

Department of the Navy
Naval Air Station, Jacksonville

OPERATION AND MAINTENANCE PLAN (EU No. 105)

Month/Year: _____

Emission Unit Description: _____

Control Equipment Specifications

Manufacturer: _____ Design Air Flow: _____ CFM

Model Number: _____ Air to Cloth Ratio: _____

Type: _____ Material: _____

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 ☐

Pressure Drop: Do not operate outside this pressure drop range.

Primary Filter East

Primary Filter West

Visible Emissions: Yes No

Comments: