



For agency use only.
NOC#:

SPOKANE REGIONAL CLEAN AIR AGENCY

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NOTICE OF CONSTRUCTION AND APPLICATION FOR APPROVAL FOR INSTALLATION / MODIFICATION OF AN AIR POLLUTION SOURCE ASPHALT PLANT OPERATIONS

*This Notice of Construction (NOC) application must be accompanied by the required **\$9,900** base fee, which covers **92** hours of SRCAA review time. Additional review time will be billed at \$108/hour. See Spokane Clean Air's current fee schedule for more information.*

To complete this application, please "save as" the document onto your computer. Then use your mouse to click and 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 #:
Pit Owner:

Pit Depth (ft.): Pit Number:

Size of Equipment Pad (ft.):

Length Width

Total Asphalt Throughput (check one):

☐ Cu. Yds ☐ Tons

Distance from center pad to nearest property line (ft.):

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:

Pit Name:

Township:

N Range:

EWM Section:

Pit Area (acres):

Site Area (acres):

3. ASPHALT PLANT INFORMATION

Manufacturer:

Model number:

Ambient gas flow (scfm): Avg. Max.

Actual gas flow (acfm): Avg. Max.

Burner fuel(s) used:

Burner fuel consumption (check one): Avg.

Max. ☐ Btu/hr ☐ Gal/hr

Type of asphalt plant (check one):

☐ Rotary dryer ☐ Drum mixer

Type of mix (check one): ☐ Batch ☐ Continuous

Percent of recycled asphalt:

Hourly production rate (tons/hr.):

Avg. Max.

Height of the stack from ground (ft.):

Exhaust stack inside diameter (check one):

☐ ft. ☐ in

Will a stack cap/rain guard be installed (check one)?

☐ Yes ☐ No

Exhaust stack temperature (°F): Avg.

Max. .

4. CONTROL EQUIPMENT INFORMATION

A.) BAGHOUSE INFORMATION (IF APPLICABLE)

Manufacturer:

Model number:

Status of baghouse (check one): ☐ New ☐ Used
☐ Existing

Location of baghouse (i.e. inside, outdoors, etc.):

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

Length of bags: ☐ ft. ☐ in.

Diameter of individual bags: ☐ ft. ☐ in.

Total number of bags:

Total cloth area (ft²):

Particulate control efficiency of baghouse (%):

Baghouse air to cloth ratio (fpm):

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):

B.) WET SCRUBBER SYSTEM INFORMATION (IF APPLICABLE)

Manufacturer:

Model number:

Chemicals used (if any):

Chemical consumption: ☐ Gal/hr ☐ Lb/hr

Wet scrubber water flow (gpm):

Operating Max.

Wet scrubber efficiency (%):

Wet scrubber water temperature (°F):

Operating Max.

Provide a diagram of wet scrubber including dimensions of unit and locations of water spray nozzles.

Provide a copy of each specific chemical MSDS sheet used in the scrubbing process.

C.) VOC CONTROL SYSTEM INFORMATION (IF APPLICABLE)

Manufacturer:

Model number:

Type of VOC control system:

VOC control system efficiency (%):

Fuel(s) used:

Fuel consumption (check one):

☐ Btu/hr ☐ Gal/hr

Retention time (sec):

Afterburner internal chamber dimensions (if present):

Length Width Height

☐ ft. ☐ in.

Afterburner temperature (°F if present):

Operating Max.

5. HOT OIL HEATER INFORMATION

Manufacturer:

Model number:

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:

Rated input capacity of burner:

☐ Btu/hr ☐ Gal/hr

Fuel(s) used:

Number of units on site:

6. EXHAUST STACK / VENT DATA

How does exhaust exit the stack (check one)?

☐ Vertical ☐ Horizontal

Where does stack exhaust (check one)?

☐ Inside ☐ Outside ☐ Variable

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):

7. OTHER INFORMATION – ATTACH THE FOLLOWING TO THIS APPLICATION

- ☐ Plot plan showing the entire facility, property lines, main cross streets, and location of storage piles and equipment at the proposed site **(required.)**
- ☐ Flow diagram detailing operations occurring and material flow including fugitive emissions **(required.)**
- ☐ Environmental Checklist, SEPA, see section #8 **(required.)**
- ☐ Configuration drawing showing location of asphalt plants, asphalt heaters, screens, power units, conveyors, loaders (loading and unloading points), storage piles, haul trucks **(required.)**
- ☐ Copy of particulate source test emission data done within the last 5 years unless SRCOA already has a copy **(required.)**

8. SEPA

I certify that the State Environmental Policy Act (SEPA) has been satisfied for this project on _____ (mo/day/yr)
by _____ (government agency).

The Spokane Regional Clean Air Agency may require that a copy of the final determination and the environmental checklist or environmental impact statement be submitted with this application.

Print this form, sign below, and submit with base fee and any required additional information.

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: Nov 2022