



AIR QUALITY MANAGEMENT DISTRICT

306 EAST GOBBI STREET
UKIAH, CA 95482
(707) 463-4354

AIR QUALITY APPLICATION FORM # 207.28

Section I TYPE OF PROJECT

- Road or Railway Construction
- Road Maintenance/ Repair
- Housing Development
- Commercial Property Development
- Trenching/ Utilities Work
- Other (please describe):

INSTRUCTIONS (Also review List & Criteria)

- A. This application must be filled out completely with all statements answered. Please type or print in black or blue ink. For permitting assistance please call the District office at 463-4354.
- B. Applications are incomplete unless accompanied by one copy of each plan, specification, and drawing required. The District may request additional information.
- C. This application must be signed by a responsible member of the organization that is to operate the equipment for which the application is made. Incomplete applications will delay the review process.
- D. Mail the signed application to: Mendocino County AQMD, 306 E Gobbi Street Ukiah, CA, 95482
- E. Construction and/or operation prior to obtaining a permit from the District is a violation of District Regulations and subject to penalties as defined in Regulation 1, Rule 1-300(i)

Section II APPLICANT INFORMATION

Company Name: _____

Mailing Address: _____

City _____ State _____ Zip _____

Contact Name: _____ Phone Number: _____

Application Type: **Naturally Occurring Asbestos (NOA) Dust Mitigation Plan**

Section III PROJECT DESCRIPTION

Project Location:

Address: _____ City: _____

Project Number: _____ Total Project Area (sq. ft/ acres/ mile): _____

Will This Project be Located in an Identified Naturally Occurring Asbestos (NOA) Area? Yes No

Is this project exempt from 93105, Title 17, CCR?: Yes No

Operation Schedule: Hrs/Day: _____ Days/Week: _____ Weeks/Year: _____

Estimated Starting Date: _____ Estimated Completion Date: _____

Section IV AUTHORIZED REPRESENTATIVE INFORMATION

Signature of Responsible Person _____ Date _____		(District Use Only) <i>District Receipt Stamp:</i>
Name (Please Print) _____		
Title _____		
Phone Number _____	Fax Number _____	
		Application #: _____
		Facility ID #: _____



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Duplicate this page as necessary for additional process equipment. List all equipment that produces air emissions.

Section V PROJECT INFORMATION

Site Information

Areas/ Facilities within ¼ mile (400 meters) of project (Check ALL that apply)

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> Residential | <input type="checkbox"/> Hospital / Nursing Home | <input type="checkbox"/> Other (please describe) |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> School | <input type="checkbox"/> Rural |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Park/ Playground | |

Additional Information:

Construction and Grading Operations Checklist for Projects Greater than One (1) Acres:

Asbestos Air Monitoring Plans:

Track-Out onto Paved Public Roads:

Active Storage Piles:

Inactive Areas and Storage Piles:

Traffic on Un-Paved Onsite Roads, Parking and Staging Areas:



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Earth Moving Activities:

Off-Site Transport:

Post-Construction Stabilization of Disturbed Areas:





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Duplicate this page as necessary for each diagram.

Section IX

FACILITY AND PROCESS FLOW DIAGRAM

Include adjacent buildings and streets on facility drawings.

Include all associated processes on process flow diagrams.

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