

**APPLICATION FOR AN AIR QUALITY STATIONARY SOURCE PERMIT TO OPERATE –
FUEL BURNING**

Return to: Washoe County Health District
Air Quality Management Division
1001 East Ninth Street B171
Reno, Nevada 89512
(775) 784-7200 FAX (775) 784-7225

www.OurCleanAir.com

GENERAL INFORMATION FOR ALL AIR QUALITY PERMIT TO OPERATE APPLICATIONS

- Application must be filled out completely for all items that are applicable.
- Application must be signed by a responsible person.
- **For new facilities an additional Operating Permit Fee will be assessed after completion of the air quality emissions review which will be based on potential emissions calculated for the first year.**
- A Plan Review Fee of **\$162** must be submitted with this Application

Legal Business Name (Name Permit will be issued under):

Street Address: _____

City: _____ State: _____ Zip Code: _____

Onsite Contact: _____ Title: _____

Telephone: _____ E-Mail: _____

1. Mailing Address (if different than above):

Street Address: _____

City: _____ State: _____ Zip Code: _____

Business Representative: _____ Title: _____

Telephone: _____ E-Mail: _____

2. Billing Address (if different than above):

Street Address: _____

City: _____ State: _____ Zip Code: _____

Representative: _____ Title: _____

Telephone: _____ E-Mail: _____

Construction Start Date: _____ Operations Start Date: _____

Type of Equipment (please attach list if more than one item): _____

Hours per Day _____ Days per Year _____

Max. Aggregate input BTU/hr: _____

Type of Fuel used: Natural Gas Fuel Oil Coal Wood

Type of Back-up Fuel used: Natural Gas Fuel Oil Coal Wood

Amount of Fuel Consumed per Year: _____

Sulfur Content if Oil or Coal is used: _____

Use of Air Pollution Control Apparatus: Yes No

If Yes, please describe (manufacturer, model etc.): _____

Attach List of All Fuel Burning Equipment at Facility (see sample excel spreadsheet at www.OurCleanAir.com):

Any Additional Information – please include attachments if necessary:

NOTE: Applicant agrees to allow on-site inspection during and after construction by the Air Quality Management Division during working hours without prior notice. The operator must notify this office when the facility commences and completes construction. An official Permit to Operate will not be issued until a final inspection is made and all required test data has been forwarded to this office assuring that equipment will meet all district and state regulations.

This application is submitted in accordance with the provisions of Section 030.000, and under penalty of perjury, to the best of my knowledge the information supplied in this document is true and correct.

Responsible Party Signature Date

Print Name Title

Revised 6/11/2019 – KP