

Line 810

EPA VISIBLE EMISSION OBSERVATION FORM 1

Method Used (Circle One)
 Method 9 203A 2038 Other: _____

Company Name: **Indianatown Oxygen, LP**
 Facility Name: **0850102**
 Street Address: **Silver Fox Rd.**
 City: **Indianatown** State: **FL** Zip: _____

Process: **limestone storage** Unit #: **6** Operating Mode: **normal**
 Control Equipment: **baghouse** Operating Mode: **normal**

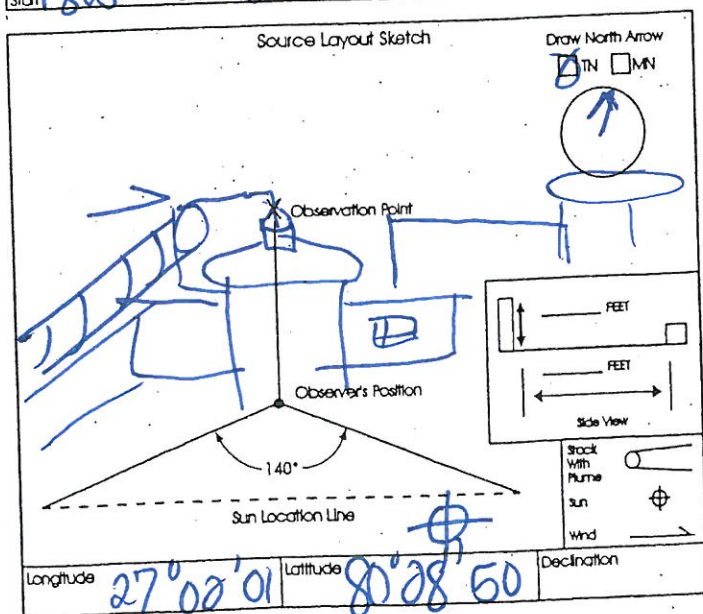
Describe Emission Point:
top of 810

Height of Emiss. Pt.: Start **100ft** End **100ft** Height of Emiss. Pt. Rel. to Observer: Start _____ End _____
 Distance to Emiss. Pt.: Start **250ft** End **250ft** Direction to Emiss. Pt. (Degrees): Start _____ End _____
500ft **500ft**

Vertical Angle to Obs. Pt.: Start **13°** End **13°** Direction to Obs. Pt. (Degrees): Start _____ End _____
 Distance and Direction to Observation Point from Emission Point: Start **500ft South** End **500ft S.**

Describe Emissions: Start **none** End **none** Water Droplet Plume: Attached Detached None
 Emission Color: Start **none** End **none** Attached Detached None

Describe Plume Background: Start **partial Bldg/Sky** End **partial Bldg/Sky**
 Background Color: Start **Blue** End **Blue** Sky Conditions: Start **Scattered** End **Scattered**
 Wind Speed: Start **0-5** End **7-10** Wind Direction: Start **W** End **W**
 Ambient Temp.: Start **↑80s** End **↑80s** Wet Bulb Temp.: _____ RH Percent: _____



Additional Information

Form Number _____ Page _____ of _____
 Continued on VEO Form Number _____

Min	Time Zone				Comments
	0	15	30	45	
1	0	0	0	0	
2	0	0	0	0	
3	0	0	0	0	
4	0	0	0	0	
5	0	0	0	0	
6	0	0	0	0	
7	0	0	0	0	
8	0	0	0	0	
9	0	0	0	0	
10	0	0	0	0	
11	0	0	0	0	
12	0	0	0	0	
13	0	0	0	0	
14	0	0	0	0	
15	0	0	0	0	
16	0	0	0	0	
17	0	0	0	0	
18	0	0	0	0	
19	0	0	0	0	
20	0	0	0	0	
21					
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Observer's Name (Print): **Nicholas Stallings**
 Observer's Signature: **Nicholas Stallings** Date: **7/15/12**
 Organization: **EDEP**
 Certified By: **ETA** Date: **7/11/12**