

To be filled in by AQ Staff	
Permit No.:	_____
Area:	_____
Water Truck(s):	_____
Hydro Basin:	Yes / No

DUST CONTROL PERMIT APPLICATION

FEE as of July 1, 2019: \$237.00 per acre – a one-time \$87.00 admin fee per permit
(Less than .5 acres round down; .5 and greater round up)

THE “APPLICANT” IS RESPONSIBLE FOR ALL DUST CONTROL 24 HOURS A DAY, SEVEN DAYS A WEEK, including weekends and holidays, from commencement of project to completion.

The application must signed by the Applicant or his Attorney in Fact. Fill in the application completely, attached with a site location, grading and/or phasing map(s) or it will be returned for completion.

- Name of Development: _____
- Development Address: _____
Please Provide the Parcel #(s): _____ (Required)
- Size of Project (disturbed acres): _____
- Type of Project (choose one):
 Commercial Municipal Projects Utilities New Road/Street/Highway
 Road Rehab/Maintenance Residential Sub/Multi-Family Single Family Residence
- If there is an existing Dust Control Permit, list permit number: _____

NOTE - - The Dust Control Permit is valid for eighteen (18) months from the date of approval. If the project is not complete or has not commenced by the expiration date, the Applicant must submit a new application and site map to the Air Quality Management Division. Failure to do so will result in the permit expiring and may result in enforcement action.

- APPLICANT -- Name and Current Address of Applicant:**
 Applicant: _____ Contact: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone Number: _____ Email: _____
- Name and Address of General Contractor:**
 Owner: _____ Contact: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone Number: _____ Email: _____

Proposed Construction Dates – Per Phase: * provide site location, grading and phasing maps *****

On-Site Grading/Excavation: **Start:** _____ **Complete:** _____
 Building Construction: **Start:** _____ **Complete:** _____

8. Will fill material be required? Yes yd³ _____ No
9. Will there be an excess of native material as a result of excavation? Yes yd³ _____ No
10. Will there be any crushing/screening equipment used during construction?
Yes No If yes, Stationary Source Permit #: _____
11. Amount of Material to be excavated (yd³): _____
12. Is there a soil analysis report available? Yes No
14. On-Site soil type: _____
15. Method of dust control to be utilized (per phase):

Water Truck(s) _____ (number of trucks)
 Chemical Sealant _____ (type – attach MSDS Sheets)
 Sprinklers/Water Cannons _____ (locations)
 Compaction _____ (percent)
 Enclosure _____ (fences, windbreaks)
 Revegetation _____ (type – attach seeding schedule)
 Will temporary irrigation be supplied? Yes No
 Water Source: _____
 Speed Limits _____ Other _____

NOTE - Permanent stabilization methods such as construction/landscaping, revegetation, chemical sealant/palliative, or other approved method(s) of dust suppression must occur “within 30 days of grading completion”. Dust suppression must continue regardless of construction status.

16. Method to control mud and soil being tracked onto adjacent paved roadways: _____
17. Frequency of daily street cleaning: _____
18. Describe the methods (fences, barriers, etc.) to prevent unauthorized traffic on the construction site(s): _____

19. Persons to be contacted, by cell phone, during non-working hours in case of dust problems:

Name & Phone no: _____ Email: _____
 Name & Phone no: _____ Email: _____

20. The **Applicant’s signature or that of his/her Attorney in fact** on this application shall constitute agreement by the Applicant to accept responsibility for meeting the “Conditions of Plan” (attached):

Applicant Signature

Date

Print or type name

Title

Company Name

Phone Number