Department of the Navy
Naval Air Station, Jacksonville

OPERATION AND MAINTENANCE PLAN

(For those EUs with more than one dust collector)

(Please List EU No.)

Emission Unit Description:_____

Control Equipment Specifications

Manufacturer: _____ Design Air Flow: _____CFM

Model Number: _____ Air to Cloth Ratio: _____

Type: _____ Material: _____

Primary dust collector, Please describe: _____

Secondary dust collector, Please describe: _____

Cleaning Mechanism: Pulse jet ☐ Reverse Air ☐ Mechanical ☐ Other ☐ Please describe:

MONTHLY CHECK

Check appropriate box(es) and describe action taken, including date, under comments

Date of Inspection:_____ Inspector's Name: _____

Fan: Good condition ☐ Maintenance Performed ☐

Bags: Good condition ☐ Needs repair or replacement ☐

Baghouse Structure: Good condition ☐ Needs repair ☐

Baghouse Clean Air Side:

Clean ☐ Light Dust ☐ Heavy Dust ☐

Primary and Secondary dust collectors, describe condition and maintenance performed:

_____

Comments:

_____

_____