



For agency use only.
NOC#:

SPOKANE REGIONAL CLEAN AIR AGENCY

1610 S. Technology Blvd., Suite 101, Spokane, WA 99224
(509) 477-4727, Fax (509) 477-6828, www.SpokaneCleanAir.org

NOTICE OF CONSTRUCTION AND APPLICATION FOR APPROVAL FOR INSTALLATION / MODIFICATION OF AN AIR POLLUTION SOURCE **BAGHOUSE / DUST COLLECTOR**

This Notice of Construction (NOC) application must be accompanied by the following base fee:

- For operation that exhausts > 1,000 and < 10,000 acfm, the base fee is **\$2,750** and covers **25** hours of SRCAA review time.
- For operation that exhausts $\geq 10,000$ acfm, the base fee is **\$4,510** and covers **42** 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:

Installer Co. Name:
Installer Address:

Contact Person:
Installation Phone #:
Installation Fax #:
Installation Email:

Contact Person:
Installer Phone #:
Installer Fax #:
Installer Email:
Nature of business:
Estimated date of completion:

Type of business (check one): ☐ New ☐ Existing
Facility registered with SRCAA (check one)?
☐ Yes ☐ No

3. BAGHOUSE BEING INSTALLED / MODIFIED

Equipment vented to baghouse:

Baghouse manufacturer:
Model number:
Number of baghouses installed:
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):

4. BAGHOUSE EXHAUST STACK/VENT DATA

Stack height from ground (ft):

Flow rate (SCFM):

Exit temperature (°F):

Internal dimensions of stack/vent (ft):

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

Where does baghouse exhaust (check one)?

☐ Inside ☐ Outside ☐ Variable

Stack height above roof (ft):

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

☐ Yes ☐ No (If yes, submit a drawing of the stack cap design.)

5. OPERATION INFORMATION FOR BAGHOUSE

Business Hours: From a.m. to p.m.

Business Days (check): ☐ Su ☐ Mon ☐ Tue ☐ Wed ☐ Thur
☐ Fri ☐ Sat

Business Weeks per Year:

Operating Hours: From a.m. to p.m.

Operating Days (check): ☐ Su ☐ Mon ☐ Tue ☐ Wed ☐ Thur
☐ Fri ☐ Sat

Operating Weeks per Year:

6. PARTICULATE LADEN AIR STREAM

Describe emission unit controlled by baghouse:

Type of particulate to be filtered (i.e. sawdust, cement, etc.):

Density of material being filtered (lbs/ft³):

Annual throughput of product (lb/yr):

Grain loading of exhaust stream (gr/dscf):

Destination of captured particulate (i.e. outdoor load out bin, back to process bins, etc.):

7. MODELING INFORMATION

All building dimensions w/in 200 ft. of proposal

(LxWxH, ft, Include these dimensions on required plot plan.):

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

Distance from stack to nearest property line (ft):

8. 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 baghouse **(required.)**
- Flow diagram detailing operations occurring and material flow process **(required.)**
- Environmental Checklist, SEPA, see section #9 **(required.)**
- Manufacturer and/or vendor information on baghouse and/or bags **(if available.)**
- Any emission and/or source test date **(if available.)**

9. 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 _____