

# OLYMPIC REGION CLEAN AIR AGENCY

2940 B Limited Lane NW - Olympia, Washington 98502 - 360-5HJĒ Ĩ F€ – Fax 360-491-6308

## NOC FORM 24B – ROCK CRUSHING PLANT

<b>Company (or owner) name and address:</b>  	<b>Applicant name and address:</b>  
<b>Contact name, phone #, FAX #, and e-mail address:</b>  	<b>Plant operator name, phone #, FAX #, and e-mail address:</b>  
<b>Intended Location:</b> <input checked="" type="checkbox"/> Surface Mining Permit No.: _____ <input checked="" type="checkbox"/> Pit Name: _____ <input checked="" type="checkbox"/> County: _____ <input checked="" type="checkbox"/> SEC. _____, TWNSHP. _____, RANGE: _____ <input checked="" type="checkbox"/> Street address: _____	<b>Previous Location (if applicable):</b> <input checked="" type="checkbox"/> County: _____ <input checked="" type="checkbox"/> Agency approved by: _____ <input checked="" type="checkbox"/> Approval Order No.: _____  <b>Note:</b> If previous location of the plant was outside ORCAA's jurisdiction, then attach copy of Approval Order issued by local air authority.
<b>Compliance with other state and local requirements:</b> Operation of the portable plant must also comply with any applicable State Environmental Policy Act (SEPA), State Sand and Gravel General Permit, or local government requirements. By marking the box below and signing this form, the applicant declares that this condition is satisfied for the intended location of the portable plant. <input type="checkbox"/> All applicable SEPA, Sand and Gravel General Permit, and local government requirements are satisfied for the intended location of the portable plant.	
<b>Rock/Concrete Crushers</b> - For each crusher indicate type, make, model # and rated capacity (tons per hour): 1. _____ 2. _____ 3. _____	
<b>Screening Equipment</b> - Indicate make, model number and top surface area (square feet) of each screening deck: 1. _____ 2. _____ 3. _____	
<b>Plant Electricity Needs</b> - Check boxes that apply: <input type="checkbox"/> Plant electricity from local utility. <input type="checkbox"/> Diesel generator on site: o Generator size _____ hp _____ kW o Generator fuel type: _____	<b>Dust Control Measures</b> – Check those precautions that will be used and provide the specified information: <input type="checkbox"/> Water spray using on-site water truck or sprinkler system. <input type="checkbox"/> Reduced vehicle speeds _____ mph <input type="checkbox"/> Vehicle track-out measures (Please describe.) <input type="checkbox"/> Water spray (Show location on process flow diagram.) <input type="checkbox"/> Other (Please describe on separate paper.)
<b>Other Required Information</b> - The following information is needed to complete the application: <input checked="" type="checkbox"/> Process flow diagram showing sequence of crushers, screens and conveyors, and location of water spray points. <input checked="" type="checkbox"/> Site map showing pit property lines, location of crushing plant and location of major haul roads. <input checked="" type="checkbox"/> If previous location of the plant was outside ORCAA's jurisdiction, then attach copy Approval Order issued by local air authority. <input checked="" type="checkbox"/> NOC Application Fee of \$200.	
<b>Certification</b> – I, the undersigned, do hereby certify that the information contained in this notification is, to the best of my knowledge, accurate and complete. Signature: _____ Date: _____	
<b>Agency Review</b> Conditions of Approval: _____ Order #: _____ Reviewed by: _____ Date: _____	