



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](http://www.SpokaneCleanAir.org)

### NOTICE OF CONSTRUCTION AND APPLICATION FOR APPROVAL FOR INSTALLATION / MODIFICATION OF AN AIR POLLUTION SOURCE STUMP/TUB GRINDER OPERATIONS

*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:

Applicant:  
Applicant Address:

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

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

#### 2. INSTALLATION INFORMATION

Installation Address:

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

Contact Person:  
Installation Phone #:

Operating Weeks per Year:  
Max. overall hourly production (tons/hr):  
Total expected throughput tonnage per job (tons):

Pit Owner:  
Pit Depth (ft.): Pit Number:

Pit Area (acres):

Site Area (acres):

Township: N Range:

EWM Section:

Type of air pollution control equipment:

Product produced:  
Product density (lbs/ft<sup>3</sup>):  
Distance from center of equipment pad to nearest property line:

#### 3. EQUIPMENT INFORMATION

Size of equipment pad length (ft): Length Width

| Equipment     | Manufacturer | Model # | Serial # | Quantity | Maximum Throughput (tons/hr) | Year built or last modified |
|---------------|--------------|---------|----------|----------|------------------------------|-----------------------------|
| Stump Grinder |              |         |          |          |                              |                             |
| Screens       |              |         |          |          |                              |                             |
| Conveyors     |              |         |          |          |                              |                             |

| Equipment  | Manufacturer | Model # | Qty. | Equipment Weight (lbs) | 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 grinder, screens, power units, conveyors, loaders (loading and unloading points), storage piles, haul trucks **(required.)**
- Any source test emission data including particulate, NO<sub>x</sub>, SO<sub>2</sub>, CO, VOC, lead and toxics **(if available.)**

#### 5. 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 Aug 2023*