

## Engine Information Worksheet

(to be submitted with DEP 502(b)(10) Change Notification Worksheet)

1. Brief Description & Location of Engine Installation	
2. Date of Installation or Equipment Order (i.e., “commence construction” date)	
3. Startup Date (if applicable)	
4. Make & Model No.	
5. Serial No. (if applicable)	
6. Manufacture Date or Model Year	
7. Fuel (check all that apply)	<input type="checkbox"/> Diesel <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other (Specify: _____)
8. Engine Type (check all that apply)	<input type="checkbox"/> Compression Ignition (CI) <input type="checkbox"/> Spark Ignition (SI) If SI, check one: <input type="checkbox"/> 2SLB <input type="checkbox"/> 4SLB <input type="checkbox"/> 4SRB
9. Power Rating (HP or kW)	
10. Number of Cylinders	
11. Engine Displacement (liters)	
12. Will the engine be classified as emergency?	<div style="text-align: right;"><input type="checkbox"/> Y / <input type="checkbox"/> N</div> If yes, is engine a fire pump? <input type="checkbox"/> Y/ <input type="checkbox"/> N
13. Will the engine be certified?	<div style="text-align: right;"><input type="checkbox"/> Y / <input type="checkbox"/> N</div> If yes, specify EPA Tier _____ and attach Certificate
14. What emissions control equipment is on the engine? (check all that apply)	<input type="checkbox"/> Diesel Particulate Filter <input type="checkbox"/> Oxidation Catalyst <input type="checkbox"/> Selective Catalytic Reduction
15. Will the engine be part of a load share agreement with a local utility?	<div style="text-align: right;"><input type="checkbox"/> Y / <input type="checkbox"/> N</div>
16. Applicable Rules (check all that apply)	<input type="checkbox"/> 40 CFR 60 Subpart IIII <input type="checkbox"/> 40 CFR 60 Subpart JJJJ <input type="checkbox"/> 40 CFR 63 Subpart ZZZZ

