

1. GENERAL INFORMATION

Owner / Operator:

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 ROCK CRUSHER OPERATIONS

This Notice of Construction (NOC) application must be accompanied by the required **\$2,750** base fee, which covers **25** 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.

Applicant[.]

Name of Busines Business Addres	-		Å	Applicant Address:				
Contact Person: Business Phone: Business Fax #: Business Email:	#:		Contact Person: Applicant Phone #: Applicant Fax #: Applicant Email:					
2. INSTALLATION	INFORMATION							
Installation Addre				Operating Dates (mo/day/yr): From to Operating Hours: From a.m. to p.m.				
Contact Person:				Operating Days (check): ☐Su ☐Mon ☐Tue ☐Wed ☐Thur				
Installation Phone #:				□ Fri □ Sat				
Pit Owner:				Operating Weeks per Year:				
Pit Depth (ft.): Pit Number:			N	Max. overall hourly production (tons/hr):				
Pit Name:				Total expected throughput tonnage per job (tons):				
Pit Area (acres):	Site Area (ac	res):		•	0. 0.	• ,		
Township:	N Range:	.00).	F	Product produced:				
EWM Section:				Product density (lbs/ft³):				
Type of air pollut	nent:		Distance from center of equipment pad to nearest property line (ft.):					
3. EQUIPMENT IN	IFORMATION							
Size of equipmen	t pad length (ft):	Length	Width					
Equipment	Manufacturer	Model #	Serial #	Quantity	Maximum Throughput (tons/hr)	Year built or last modified		
Primary Crusher (jaw)								
Secondary								
Crusher Tartian Crusher								
Tertiary Crusher Screens			XXXXXXXXXX	v	XXXXXXXXXXXXX			
Conveyors			XXXXXXXXXX		XXXXXXXXXXXXXXX			
Convoyord			7000000000	`	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			

Equipment	Manufacturer	Model #	Qty.	Equipment Weight (Ibs)	Equipment Width (ft)	Bucket Capacity (yds3)	Capacity Load Size (tons)	Number of Wheels	Round Trip Travel Distance (ft)
Loader					XXXXXXX		XXXXXXX		
Haul Truck						XXXXXXX			

4. OTHER INFORMATION - ATTACH THE FOLLOWING TO THIS APPLICATION

- Plot plan showing the entire facility, property lines, cross streets, and location of storage piles and equipment at the proposed site (**required.**)
- Drawings or a written description of the dust suppression system and any modifications, including types, number and locations of spray nozzles, to SRCAA prior to operations (required.)
- Flow diagram detailing operations occurring and material flow process including fugitive emissions (required.)
- Environmental Checklist, SEPA, see section #5 (required.)
- Configuration drawing showing location of crushers, screens, power units, conveyors, loaders (loading and unloading points), storage piles, haul trucks (required.)
- Any source test emission data including particulate, NO_x, SO₂, CO, VOC, lead and toxics (if available.)

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

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:	FOR AGENCY USE C
Print Name:	Phone:	Approved by the Spok
Title:	Email:	approval specified in t
		CONTROL OFFICER
		DATE

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 Aug 2023