

FOR CONTRACT NO.: 02-4E9604

INFORMATION HANDOUT

MATERIALS INFORMATION

Tehama County Fugitive Dust Permit

ROUTE: 02- TEH - 172 - 0.0/8.9

Instructions for Tehama County Air Pollution Control District Permit Application Form



Please Note: No person shall knowingly make any false statement in any application for a permit, or in any information, analysis, plans or specifications submitted in conjunction with the application or at the request of the Air Pollution Control Officer (APCO). Any applicant who fails to submit any relevant facts or who has submitted incorrect information in the Permit Application Form shall upon becoming aware of such failure or incorrect submittal, promptly submit such supplementary factors or corrected information to the APCO. The APCO may request additional information, as needed, to supplement the Permit Application form. If sufficient space is not available in the form, please attach additional information.

- A. **Estimated Construction Schedule:** Please enter the start date and the approximate finish date.
- B. **Operation and Ownership:** The purpose of this section is to provide required information to identify the organization/facility name, address, and appropriate project contact to be used for Authority-to-Construct or Permit-to-Operate applications, Please note that this information provided in this section of the form will appear exactly as indicated in the permit issued. In addition, please note that all permits and billing information will be sent to the first address listed in this section.
1. Fill in the legal name of the Business, Company, Individual Owner, or Governmental Agency.
Fill in the location of the partnership, company, corporation or agency to be named on the permit.
Identify the name and address of the contractor, consultant, or contact person if different from the person identified above for the organization.
 2. Fill in the legal name of the Business, Company, Individual Owner, or Governmental Agency.
Fill in the location of the facility where the equipment is or is proposed to be installed.
Identify the name and address of the contractor, consultant, or contact person.
 3. Fill in the legal name of the Business, Company, Individual Owner, or Governmental Agency.
Fill in the location for this project.
Identify the name and address of the contractor, consultant, or contact person for this project.
- C. **Reason for Application Submittal:** Please check the one box that best describes the permit action pursued in this application form. If there is not an appropriate box, please check "Other" and fill in a brief description. As indicated on the application form, please provide any related permit number(s) and expiration dates for the project if known.
1. Is this facility subject to Title V Permitting Requirements. For additional information see 40 CFR Part 70.
 2. Please indicate whether the proposed permit unit will be located within 1,000 feet from the outer boundary of a school site. For additional information, see Health and Safety Code Sections 42301.6(f).
 3. Please indicate if you are submitting data or information that is confidential or proprietary in nature.
 4. Please indicate if all stationary sources with emissions greater than 25 tons per year owned or operated by applicant in California are in compliance with all rules and regulations.
- D. **General Nature of Business or Agency:** Please provide a brief description of the general nature of the business or agency activity (e.g. auto body painting, gasoline storing & dispensing, grain elevator, sand & gravel operations, asphalt/concrete plant, oil production, oil refinery, etc).
- E. **District Specific Questions:** This section is provided for explanations of district specific questions.
- F. **Name of Responsible Party:** Indicate the responsible party to be billed for additional Air Pollution Control District staff time expended beyond the minimum permit application fee.

Tehama County Air Pollution Control District

1750 Walnut St., (P.O. Box 8069)
Red Bluff, CA 96080
(530) 527-3717

Application Fee: \$142.50

Late Application Fee: \$211.75

Permit Application Form

(Application must be typewritten or printed in ink. Please provide all pertinent information requested. Incomplete applications are not acceptable. Include all supplemental forms and applicable fees when submitting application.)

A. **Estimated Construction Schedule:** Start: Unknown Finish: In operation now

B. **Operation and Ownership:** *Please specify the legal name and address of the partnership, company, corporation or agency to be named on the permit. All permits and billings will be sent to this address.*

1. Name: California Department of Transportation
Address: 1657 Riverside Drive
City: Redding State: CA Zip: 96001 Phone: 530-225-3035
Contact Person/Title: Jeffrey H. Pizzi / Maint. Facilities Engineer FAX/E-Mail: jeff.pizzi@dot.ca.gov
fax 530-225-3390

Please specify the facility name, street address, and phone number where the equipment is or is proposed to be installed.

2. Name: Caltrans - Mineral Maintenance Station
Address: PO Box 546 (1 mile west of Mineral. Post mile 82.21)
Latitude: N 40.3473204N Longitude: W 121.6123005W
City: Mineral State: CA Zip: 96063-0069 Phone: 530-595-4433
Contact Person/Title: Michael Mason FAX/E-Mail: _____

Please specify the name, address, and phone number of the contractor, consultant, or contact person for this project.

3. Name: See No. 1 above
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____
Contact Person/Title: J FAX/E-Mail: _____

C. **Reason for Application Submittal:**

- | | |
|--|---|
| <input type="checkbox"/> Build/install new emissions unit/process | <input type="checkbox"/> Modify existing permitted unit/process |
| <input type="checkbox"/> Change in existing permit conditions | <input type="checkbox"/> Nature of Modification _____ |
| <input checked="" type="checkbox"/> Permit to Operate for an existing unit | <input type="checkbox"/> Relocation of _____ |
| <input type="checkbox"/> Exempt Engine | <input type="checkbox"/> Equipment-Previous location _____ |
| Previous business name _____ | <input type="checkbox"/> Other _____ |

Please provide related permit number(s) and expiration date(s) for this project (if applicable). If you do not know the number, please leave blank. _____

4. Is this facility subject to 40 CFR Part 70 - Title V Permitting Requirements? Yes No
5. Will the proposed unit operate within 1,000 feet from the boundary of a K-12 school site? Yes No
6. Do you claim confidentiality of data with respect to information submitted? Yes No
7. Are all stationary sources with emissions greater than 25 tons per year owned or operated by applicant in California, in compliance with all air pollution rules and regulations? Yes No

TEHAMA COUNTY AIR POLLUTION CONTROL DISTRICT
1750 WALNUT STREET (P.O. BOX 8069)
RED BLUFF, CA 96080
(530) 527-3717

DEVICE INFORMATION SHEET
(List all data* applicable to your device)

Company: CA Dept. of Transportation (Caltrans) Date: October 25, 2012

Address: 1657 Riverside Drive, Redding, CA 960010

Contact person: Jeff Pizzi Phone: 530-225-3035

Device description: Standby diesel generator

Manufacturer: Dayton Model: 08938-1 Serial #: 890288

Engine Serial# G2640 Physical location of device: Caltrans Mineral MS, Highway 36, Mineral CA

1. Operating schedule: During power outages only r s / D a y _____ D a y s / W k _____ Wks/Yr
2. Material processed data: Use appropriate units such as cubic feet, board feet, or other units of throughput.

Type of material Processed	Average Hr/Wk/Mo	Maximum Hr/Wk/Mo	Annual Throughput
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Storage capacity for each material listed in cubic feet (ft³):

_____	_____	_____	_____
_____	_____	_____	_____

Quarterly throughput:	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec
	_____ %	_____ %	_____ %	_____ %
	_____ %	_____ %	_____ %	_____ %

3. Fuel specification data:

Type of fuel: Diesel Sulfur content: .0015 %

Fuel heating value (circle unit): BTU/gal./lb./ft³

Fuel consumption: Average BTU/hr _____ Maximum BTU/hr _____

4. Electrical energy use: KWH _____ KVA _____ HP/hr _____
5. Exhaust stack data:
 Height above ground _____ Circumference _____
 Diameter _____ Other information _____
6. Exhaust air data: _____ ft³/minute of average airflow
 _____ ft³/minute of maximum airflow
 (circle unit used) _____ °F or °C Temperature/airflow
 _____ % water by volume/airflow

7. Maximum pollution estimates are to be reported in parts per million volume (ppmv), parts per million weight (ppmw), or grains per dry standard cubic foot (gr/dscf) that may be emitted to ambient air. In addition, calculate and report emissions in pounds per hour (lbs/hr) and list the expected control device efficiency by percentage (%):

	Specify by ppm _v , ppm _w , or gr/dscf	Projected Emissions	Control Device Efficiency
Sulfur Oxides	_____ ppm	_____ lbs/hr	_____ %
Nitrogen Oxides	_____ ppm	_____ lbs/hr	_____ %
Carbon Monoxide	_____ ppm	_____ lbs/hr	_____ %
Hydrocarbons	_____ ppm	_____ lbs/hr	_____ %
Particulate Matter	_____ gr/dscf	_____ lbs/hr	_____ %
Particulate Matter ≤ 10μ (PM ₁₀)	_____ gr/dscf	_____ lbs/hr	_____ %
Other:	_____		

8. Use this space for additional information or for a description of all ducted and fugitive emission points and corresponding emissions relative to the above referenced device.

This is a low usage generator. No additional information is available. _____

* Use appropriate unit(s), such as gallons per year (gal/yr), tons per year (tons/yr), pounds per day (lbs/day), pounds per hour (lbs/hr), cubic yards per shift (yds³/shift), horsepower hour (HP/hr), British thermal units (BTU), kilowatt hours (KWH), etc.