

Emission Point Information

TCEQ Emissions Inventory Year _____

TCEQ Air Emissions Inventory

Flare

Company Name:	Site Name:	TCEQ Air Account Number:	RN:
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EMISSION POINT IDENTIFICATION

EPN:	Point Name:
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GEOGRAPHICAL COORDINATES *Fill in one section below.*

Latitude and Longitude <i>in NAD of 1983</i>		OR	UTM Coordinates <i>in NAD of 1983</i>		
Latitude	Longitude		Zone	North Meters	East Meters
____ deg ____ min ____ sec	____ deg ____ min ____ sec		<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15	_____	_____

FLARE INFORMATION

Number of Pilots: _____	Average Flow Rate: _____ Mscf/minute (1000 scf/minute)	
Composition Determination: <input type="checkbox"/> Continuous Measurement <input type="checkbox"/> Engineering Estimate <input type="checkbox"/> One-time performance test <input type="checkbox"/> Periodic Testing		
Flow Determination: <input type="checkbox"/> Continuous Measurement (by a flow meter at the flare header) <input type="checkbox"/> Engineering Estimate <input type="checkbox"/> One-time performance test		
Height: _____ feet	Inside Tip Diameter: _____ feet	
Low Heating Value: _____ Btu/scf	Molecular Weight: _____ lb/lb-mole	Temperature: _____ °F