

## SPOKANE REGIONAL CLEAN AIR AGENCY

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Website - [www.spokanecleanair.org](http://www.spokanecleanair.org)

# NOTICE OF CONSTRUCTION AND APPLICATION FOR APPROVAL FOR INSTALLATION / MODIFICATION OF AN AIR POLLUTION SOURCE FOR SOIL REMEDIATION OPERATIONS

For Agency Use Only

**NOC #**

### 1. GENERAL INFORMATION

Owner / Operator: _____ Name of Business: _____ Business address: _____  Contact person: _____	Applicant: _____ Applicant 's address: _____  Contact person: _____
Business phone #: _____ Business fax #: _____ Business e-mail: _____	Applicant's phone #: _____ Applicant's fax #: _____ Applicant's e-mail: _____

### 2. INSTALLATION INFORMATION

Type of Soil Remediation Process: _____	
Installation address: _____  Installation phone #: _____ Contact person: _____	Installer Co. name: _____ Installer's address: _____  Phone #: _____ Fax #: _____ Installer's e-mail _____ Contact person: _____
Type of business: <input type="checkbox"/> New <input type="checkbox"/> Existing	Nature of business: _____
Facility registered with SRCAA? <input type="checkbox"/> Yes <input type="checkbox"/> No	Size of Remediation Area (ft.): Length _____ Width _____ Depth _____
Operating Dates: From ___/___/___ To ___/___/___ Operating Hours: From _____ am pm To _____ am pm	Operating Days (circle): <b>Su M Tu W Th F Sa</b> Operating Weeks per year: _____
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: _____
Ambient Gas Flow (scfm): <b>Avg.</b> _____ <b>Max.</b> _____	Actual Gas Flow (acfm): Avg. _____ Max. _____
Burner Fuel(s) Used: _____	Height of Stack from ground (ft.): _____
Number of burners: _____	Exhaust Stack Inside Diameter ( ft. or in. circle one ) : _____
Burner Fuel consumption (Btu/hr, gal/hr, etc.): <b>Average</b>	<b>Maximum</b>
Exhaust Stack Temperature (°F): <b>Average</b>	<b>Maximum</b>
Anticipated number of tilling events (if applicable): _____	
What kind of monitoring will be done on this proposal: _____	

(OVER)

Revised 6/18/07

#### 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 (%):
Amount of soil to be treated (Tons or yds <sup>3</sup> ):	Soil Silt Content (%):
Soil Moisture Content (%):	<b>Provide SCAPCA with a list of all the expected toxic pollutants.</b>
Contamination level for each contaminant (ppmv): <b>Average</b> <span style="float: right;"><b>Maximum</b></span>	
Amount of uncontrolled Emissions that are possible (lbs/project):	

#### 5. EXHAUST STACK DATA

Stack height from ground: (ft)	Flow rate: (SCFM)	Exit temperature: (° F)	Internal stack diameter: (ft)
How does exhaust exit the stack? <input type="checkbox"/> Vertical <input type="checkbox"/> Horizontal		Does source share a stack with another source? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Distance to nearest property line from each stack::			
Will a stack cap / rain guard be installed ? <input type="checkbox"/> Yes <input type="checkbox"/> 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) <b>Include these dimensions on required plot plan</b>	Distance from stack to nearest property line: (ft)
Describe any dispersion modeling that has been done. Attach computer printout of results.	

#### 7. OTHER INFORMATION - ATTACH THE FOLLOWING TO THIS APPLICATION

• Plot plan showing the entire facility, buildings w/in 200 ft of proposal, property lines, main cross streets, and location and size of remediation area and equipment at the proposed site - <b>(required)</b>
• Environmental Checklist (SEPA) / DNS <b>(required)</b> SEPA date _____ DNS date _____
• Flow diagram detailing operations occurring and material flow including fugitive emissions and emission control equipment.- <b>(required)</b>
• Provide SCAPCA with a copy of the Monitoring Plan and Schedule.- <b>(required)</b>
• Soil remediation construction drawing showing cross-section.- <b>(required)</b>
• Source test data: Include soil analysis report or summary of soil testing performed. Also include the results from the most recent source test for the plant unless SCAPCA already has a copy of the results.- (if available)

#### 8. OWNER, OPERATOR, OR RESPONSIBLE AGENT SIGNATURE:

I HEREBY 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:
NAME:	
TITLE:	PHONE NUMBER

FOR AGENCY USE ONLY
<b>Approved by the Spokane Regional Clean Air Agency pursuant to conditions of approval specified in the Approval Order</b>
_____
CONTROL OFFICER
Date _____
Comments _____
_____