



For agency use only.  
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**SPOKANE REGIONAL CLEAN AIR AGENCY**  
3104 E. Augusta Ave., Spokane, Washington 99207  
(509) 477-4727, Fax (509) 477-6828, www.spokanecleanair.org

## PORTABLE SOURCE PERMIT APPLICATION TO INSTALL AND OPERATE CONCRETE OR CEMENT BATCH PLANTS

*This Portable Source Permit (PSP) application must be accompanied by the required **\$1,625** base fee, which covers **16** hours of SRCAA review time. Additional review time will be billed at \$98/hour. See Spokane Clean Air's current [fee schedule](#) for more information.*

*To complete this application, please "save as" the document onto your computer. Tab or mouse through to fill in the required data. Print, sign and submit with base fee and any required additional information.*

### 1. GENERAL INFORMATION

Owner / Operator:  
Name of Business:  
Business Address:

Applicant:  
Applicant Address:

Contact Person:  
Business Phone #:  
Business Fax #:  
Business Email:

Contact Person:  
Applicant Phone #:  
Applicant Fax #:  
Applicant Email:

### 2. INSTALLATION INFORMATION

Installation Address:

Operating Dates (mo/day/yr): From \_\_\_\_\_ to \_\_\_\_\_  
Operating Hours: From \_\_\_\_\_ a.m. to \_\_\_\_\_ p.m.  
Operating Days (check): Su Mon Tue Wed Thur  
Fri Sat

Contact Person:  
Installation Phone #:  
Pit Owner:  
Pit Depth (ft.):                      Pit Number:  
Nature of Business:

Operating Weeks per Year:  
Pit Name:  
Township:                              N Range:  
EWM Section:

### 3. BAGHOUSE BEING INSTALLED / MODIFIED

Manufacturer:  
Model number:  
Total number of bags:  
Length of bags:                      ft. in.

Diameter of individual bags:                      ft. in.  
Total cloth area (ft<sup>2</sup>):  
Particulate control efficiency of baghouse (%):  
Baghouse Air to Cloth Ratio (fpm):

Type of bags (Gore-Tex, Nomex, Nylon, etc.):

Will a manometer or other pressure drop gauge be installed (check one)? Yes No

If yes, please describe (manufacturer, model, etc.):

Type of bag cleaning system (check one): Pulse jet Reverse pulse Reverse air Fan pulse Shaker  
Manual Other (please explain):

**4. BAGHOUSE EXHAUST STACK / VENT DATA**

**How does exhaust exit stack** (check one)?  
 Vertical  Horizontal  
**Where does baghouse exhaust** (check one)?  
 Inside  Outside  Variable  
**Flow rate** (SCFM): Operating \_\_\_\_\_ Maximum \_\_\_\_\_  
**Exit temperature** (°F): \_\_\_\_\_

**Stack height from ground** (ft): \_\_\_\_\_  
**Internal dimensions of stack/vent** (ft): \_\_\_\_\_  
**Will a stack cap/rain guard be installed** (check one)?  
 Yes  No (If yes, submit a drawing of the stack cap design.)  
**Distance from stack to nearest property line** (ft): \_\_\_\_\_

**5. PARTICULATE LADEN AIR STREAM**

**Type of particulate to be filtered** (i.e. sawdust, etc.): \_\_\_\_\_

**Throughput of material being filtered** (tons or yd<sup>3</sup>/job): \_\_\_\_\_

**Density of material being filtered** (lbs/ft<sup>3</sup>): \_\_\_\_\_

**Grain loading of exhaust stream** (gr/dscf): \_\_\_\_\_  
**Destination of captured particulate** (i.e. outdoor load out bin, back to process bins, etc.): \_\_\_\_\_

**6. OTHER INFORMATION – ATTACH THE FOLLOWING TO THIS APPLICATION**

- Material Safety Data Sheets (MSDS) for all materials used in the process **(required.)**
- Plot plan showing the entire facility, buildings within 200 ft. of proposal, including property lines, cross streets, and location of proposed concrete batch plant **(required.)**
- Flow diagram detailing operations, material flow process, and emission control equipment **(required.)**
- Environmental Checklist (SEPA/DNS) **(required.)** SEPA date: \_\_\_\_\_ DNS date: \_\_\_\_\_
- Manufacturer and/or vendor information on process and air pollution control equipment being installed or modified **(if available.)**
- Any emission and/or source test date **(if available.)**

**7. OWNER, OPERATOR, OR RESPONSIBLE AGENT SIGNATURE:**

I HEARBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION, INCLUDING SUPPLEMENTAL FORMS AND DATA, IS TO THE BEST OF MY KNOWLEDGE COMPLETE AND CORRECT.

Signature:	Date:
Print Name:	Phone:
Title:	Email:

<p>FOR AGENCY USE ONLY</p> <p>Approved by the Spokane Regional Clean Air Agency pursuant to conditions of approval specified in the Approval Order.</p> <p>_____</p> <p>CONTROL OFFICER</p> <p>DATE _____</p> <p>COMMENTS _____</p> <p>_____</p>
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