



CITY OF PHILADELPHIA  
 DEPARTMENT OF PUBLIC HEALTH  
 PUBLIC HEALTH SERVICES  
 AIR MANAGEMENT SERVICES

Air Management Services  
 321 University Avenue  
 Philadelphia PA 19104-4543  
 Phone: (215) 685-7572  
 FAX: (215) 685-7593

**INSTALLATION PERMIT APPLICATION FOR BOILERS, WARM AIR FURNACES, AND HOT WATER HEATERS**  
*(Prepare all information completely in print or type in duplicate)*

Facility Name:	Facility Mailing Address (Street Address & Zip Code):		Tax ID No.
Owner	Mailing Address	E-Mail:	Telephone:
Contact Person	Mailing Address	E-Mail:	Telephone:
Is this a reconstruction, conversion, alteration, or replacement of an existing installation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where Unit is to be Installed	Chimney or Stack <input type="checkbox"/> New <input type="checkbox"/> Alter Existing <input type="checkbox"/> Existing	Completion Date
Equipment Description <input type="checkbox"/> Boiler <input type="checkbox"/> Warm Air Furnace <input type="checkbox"/> Hot Water Heater	Manufacturer:	Model:	Serial Number:
Maximum Power Output _____(HP) or _____(KW)	Fuel Type: <input type="checkbox"/> Natural Gas <input type="checkbox"/> No. 2 Oil <input type="checkbox"/> Other_____	Rated Heat Input: _____ (MMBTU/Hr)	
Flue Gas Recirculation: <input type="checkbox"/> Forced FGR <input type="checkbox"/> Induced FGR <input type="checkbox"/> None	Firing condition: <input type="checkbox"/> Indirect Fired <input type="checkbox"/> Direct Fired	Control Device: <input type="checkbox"/> Uncontrolled <input type="checkbox"/> Controlled, Attach a copy of the Control Device & Control Device No.	

Stack Information:  
 Stack Height Above Grade \_\_\_\_ (ft); Stack Exit Diameter \_\_\_\_ (ft); Stack Exit Gas Temperature \_\_\_\_ (°F); Stack Exit Gas Flow Rate \_\_\_\_\_ (ACFM); Distance to Nearest Property Line \_\_\_\_ (ft); Height of Nearest Obstruction \_\_\_\_ (ft); Stack Exit Gas Velocity \_\_\_\_\_ (ft/sec); Stack configuration  Vertical  Horizontal  Downward Vent

Description of apparatus to be installed ( Attach plans and specifications)

Please attach any supporting data (manufacturer specifications, stack tests, control efficiencies, etc.) or relevant information that you have for your unit.

**I certify that I have the authority to submit this Permit Application on behalf of the applicant named herein and that the information provided in this application is true and correct to the best of my knowledge and information.**

Signature \_\_\_\_\_ Date \_\_\_\_\_ Address \_\_\_\_\_  
 Name & Title \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

**DO NOT FILL IN – FOR OFFICE USE ONLY**

Application No.	Plant ID	Health District	Census Tract	Fee	Date Received
Approved by	Date	Conformance by			Date

# **Instructions**

## **INSTALLATION PERMIT APPLICATION FOR BOILERS, WARM AIR FURNACES, AND HOT WATER HEATERS**

1. Complete the form for each item as appropriate. Attach separate sheet(s) as necessary, clearly identifying the applicant name and unit number. Include a process flow diagram indicating all related equipment, air pollution control equipment and stacks as applicable. Identify all materials entering to and leaving from all devices indicating quantities and parameters relevant to the process.
2. This permit is issued for the construction and temporary operation of equipment listed in the application until Air Management Services performs the conformance test and issues the Air Pollution License.
3. This permit may only be used for boilers, warm air furnaces, and hot water heaters rated 2.5 MMBTU/hr or less or units rated less than 10 MMBTU/hr that can only burn natural gas or fuel oil rated No. 2 or lighter.
4. Complete the application form and submit in duplicate along with the application fee payable to the "City of Philadelphia." The fee is \$280.
5. All information in the application is available to the public. If you wish to keep some information confidential, please place the stamped confidential information separately along with the requested letter. AMS will review the confidential request and advise you as appropriate.
6. All submissions and correspondence should be directed to:  
Source Registration  
Air Management Services  
321 University Avenue  
Philadelphia, PA 19104-4543.  
Phone 215-685-7572
7. Term

Tax ID No.: This is the Federal Tax ID or Social Security Number. If the applicant has an Employer Identification Number (EIN), this number must be used.