



For agency use only.
NOC#:

SPOKANE REGIONAL CLEAN AIR AGENCY
 3104 E. Augusta Ave., Spokane, WA 99207
 (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
STUMP GINDER OPERATIONS**

*This Notice of Construction (NOC) application must be accompanied by the required \$2,290.00 base fee for the project. **Additional NOC review fees will be invoiced after the NOC review is complete.** See Spokane Clean Air's current fee schedule for applicable NOC fees.*

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:
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2. INSTALLATION INFORMATION

Installation Address: Contact Person: Installation Phone #: Pit Owner: Pit Depth (ft.): Pit Number: Pit Area (acres): Site Area (acres): Township: N Range: EWM Section: Type of air pollution control equipment:	Operating Dates (mo/day/yr): From to Operating Hours: From a.m. to p.m. Operating Days (check): <input type="checkbox"/> Su <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat Operating Weeks per Year: Max. overall hourly production (tons/hr): Total expected throughput tonnage per job (tons): Product produced: Product density (lbs/ft³): Distance from center of equipment pad to nearest property line:
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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_x, SO₂, 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 Sept.2013