

**WICKOW COUNTY COUNCIL**

**AIR POLLUTION ACT, 1987**

**APPLICATION FOR LICENCE**

1 (a)	Name & address of Applicant	
1(b)	Name & address of Agent	
1 (c)	Telephone No. of Agent Telephone No. of Applicant Planning Register No.	
2.	Name and address of the premises from which the emission(s) is/are to be made:	

I hereby make application for a Licence pursuant to the provisions of the Air Pollution Act, 1987 and the Regulations made thereunder.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

3.	Give a general description of the process or activities giving rise to the emission(s)	
4(a)	Location of point(s) of emission(s) (To be shown also on a 1/500 layout):	

4 (b)	Details of size and construction of all outlets (Plans and elevations in triplicate indicating the premises, source of emissions, diameter and point of emissions, ducting systems and any works, apparatus or plant from which the emissions are to be made must accompany this application form):	
5.	Details of provisions made for monitoring of all emission(s) including details of frequency and method used:	
6.	Details of any special arrangements to prevent accidental emission(s):	
7.	General	
(a)	Date of commencement of the emission	
(b)	Emission: Volume to be emitted in m <sup>3</sup> .	
	(i) Normal per day:	
	(ii) Maximum in any one day:	
	(iii) Maximum rate per hour:	
(c)	(i) Temperature of emission:	
	(ii) Humidity of emission:	
(d)	The period or periods of the day in which the emission(s) is/are to take place	
(e)	Any seasonal, or other variations (including any arising from plant malfunction) in volumes of emission(s):	
8.	Particulars of treatment N.B. best practicable means must be used:	

9.	Details of any ambient air monitoring carried out in the vicinity of premises:	
10.	Details of any dispersion modelling carried out in the vicinity of the premises:	
11.	Reason for selection of point of discharge, method of discharge and method of treatment:	

Characteristics of the Emission(s)

Complete for all applicable characteristics giving concentration ranges where available.

Concentration to be expressed in mg/ m<sup>3</sup> where applicable

The following list is meant to be indicative only – such other physical chemical or other characteristics as are pertinent to the effluent in question should be specified.

Characteristic	Prior to Treatment	As Discharged
Temperature °C		
SO <sup>2</sup>		
HCl		
NO(x)		
Dusts (specify each) giving composition, Toxicity and T.L.V.		
Solvents (specify each) giving Toxicity and T.L.C.		
CS <sup>2</sup>		
H <sup>2</sup> S		
Cl <sup>2</sup>		
NH <sup>3</sup>		
CO		
Organohalogen compounds (Specify)		
Other toxic substances Specify1		
Other Carcinogenic, Teratogenic or Mutagenic Compounds to include suspect materials		
Metals (Specify Each):		
(a)		
(b)		
(c)		
(d)		
Any other components of significance		

NOTE: 5-12 must be completed for each and every point of discharge to atmosphere