

Dust Control Permit – Change/Transfer of Responsibility

WASHOE COUNTY HEALTH DISTRICT * AIR QUALITY MANAGEMENT DIVISION

PO Box 11130, Reno NV 89520-0027 * (775) 784-7200 * Fax (775) 784-7225

To transfer, add or remove the Owner/Developer, Engineer/Consultant, General Contractor or the Grading/Excavating Contractor from the Washoe County Air Quality Management Dust Control Permit. *This form must be submitted to the Air Quality Management Division, 10 working days before the change of information.*

Dust Control Permit No: _____ Name of Development: _____

Development Address: _____ Expiration Date of Permit: _____

Company to be removed or replaced on this Permit: _____

The following contact information is for the new **(circle one)**:

Owner/Developer * Engineer/Consultant * General Contractor * Grading/Excavating Contractor

New Company: _____

Contact Person: _____ Title: _____

Phone number: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

In requesting the company's name being removed from the Dust Control Permit for this Development, I certify that **(circle)**:

- 1) All of our company's work is complete and all contractual obligations at this site are fulfilled and/or terminated.
- 2) All of our company's equipment has been removed from the site and will not return for later work.
- 3) Notification of completion and/or departure from the development is made to the persons or companies with whom we contracted.

Under penalty of perjury, to the best of my knowledge formed after a reasonable inquiry, the information supplied in this document is true and correct.

Signature

Date

Print or Type name

Title

Company Name

Phone Number