

**NOTICE OF CONSTRUCTION AND APPLICATION FOR APPROVAL
 FOR INSTALLATION / MODIFICATION OF A**

**EMERGENCY GENERATOR SET /
 INTERNAL COMBUSTION ENGINE**

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

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	Estimated date of completion: _____

3. INTERNAL COMBUSTION ENGINE / EMERGENCY GENERATOR SET BEING INSTALLED / MODIFIED

What will the internal combustion engine power? <input type="checkbox"/> Emergency generator set, <input type="checkbox"/> Stump Grinder, <input type="checkbox"/> Rock Crusher, <input type="checkbox"/> other _____	
Manufacturer and model number of engine / generator set: _____	
Size of engine (brake hp): _____	Status of unit: <input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Existing
Fuel(s) burned: _____	Rated fuel consumption at full load (gal/hr): _____
Number of cylinders: _____	Is the unit turbocharged? <input type="checkbox"/> Yes <input type="checkbox"/> No Is the unit aftercooled? <input type="checkbox"/> Yes <input type="checkbox"/> No

4. ENGINE / GENERATOR SET 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			
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)			

5. OPERATION INFORMATION FOR ENGINE / GENERATOR

Expected hours of engine operation per year (hrs/year):		Maximum hours of engine operation per year (hrs/year):		
	From	To	Days (circle)	Weeks/year
Business Hours	am/pm	am/pm	S M T W Th F S	
Operating Hours	am/pm	am/pm	S M T W Th F S	

6. MODELING INFORMATION

All building dimensions w/in 200 ft. of proposal: (LxWxH) (ft) Include these dimensions on required plot plan	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, including cross streets and property lines, and location of the proposed engine / generator set - (required)
• Flow diagram of the process, including emission control equipment - (required)
• Environmental Checklist (SEPA) / DNS (required) SEPA date _____ DNS date _____
• Any emission data and/or source test data (including particulate, NO _x , SO ₂ , CO, VOC, lead, and toxics) - (if available)
• Manufacturer and/or vendor information on engine / generator set being installed or modified - (if available)

OWNER, OPERATOR, OR RESPONSIBLE AGENT SIGNATURE:

I, the undersigned, do hereby certify that the information contained in this application is, to the best of my knowledge, accurate and complete.

Type or Print Name	Title
Signature	Date

FOR AGENCY USE ONLY
**Approved by the Spokane
Regional Clean Air Agency
pursuant to conditions
specified in the Approval
Order**

CONTROL OFFICER

Date _____

Comments _____