



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 CONCRETE OR CEMENT BATCH PLANTS

*This Notice of Construction (NOC) application must be accompanied by the required **\$4,510** base fee, which 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:

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

Applicant:
Applicant Address:

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

2. INSTALLATION INFORMATION

Installation Address:

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

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

Installer Co. Name:
Installer Address:

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

3. BAGHOUSE BEING INSTALLED / MODIFIED

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

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

Density of material being filtered (lbs/ft³):

Throughput of material being filtered (tons or yd³/job):

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. EQUIPMENT INFORMATION

Size of equipment pad length (ft): Length Width

Equipment	Manufacturer	Model #	Serial #	Quantity	Maximum Throughput (tons/hr)
Screens					
Conveyors					

Equipment	Manufacturer	Model #	Qty.	Equipment Weight (lbs)	Equipment Width (ft)	Bucket Capacity (yds ³)	Capacity Load Size (tons)	Number of Wheels	Round Trip Travel Distance (ft)
Loader					XXXXXXXX		XXXXXXXX		
Haul Truck						XXXXXXXX	XXXXXXXX		

9. 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, see section #10 **(required.)**
- 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.)**

10. 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