



For agency use only.
NOC#:

SPOKANE REGIONAL CLEAN AIR AGENCY

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(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 SOIL REMEDIATION OPERATIONS

This Notice of Intent (NOI) application must be accompanied by the required \$1,788 base fee, which covers 16 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

Type of soil remediation process:
Installation Address:

Contact Person:
Installation Phone #:
Installation Fax #:
Installation Email:
Type of business (check one): ☐ New ☐ Existing

Operating Dates:
Operating Hours:
Operating Days (check): ☐ Su ☐ Mon ☐ Tue ☐ Wed ☐ Thur
☐ Fri ☐ Sat
Operating Weeks per Year:

Installer Co. Name:
Installer Address:

Contact Person:
Installer Phone #:
Installer Fax #:
Installer Email:
Facility registered with SRCAA (check one)?
☐ Yes ☐ No

Anticipated mean wind speed (mph):
Maximum overall hourly production (tons/hr):
Type of air pollution control equipment:
Distance from center of equipment pad or
remediation area to nearest property line:

3. REMEDIATION EQUIPMENT INFORMATION

Manufacturer:
Model number:
Ambient gas flow (scfm): Avg. Max.
Actual gas flow (acfm): Avg. Max.
Burner fuel(s) used:
Number of burners:
Burner fuel consumption: Avg. Max.
☐ BTU/hr ☐ gal/hr

Exhaust stack temperature (°F):
Avg. Max.
Height of stack from ground (ft):
Exhaust stack inside diameter (check one):
☐ ft ☐ in
Anticipated number of tilling events (if applicable):

What kind of monitoring will be done on this
proposal?

4. SOIL CONTAMINANT INFORMATION

Soil contaminant(s):
Amount of soil to be treated (cu yds):
Average density of contaminated soil (lbs/cu ft):
Soil porosity (%):
Soil silt content (%):
Soil moisture content (%):

Contamination level for each contaminant (ppmv):
Avg. Max.
Amount of uncontrolled emissions that are possible
(lbs/project):
Provide a list of all the expected toxic pollutants.

5. EXHAUST STACK DATA

Stack height from ground (ft):
Flow rate (SCFM):
Exit temperature (°F):
Internal dimensions of stack (ft):
How does exhaust exit the stack (check one)?
☐ Vertical ☐ Horizontal

Stack height above roof (ft):
Does source share a stack with another source?
☐ Yes ☐ No
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 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):

7. 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 remediation area and equipment **(required.)**
- Environmental Checklist, SEPA, see section #8 **(required.)**
- Flow diagram detailing operations occurring and material flow including fugitive emissions and emission control equipment **(required.)**
- Monitoring plan and schedule. **(required.)**
- Soil remediation construction drawing showing cross-section **(required.)**
- Source test data, include soil analysis report or summary of soil testing performed. Include results from most recent source test for the plant unless Spokane Clean Air already has a copy of the results **(if available.)**

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 _____
