Form 6: Smoke/No Smoke Log – Diesel Engines Reporting Period: ☐11/1/___ to 3/31/____ ☐ 4/1/____ to 10/31/____

Permittee Name: _____ Permit No.: AQ_____

Facility Name: _____

Date	Engine ID	Throughput (TPH)	Visible Emissions?		Location	Background Description	Name of Observer
			Yes	No			
Number of Days Smoke/No Smoke was Conducted:					Which Days (if any) Visible Emissions Were Observed:		