



**THE CITY OF NEW YORK**  
**DEPARTMENT OF ENVIRONMENTAL PROTECTION**  
 Bureau of Environmental Compliance  
 59-17 Junction Boulevard, 9th Floor  
 Flushing, New York 11373

**Michael Gilsean**  
 Assistant Commissioner  
 Environmental Compliance

**Required Information for Equipment Acceptance**  
 For the Use of Non-Department Listed Burners

<b>Information of Equipment Manufacturer</b>	Manufacturer Name:		
	Product Line Name:		
	Business Address:		
	City:	State:	Zip:

<b>Information of Representative</b>	Name of Representative:	Telephone No.:
	Email Address:	Fax No.:

Type of Fuel: \_\_\_\_\_

**Table for the listing of burner sizes**

Burner Manufacturer Series Name				

**Table for the explanation of the burner model number nomenclature**

Sample Model Number	
Segment 1	
Segment 2	
Segment 3	
Segment 4	

Pre-purge Period: \_\_\_\_\_

Post-purge Period: \_\_\_\_\_



**GENERIC METHOD OF BURNER LIMITATION TABLE**

- State the turndown ratio from high fire to low fire.
- The method of burner limitation for both high and low fire must be submitted. Fractional firing rate indication shall be provided.
- Submit a table which lists the maximum static pressure against which the burner can deliver sufficient combustion air for the designated burner oil delivery rate.

Burner Model	Firing Rate		Nozzle Pressure		Nozzle Specifications				Turn down Ratio
	High	Low	High	Low	Qty.	Make	Size (gph)	Spray Angle	

**Notes:**

**User Note:** The format of the table below is representative for a pressure atomizing burner employing simplex type nozzles; the format of your method of burner limitation table may be different based on your specific product line.

**Professional Engineer’s Certification Statement**

I attest under the penalties of perjury:

1. I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement;
2. That, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is, to the best of my knowledge, true, accurate and complete;
3. I have personally reviewed the manufacturer’s test data and certify that the equipment will meet the following operating conditions in the field:
  - a. A smoke reading of #3 or less on the Bacharach Scale
  - b. Stack losses will not exceed 17%
  - c. Overall efficiency will be at least 78%
4. That systems to maintain compliance are in place at the facility and will be maintained even if processes or operating procedures are changed; and
5. That I am fully authorized to make this attestation on behalf of the facility.

I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, misleading or incomplete information.

\_\_\_\_\_  
P.E. Signature

\_\_\_\_\_  
P.E. Seal