

SPOKANE REGIONAL CLEAN AIR AGENCY

3104 E. Augusta Ave., Spokane, Washington 99207 (509) 477-4727, Fax (509) 477-6828

Website - www.spokanecleanair.org

NOTICE OF CONSTRUCTION AND APPLICATION FOR APPROVAL FOR INSTALLATION / MODIFICATION OF AN AIR POLLUTION SOURCE **FURNACE / OVEN**

This Notice of Construction (NOC) application must be accompanied by the required \$2,290.00 or \$3,525.00 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.

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. FURNACE / OVEN BEING INSTALLED / MODIFIED

| | |
|--|---|
| Manufacturer: _____ | |
| Model No. _____ Rated input capacity of burner (BTU/hr; gal/hr): _____ | |
| Number of units being installed / modified: _____ | Status of equipment: <input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Existing |
| Product produced or treated _____ | |
| Max. batch size: (lbs/load) _____ | Avg. batch size: (lbs/load) _____ |
| Max. production rate: (loads/hr) _____ | Avg. production rate: (loads/hr) _____ |
| Max. Furnace/Oven temperature: (°F) _____ | Avg. Furnace/Oven temperature: (°F) _____ |
| Will this equipment share a stack with other equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If yes, please explain: _____ | |

(OVER)

Revised 4/18/11

4. AFTERBURNER INFORMATION

| | |
|---|--|
| Description: (make & model number) | |
| Afterburner Internal Chamber Dimensions: Length _____ Width _____ Height _____ | Status of equipment: <input type="checkbox"/> New <input type="checkbox"/> Existing Cost of afterburner _____ |
| Fuel(s) burned: | Rated input capacity of afterburner (BTU/hr; gal/hr): |
| Afterburner temperature (°F): Operating _____ Maximum _____ | Afterburner retention time (sec.) _____ Afterburner destruction efficiency (%) _____ |
| Will this equipment share a stack with other equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: | |

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 | | | |
| 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) 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. OPERATION INFORMATION FOR EQUIPMENT BEING INSTALLED / MODIFIED

| | From | To | Days (circle) | Weeks/year |
|------------------------|-------|-------|-----------------------|------------|
| Business | am/pm | am/pm | S M T W Th F S | |
| Furnace/Oven Operating | am/pm | am/pm | S M T W Th F S | |

8. OTHER INFORMATION - ATTACH THE FOLLOWING TO THIS APPLICATION

| |
|---|
| <ul style="list-style-type: none"> Plot plan showing the entire facility, buildings w/in 200 ft of proposal, including cross streets and property lines, and location of the proposed project - (required) Flow diagram of the process, including emission control equipment - (required) Environmental Checklist (SEPA) / DNS (required) SEPA date _____ DNS date _____ Material Safety Data Sheets (MSDS) & annual usage for all materials used in the process - (required) Any source test emission data (including particulate, NO_x, SO₂, CO, VOC, lead, and toxics)- (if available) Manufacturer and/or vendor information on process and air pollution control equipment being installed or modified - (if available) |
|---|

9. OWNER, OPERATOR, OR RESPONSIBLE OFFICIAL or 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. | 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 _____ |
| Type or Print Name: _____ | |
| Title: _____ | |
| Signature _____ | |
| Date: _____ | |