



State of Oregon
Department of
Environmental
Quality

Device\Process Form
Boilers

FORM DV202
Answer Sheet

Facility name: _____ Permit Number: _____

1.	Device name and ID number or label	
2.	Date installation/construction commenced	
3.	Date installed	
4.	Special control requirements? [if yes, describe]	
5.	Manufacturer	
6.	Description of boiler, including type of boiler and firing method:	
7.	Rated design capacity (heat input, Btu/hr)	
8.	Maximum steam production rate (lbs/hr)	
9.	Maximum steam pressure (psi)	
10.	Maximum steam temperature (°F)	

11. Fuel usage: [for EACH fuel, enter]:

Fuel	Maximum hourly firing rate (specify units)