Division of Air Quality 601 57th Street SE Charleston, WV 25301-2943 Telephone Number: (304) 926-0475 Fax Number: (304) 926-0479

Opacity Test Protocol

Contact Information			
Facility Name and Location:			
Facility WVDAQ ID#:			
Facility Physical Address:			
	Street:		
	City:		
	Zip:		
Facility Mailing Address:			
	Street or PO Box:		
	City:		
	State:		
	Zip:		
Facility Contact:	Name:		
	Title:		
	Phone:		
	E-mail:		
Test Firm Contact:	Name:		
	Title:		
	Phone:		
	E-mail:		
Test Start Date and Time			
Test Firm Information			
Name:			
Mailing Address:			
C			
	Street or PO Box:	 	
	City:		
	State:		
	Zip:		
Number of sources in WV te last 12 months:	ted by firm		

Source Information		
Relevant Permit #(s):		
Type of facility/source :		
	Coal Preparation Plant and/or Processing Plant	
	Nonmetallic Mineral Processing Plant	
	Other (describe)	
Reason for Test:	Condition of permit	
	Consent Order	
	Administrative Order	
	Other (specify)	

Directions (or attach map):

Test Information	
Test Method:	
Coal	Permit allowed maximum throughput (ton/hr)
	Historical average throughput (time period, ton/hr)
	Anticipated throughput during test (record actual and include in test report)
Nonmetallic mineral	Permit allowed maximum throughput (ton/hr)
	Historical average throughput (time period, ton/hr)
	Anticipated throughput during test (record actual and include in test report)
Other	Permit allowed maximum operating rate
	Historical average operating rate (time period)
	Anticipated operating rate during test (record actual and include in test report)
Source/process operational data to be recorded during test:	

Control equipment data to be recorded during test:

Source ID# of units to be observed.

(Attach process flow diagram)				