Class II
Air Quality Operating Permit
Applicability Determination Form

Facility Name: Click or tap here to enter text.

Please Submit Request to:
Nevada Division of Environmental Protection
Bureau of Air Pollution Control, Class II Permitting Branch
901 South Stewart Street, Suite 4001
Carson City, Nevada 89701-5249
Phone (775) 687-9349

June 2020
REQUEST FOR
CLASS II AIR QUALITY OPERATING PERMIT
APPLICABILITY DETERMINATION

IMPORTANT INFORMATION

- This application shall be used only for an Air Quality Operating Permit Applicability Determination under Nevada Administrative Code (NAC) 445B.327(9). If other activities that have the potential to impact water or land resources are planned, other permits may be required.

- A printed copy of the application must be submitted (mailed or hand delivered).

- The application filing fee required by NAC 445B.327 must be submitted with the completed application. The fee for an Applicability Determination is $1,000. Checks must be made payable to: Nevada State Treasurer, Environmental Protection. Fees may also be submitted electronically at https://epayments.ndep.nv.gov/.

- A request for an Applicability Determination must be signed by a Responsible Official, as defined in NAC 445B.156. If the request is signed by a person other than the Responsible Official, the request will be returned as incomplete.

- All items in the Applicability Determination must be addressed. If an item does not apply “N/A” or similar notation must be entered in the appropriate blank. All other information must be provided.

- All information required by the “General Company Information” section must be completed.

- Assistance in completing this Applicability Determination is available from the Business Environmental Program, University of Nevada, Reno at (775) 834-3687 or (800) 882-3233 (toll-free).
GENERAL COMPANY INFORMATION

All persons seeking an Applicability Determination shall complete each item or explain in the space provided why no information is needed. Please specify "N/A" (Not Applicable) if necessary.

1. COMPANY NAME AND ADDRESS [NAC 445B.295(1)]:

(Name)

(Address)

(City) (State) (Zip Code)

2. Owner's Name and Address [NAC 445B.295(1)]:

(Name)

(Address)

(City) (State) (Zip Code)

3. Source Name and Mailing Address, if different from #1 [NAC 445B.295(1)]:

(Name)

(Address)

(City) (State) (Zip Code)

4. Plant Manager or Other Appropriate Contact [NAC 445B.295(1)]:

(Name) (Title)

(Address)

(City) (State) (Zip Code)

(Telephone #) (FAX #) (E-mail address)
GENERAL COMPANY INFORMATION (CONTINUED)

5. Responsible Official Name, Title and Address [NAC 445B.295(1)]:

   (Name)               (Title)
   __________________________________________________________
   (Address)            (City)                  (State)            (Zip Code)
   __________________________________________________________
   (Telephone #)        (FAX #)                 (E-mail address)
   __________________________________________________________

In order to provide the best response to an Applicability Determination request, please complete the following sections as thoroughly as possible.

6. Standard Industrial Classification Code:
   Please provide/attach a complete description of the Standard Industrial Classification (SIC) code that best describes your operation.

   __________________________________________________________
   __________________________________________________________

7. Facility Location Coordinates:
   Please provide/attach facility location coordinates to include the County; Section, Township, and Range; Hydrographic Basin (if known); and UTM Coordinates in NAD 83, Zone 11.

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

8. Process Narrative:
   Please provide/attach a complete description of the facility’s processes and their approximate location within the plant. Include a process flow diagram depicting the layout of the plant. For guidance on process flow diagrams please refer to this document: https://ndep.nv.gov/uploads/air-aqm-docs/guidance-process-flow-diagram.pdf.

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

9. Projected Material Throughputs and Air Emissions:
   Please provide/attach a complete description of the projected material throughputs, estimated air emissions, and the methodology used to determine those emissions (manufacturer’s guarantee, MSDS sheets; AP-42 emission tables, stack test results, etc.). If unable to do so, please specify what technical assistance you may require.

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
10. Projected Surface Area Disturbance Acreage During Construction:
Please provide/attach a complete description of the projected construction activities to take place at the project site and estimate the number of acres to be disturbed. Any construction project of 5 acres or more must attain a Surface Area Disturbance Permit before commencing construction. Regardless of project size, NAC 445B.22037 requires fugitive dust to be controlled, and requires an ongoing program, using best practical methods, to prevent particulate matter from becoming airborne.
The Responsible Official must sign and date this applicability determination certification. *If the request is signed by a person other than the Responsible Official, as defined in NAC 445B.156, the request will be returned as incomplete.*

**Note:** According to NAC 445B.156, **Responsible Official** means:

1. For a corporation:
   (a) A president;
   (b) A vice president in charge of a principal business function;
   (c) A secretary;
   (d) A treasurer; or
   (e) An authorized representative of such a person who is responsible for the overall operation of the facility and who is designated in writing by the officer of the corporation and approved in advance by the director.

2. For a partnership or sole proprietorship: a general partner or the proprietor, respectively.

3. For a municipality or a state, federal or other public agency: a ranking elected official or a principal executive officer, including, for a federal agency, a chief executive officer who has responsibility for the overall operations of a principal geographic unit of the agency.

4. For an affected source: the designated representative or his alternate, as defined in 42 U.S. C. § 7651a (26).

**PLEASE NOTE THE FOLLOWING REQUIREMENTS WHICH APPLY TO APPLICABILITY DETERMINATION REQUESTS DURING THE EVALUATION PROCESS:**

A. An individual or company seeking an Applicability Determination must submit supplementary facts or corrected information upon discovery [NAC 445B.297(1)(b)].

B. An individual or company seeking an Applicability Determination is required to provide any additional information which the Director requests in writing within the time specified in the Director’s request [NAC 445B.297(1)(c)].

C. Submission of fraudulent data or other information may result in prosecution for an alleged criminal offense (NRS 445B.470).

**CERTIFICATION:** I certify that, based on information and belief formed after reasonable inquiry, the statements contained in this application are true, accurate and complete.

____________________________________________________________________________________

Signature of Responsible Official

____________________________________________________________________________________

Print or Type Name and Title

____________________________________________________________________________________

Date