

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 FOR SOIL REMEDIATION OPERATIONS

For Agency Use Only

This Notice of Construction (NOC) application must be accompanied by the required \$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.

1. GENERAL INFORMATION

NOC #

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): Su M Tu W Th F Sa 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): Avg. _____ Max. _____	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.): Average	Maximum
Exhaust Stack Temperature (°F): Average	Maximum
Anticipated number of tilling events (if applicable): _____	
What kind of monitoring will be done on this proposal: _____	

(OVER)

Revised 4/18/11

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 ³):	Soil Silt Content (%):
Soil Moisture Content (%):	Provide SCAPCA with a list of all the expected toxic pollutants.
Contamination level for each contaminant (ppmv): Average	Maximum
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) 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, property lines, main cross streets, and location and size of remediation area and equipment at the proposed site - (required)
• Environmental Checklist (SEPA) / DNS (required) SEPA date _____ DNS date _____
• Flow diagram detailing operations occurring and material flow including fugitive emissions and emission control equipment.- (required)
• Provide SCAPCA with a copy of the Monitoring Plan and Schedule.- (required)
• Soil remediation construction drawing showing cross-section.- (required)
• 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
Approved by the Spokane Regional Clean Air Agency pursuant to conditions of approval specified in the Approval Order

CONTROL OFFICER
Date _____
Comments _____
