

OLYMPIC REGION CLEAN AIR AGENCY

2940 Limited Lane NW - Olympia, Washington 98502 - 360-539-7610 – Fax 360-491-6308

FORM 1- NOTICE OF CONSTRUCTION

TO CONSTRUCT - INSTALL - ESTABLISH OR MODIFY AN AIR CONTAMINANT SOURCE

Form 1 Instructions:

1. Please complete all the fields below. **This NOC application is considered incomplete until signed.**
2. If the application contains any confidential business information, please complete a Request of Confidentiality of Records (www.orcaa.org/forms).
3. Duty to Correction Application: An applicant has the duty to supplement or correct an application. Any applicant who fails to submit any relevant facts or who has submitted incorrect information in a permit application must, upon becoming aware of such failure or incorrect submittal, promptly submit supplementary factors or corrected information.

Business Name: City of Lacey	For ORCAA use only File No: 837 County No: 67 Source No: 828 Application No: 22NOC1572
Mailing Address: 420 College St SE, Lacey, WA 98503	Date Received: <div style="color: red; font-weight: bold; font-size: 1.2em;">Received</div> <div style="color: red; font-weight: bold; font-size: 1.2em;">AUG 03 2022</div> <div style="color: red; font-weight: bold; font-size: 1.2em;">ORCAA</div>
Physical Address of Project or New Source: 8824 Milbanke Dr SE, Olympia, WA 98513	
Billing Address: 420 College St SE, Lacey, WA 98503	
Project or Equipment to be installed/established: Madrona pH Treatment project-new generator	
Anticipated startup date: <u>12 / 31 / 2025</u> Is facility currently registered with ORCAA? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
This project must meet the requirements of the State Environmental Policy Act (SEPA) before ORCAA can issue final approval. Indicate the SEPA compliance option: <input checked="" type="checkbox"/> SEPA was satisfied by <u>City of Lacey, WA</u> (government agency) on <u>09/01/21</u> (date) - Include a copy of the SEPA determination <input type="checkbox"/> SEPA threshold determination by _____ (government agency) is pending - Include a copy of the environmental checklist <input type="checkbox"/> ORCAA is the only government agency requiring a permit - Include ORCAA Environmental Checklist <input type="checkbox"/> This project is exempt from SEPA per _____ (WAC citation).	
Name of Owner of Business: City of Lacey	Agency Use Only
Title:	
Email: _____ Phone: 360-491-5600	
Authorized Representative for Application (if different than owner): Puna Clarke, P.E.	
Title: Project Manager/Utility Engineer	
Email: pclarke@ci.lacey.wa.us Phone: 360-459-4494	
I hereby certify that the information contained in this application is, to the best of my knowledge, complete and correct.	
Signature of Owner or Authorized Representative: (sign in Blue Ink)	
	Date: <u>7-21-22</u>
IMPORTANT: Do not send via email or other electronic means. ORCAA must receive Original, hardcopy, signed application and payment prior to processing application.	

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FORM 1D- Contact Information

Business Name City of Lacey	FOR ORCAA USE
Physical Site Address (Street address, city, state, zip) 8824 Milbanke Dr SE, Olympia, WA 98513	FILE # 837
	CTY # 67
	SRC # 828
Previous Business Name (if applicable)	Date Received Received AUG 03 2022 ORCAA

Contact Information

Inspection Contact	
Name Lance Sponberg	Title Water production supervisor
Phone 360-413-7794	Email lsponber@ci.lacey.wa.us
Billing Contact	
Name Puna Clarke, P.E.	Title Project Manager/Utility Engineer
Phone 360-459-4494	Email pclarke@ci.lacey.wa.us
Emission Inventory Contact	
Name Travis Lewis	Title Senior LiftStation Supervisor
Phone 360-522-3341	Email tlewis@ci.lacey.wa.us
Complaint Contact	
Name City of Lacey-Public Works	Title n/a
Phone 360-491-5600	Email pwfrontcounter@ci.lacey.wa.us
Permit Contact	
Name Puna Clarke, P.E.	Title Project Manager/Utility Engineer
Phone 360-459-4494	Email pclarke@ci.lacey.wa.us

The **inspection contact** is the on-site person responsible for the everyday operation of the site and is available for inspections.

The **billing contact** is the person invoices are sent.

The **emission inventory contact** is the person requests for emissions information and material use information are sent.

The **complaint contact** is the person who receives and responds to complaints received on-site and who is contacted regarding complaints ORCAA receives.

The **permit contact** is the person responsible for filling out permit applications and receiving approval from ORCAA.

DETERMINATION OF NONSIGNIFICANCE

SEPA/Case Number: 21-264

Description of Proposal: Construction of a new aeration treatment building to provide pH adjustments for corrosion control. The proposed treatment building will be constructed on an existing undeveloped parcel that is 0.17 acres. The overall project consists of four contiguous City owned parcels. Each having areas of 0.17 acres. There are four existing buildings on the combined site containing well and chlorination equipment. The proposed project included approximately 0.12 acres of impervious surface.

Proponent: City of Lacey

Location of Proposal: 8820-8826 Milbanke Dr SE, Olympia WA. Parcel

Lead Agency: City of Lacey Community Development Department

Threshold Determination: As provided by RCW 43.21C.240 and WAC 197-11-158, the lead agency has determined that the requirements for environmental analysis, protection, and mitigation measures have been adequately addressed in the applicable development regulations and comprehensive plan adopted under Chapter 36.70A RCW and in other local, state, or federal laws or rules. Therefore, this proposal is not likely to have a significant adverse impact upon the environment, an Environmental Impact Statement is not required under RCW 43.21C.030(2)(C), and the City of Lacey will not require additional mitigation measures under SEPA. This decision was made after review of an Environmental Checklist and other information on file with the City. This information is available to the public upon request.

There is no comment period for this DNS.

This DNS is issued under 197-11-340(2); the lead agency will not act on this proposal for 14 days. Comments must be submitted by 9/15/2021

The comment period, pursuant to WAC 197-11-355, was combined with the Notice of Application comment period, using the Optional DNS Process. The comment period closed on [Click **here** and type date].

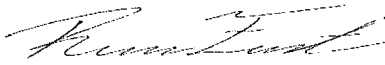
Assigned Staff Person: Reace Fant, Assistant Planner

Responsible Official: Rick Walk, AICP, Director of Community & Economic Development

Address: 420 College Street SE, Lacey, WA 98503

Phone: (360) 491-5642 **Fax:** (360) 438-2669

Date: 9/1/2021 **Signature:** _____



Appeal Deadline: 5:00 p.m. on 9/15/2021

NOTE: Pursuant to RCW 43.21.C.075 and Lacey City Code 14.24.170(A), a project denial based upon environmental information, and a conditioned or mitigated Determination of Nonsignificance (DNS) may be appealed by any agency or aggrieved person. Appeals are filed either with the Community Development Department when there is also an underlying governmental action or with the City Council if there is no underlying governmental action. Appeals to the City Council must be filed within fourteen (14) days of the issuance of the written decision (refer to the Lacey City Code for time periods on appeals filed with the Community Development Department).

cc: Department of Ecology

4. EMISSION POINT/STACK INFORMATION [] Check here if the engine has more than one stack or has a continuous pollutant emission monitor and repeat this section for each.

Emission point number # _____ (If unknown leave blank) [X] New [] Existing
Stack outlet height from ground level (ft) _____
Diameter of stack outlet (inches) _____ or Outlet cross-section area (square inches) _____
Direction of outlet (check one) [] Horizontal [] Vertical End of outlet (check one) [] Open/hinged flap [] Rain cap
Exhaust rate at typical operation (acfm) _____ Exhaust temperature at typical operation (°F) _____

5. AIR TOXIC ASSESSMENT INFORMATION.

Distance from engine to the property line of the nearest residence (ft) 80 or (check if) [] Greater than one mile
Distance from engine to the property line of the nearest school¹ (ft) _____ or (check if) [X] Greater than 1000 ft
Describe the nearest non-residential, non-school site (check one) [] Industrial [] Commercial [] Hospital
[] Day care center [X] Other Municipal
Distance from engine to the property line of the nearest non-residential, non-school site(ft) 2600 or [] Greater than one mile
1. K-12 and more than twelve children only.

6. FUEL DATA Complete the table below for each fuel burned. If you are using a fuel other than those listed in the fuel table, attach a fuel analysis indicating the higher heating value, sulfur content, and nitrogen content. Please clearly indicate the measurement unit that corresponds to the information you are submitting. [] Check here if you are using more than two fuels, and attach a copy of this page listing the additional fuels.

Table with 2 main columns: Primary Fuel and Secondary Fuel. Each column contains fields for Fuel Name, Maximum Fuel Use Rate, Annual Fuel Usage, Typical Heat Content, Sulfur Content, and a table of Emission Factors (Pollutant Name, Emission Factor, Units, Basis Code, Control Factor) for Particulates, Organics, Nitrogen Oxides, and Carbon Monoxide.

- 1. Fuel Table: Diesel, Natural Gas, Bio Diesel B100, Landfill Gas, Bio Diesel B20 Blend, Digester Gas, Gasoline, Liquid Petroleum Gas (LPG)
2. Maximum fuel use rate units: gallon/hr for liquid fuels and SCF/hr for gaseous fuels. (SCF =Standard Cubic Foot)
3. The annual fuel usage is the actual or projected engine fuel consumption over a rolling 12-month time period. Annual usage units: gallons for liquid fuel, therms for natural gas, and SCF for other gaseous fuels. (therm = 100,000 BTUs, BTU =British Thermal Unit)
4. If you are using diesel, natural gas, or gasoline, you may skip this entry. Heat content units: BTU/gallon for liquid fuels, BTU/SCF for gaseous fuels. Sulfur content units: weight % for liquid fuels, ppmv for gaseous fuels. (ppmv = parts per million by volume)
5. Emission factors may be reported as gram/brakehp-hr, or as lb per gallon, or as lb per therm, or as lb per SCF.
6. See the Control Efficiency/Emission Factor Basis Code table under Section 3 on page 1 of this form.
7. Place a check in this column if the emission factor applies to emissions after an add-on control device.

7. CERTIFICATION I hereby certify that all information contained herein is true and correct. (Please sign and date this form)

Puna Clarke, PE Utility Engineer Puna Clarke 7-21-22
Name of person certifying (print) Title of person certifying Signature of person certifying Date

Phone Number: _____ Email: _____



OLYMPIC REGION CLEAN AIR AGENCY (ORCAA)

2940 Limited Lane NW, Olympia, WA 98502
Engineering Division (360) 539-7610
Website: orcaa.org fax (360) 491-6308

**Form 18
Internal Combustion Engines**

NOC #	Date	File #
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Form 18 is to be completed for all internal combustion engines except turbines. (For turbines, submit Form 17). Submit one form for each engine. If this is a new engine or a modification to an existing engine, your application must also include Form 5 and an analysis of toxic air pollutant emissions in accordance with Chapter 173-460 of the Washington Administrative Code. Completion of Form 5 requires determining daily and annual toxic air pollutant emissions based on the maximum potential to emit of the engine. Additional forms and all ORCAA regulations and rules are available on the Agency's web site. Contact ORCAA's Engineering Division at the above telephone number if you need assistance completing this form. Please include the engine manufacturer's equipment specification sheet or brochure if one is available.

1. SUMMARY New Engine Engine Modification New/Additional Fuel Other:

Company Name City of Lacey County No.* _____

Source Description Madrona Well Site-8824 Milbanke Dr, Olympia Source No.* _____

Initial Date of Operation 12-31-2025 (Not required for modification of an existing permitted source) *(If unknown leave blank)

Operating Schedule Typical hrs/day 1 Days/week 1 Weeks/yr 1 Maximum hrs/day 1

2. ENGINE INFORMATION Check here if applying for approval of portable equipment.
(See ORCAA Regulation 6.1.1 for portable equipment requirements)

Engine Type: (Check one) 4 Stroke 2 Stroke Compression Ignition (Diesel) or 4 Stroke 2 Stroke Spark Ignition

Engine Manufacturer TBD-will notify ORCAA Model _____ Model Year _____

EPA/CARB Engine Family Name _____ Engine Serial No. _____

Engine Displacement _____ (cu in) Maximum rated output (bhp) _____ Typical load as % of bhp rating _____

Is this an emergency/standby engine? Yes No

(Complete and check all that apply)

Certification: EPA Certified CARB Certified _____

None (If None is checked, please indicate below the items applicable to this engine.)

Naturally aspirated Supercharged Turbocharged Inter-cooled After-cooled

Timing retard ≥ 4° Lean-burn Rich-burn

Primary Use: Electrical generation Cogeneration Pump driver Fire pump driver

Compressor driver Tub grinder driver Other: _____

3. CONTROL DEVICE INFORMATION Complete this section only if the engine exhausts to an add-on control device.

Check here if the engine has more than one add-on control device and repeat this section for each. Include manufacturer's technical specification sheet or brochure for each control device.

Control device number # _____ (If unknown leave blank) New Existing

Device type: Diesel catalyzed particulate filter Oxidation catalyst Selective catalytic reduction (SCR)

Non-selective catalytic reduction (NSCR or 3-way catalyst) Other: _____

Make, Model, and Rated Capacity _____

Control device control efficiencies at typical operation (Use the basis codes listed below. If unknown leave blank)

- Control Efficiency/Emission Factor Basis Codes: (Submit supporting documentation if available)
- (1) Source testing or other measurement by plant
 - (2) Source testing or measurement by ORCAA
 - (3) Specification from vendor
 - (4) Material balance by plant using knowledge of process
 - (5) Material balance by ORCAA
 - (6) EPA Document AP-42 Emission Factors
 - (7) Taken from literature other than AP-42
 - (8) Guess
 - (9) EPA/CARB Certification

Pollutant Name	Wt % Reduction	Basis Code
Particulates		
Organics		
Nitrogen Oxides		
Sulfur Dioxide		
Carbon Monoxide		
Others – <input type="checkbox"/> Check here and attach a separate list of pollutants. Include the basis code and the control efficiency.		

SECTION: 32 TOWNSHIP: 18N RANGE: 1W

- SITE LAYOUT KEY NOTES:**
- 2,933 SF TREATMENT BUILDING
 - CONCRETE SIDEWALK PER CITY STD DWG 4-9. SEE SHT C-8. WIDTH SHALL MATCH EXIST
 - 6 FOOT TALL BLACK VINYL COATED CHAIN LINK FENCE, SEE DET 3, SHT C-5
 - 23 FOOT WIDE SLIDE GATE, SEE DET 1, SHT C-4
 - 24 FOOT WIDE TYPE I CONCRETE DRIVEWAY PER CITY STD DWG 4-7. SEE SHT C-5
 - 500 KW STANDBY GENERATOR WITH DUAL WALL SUB-BASE SPECIFICATION SECTION 26 32
 - 16" SOUND ATTENUATING WALL, SEE DET 1, SHT C-5
 - AC PAVEMENT PER DET 4, SHT C-5
 - METER VAULT, SEE DET 1, SHT C-12
 - BOLLARD, SEE DET 2, SHT C-5
 - CONCRETE CURB AND GUTTER PER CITY STD DWG 4-14. SEE SHT C-8
 - TYPE I CATCH BASIN PER WSDOT STD PLAN B-5.2-0-3. SEE SHT C-7
 - CONNECT TO EXIST CHAIN LINK FENCE
 - 16 FOOT WIDE SWING GATE, SEE DET 2, SHT C-4
 - GATE OPERATOR POST, SEE DET 5, SHT C-4
 - CONCRETE PAD FOR SAMPLING STATION PER CITY STD DWG 6-17. SEE SHT C-12
 - CONCRETE GENERATOR FOUNDATION, SEE STRUCTURAL SHTS.
 - 8" CSTC PER WSDOT 4-04 SEE DET 5, SHT C-12

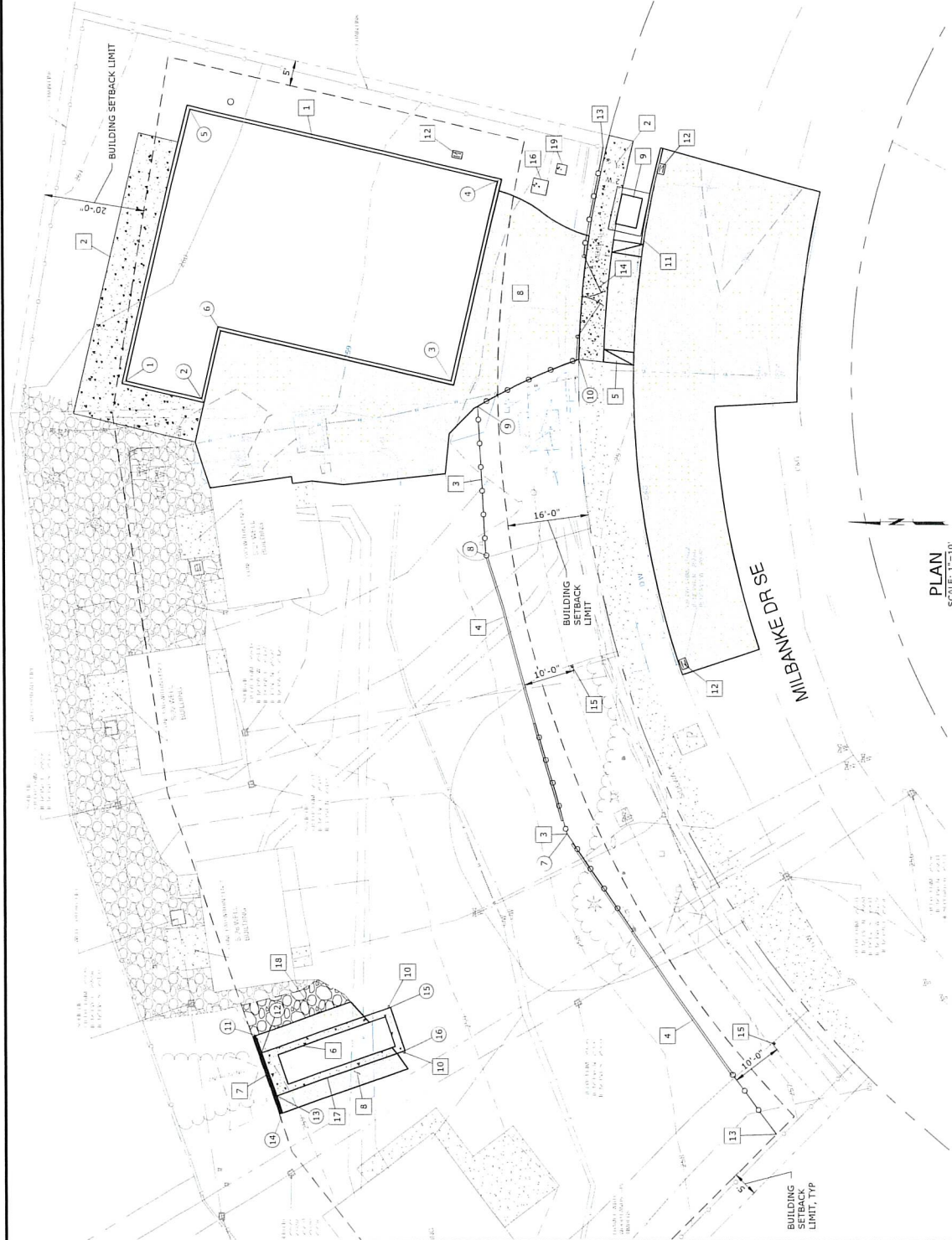
SITE LAYOUT POINTS

PT NO.	DESCRIPTION	NORTHING	EASTING
1	BUILDING NW CORNER	N629954.75	E78432.63
2	BUILDING SW CORNER (MID)	N629918.63	E78428.79
3	BUILDING SW CORNER (BOT)	N629899.09	E78432.13
4	BUILDING SE CORNER	N629959.40	E78473.00
5	BUILDING NE CORNER	N629921.67	E78487.77
6	BUILDING SE CORNER (MID)	N629915.15	E78443.06
7	FENCE BEND	N629841.15	E78332.23
8	FENCE BEND	N629861.35	E78397.01
9	FENCE BEND	N629863.54	E78426.78
10	FENCE BEND	N629844.28	E78437.25
11	ACOUSTIC WALL CORNER (E)	N629908.79	E78303.76
12	GEN FOUNDATION CORNER (NE)	N629907.51	E78299.99
13	GEN FOUNDATION CORNER (NW)	N629904.83	E78292.28
14	ACOUSTIC WALL CORNER (W)	N629903.54	E78288.48
15	GEN FOUNDATION CORNER (SE)	N629882.57	E78308.64
16	GEN FOUNDATION CORNER (SW)	N629879.90	E78300.93

NOTES:

- GENERATOR FOUNDATION AND ACOUSTIC WALL LOCATION TO BE COORDINATED WITH FINAL EQUIPMENT SELECTION.

90% SUBMITTAL



<p>CITY OF LACEY, WASHINGTON MADRONA pH TREATMENT PROJECT LACEY CONTRACT #PW 2020-26</p>	<p>PROJECT NO.: 21-0028 SCALE: AS SHOWN DATE: MAY 2022</p>
	<p>SHEET C-3 9 of 137</p>
<p>PREPARED BY: [Signature]</p>	<p>NO. DATE BY REVISION</p>
<p>NOTICE: IF THIS BAR DOES NOT MEASURE 1" IN LENGTH, IT IS NOT TO SCALE.</p>	<p>SCE DESIGNED: [Signature] BAW DRAWN: [Signature] NCR CHECKED: [Signature]</p>
	<p>PLAN SCALE: 1"=10'</p>

