



For agency use only.  
NOI#:

**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  
GENERAL OPERATIONS**

*This Portable Source Permit (PSP) application must be accompanied by the required base fee for the project, which covers a defined number of 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:  
  
Contact Person:  
Installation Phone #:

Nature of business:  
Total throughput this job (give units):  
Material being processed:  
Estimated date of completion:

**3. PROCESS EQUIPMENT BEING INSTALLED / MODIFIED**

---

Type of process:  
Manufacturer:  
Model number:  
Serial number:  
Capacity rating:  
Total throughput:  
Number of units installed:

Status of equipment (check one): New Used  
Year built/modified:  
Max. production rate (give units):  
Avg. production rate (give units):  
Will this equipment share a stack with other equipment? Yes No  
If yes, please explain:

**4. AIR POLLUTION CONTROL EQUIPMENT BEING INSTALLED / MODIFIED**

---

Type of air pollution control equipment:  
  
Manufacturer:  
Model number:  
Serial number:

Capacity rating:  
Number of units installed:  
Will this equipment share a stack with other equipment? Yes No  
If yes, please explain:

**5. EXHAUST STACK DATA**

Stack height from ground (ft): \_\_\_\_\_  
 Flow rate (SCFM): \_\_\_\_\_  
 Exit temperature (°F): \_\_\_\_\_  
 Internal dimensions of stack/vent (ft): \_\_\_\_\_

How does exhaust exit stack (check one)?  
 Vertical  Horizontal

Will a stack cap/rain guard be installed (check one)?  
 Yes  No (If yes, submit a drawing of the stack cap design.)

**6. MODELING INFORMATION**

All building dimensions (LxWxH, ft): \_\_\_\_\_  
 Distance from stack to nearest property line (ft): \_\_\_\_\_

Describe any dispersion modeling that has been done: (Attach computer printout of results.)

**7. OPERATION INFORMATION FOR EQUIPMENT BEING INSTALLED / MODIFIED**

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

Operating Weeks per Year: \_\_\_\_\_

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

- Plot plan showing the entire facility, buildings within 200 ft. of proposal, including property lines, cross streets, and location of proposed unit **(required.)**
- Flow diagram of the process **(required.)**
- Material Safety Data Sheets (MSDS) for all materials used in the process **(required.)**
- Environmental Checklist (SEPA/DNS) **(required.)** SEPA date: \_\_\_\_\_ DNS date: \_\_\_\_\_
- Any emission data (including particulate, NO<sub>x</sub>, SO<sub>2</sub>, CO, VOC, lead and toxics **(if available.)**)
- Manufacturer and/or vendor information the process and air pollution controls being installed or modified **(if available.)**

**9. 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: _____

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

Updated Dec. 2018