column below)

TOTAL STACK EMISSIONS

Air Contaminant*	Emission Factor (Include Units)	Emission Factor Source (Include Test Date if Applicable)	Tons
Particulate – Total PM Filterable)			
Particulate - PM ₁₀ (Filterable)			
Particulate - PM _{2.5} (Filterable)			
Particulate – CPM (Condensable)			
Sulfur Dioxide			
Nitrogen Oxides			
Carbon Monoxide			
Total Organic Compounds: Nonmethane			

*Submit SFN 19839 for Hazardous Air Pollutants; include formaldehyde and total hazardous air pollutant emissions.

STACK EMISSIONS

FUEL TYPE:

Air Contaminant*	Emission Factor (Include Units)	Emission Factor Source (Include Test Date if Applicable)	Tons
Particulate - PM Total (Filterable)			
Particulate - PM ₁₀ (Filterable)			
Particulate - PM _{2.5} (Filterable)			
Particulate - CPM (Condensable)			
Sulfur Dioxide			
Nitrogen Oxides			
Carbon Monoxide			
Total Organic Compounds: Nonmethane			

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Carbon Monoxide			
Total Organic Compounds: Nonmethane			

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Provide calculations for quantities listed above. Use additional sheets if necessary.

I declare under the penalties of perjury that this report has been examined by me and to the best of my knowledge is a true, correct and complete report.

Print Name of Person Submitting Report	Title	Telephone Number
Signature	Email Address	Date

Return completed form to:
 North Dakota Department of Health
 Division of Air Quality
 918 E Divide, 2nd Floor
 Bismarck, ND 58501-1947
 Telephone: (701)328-5188